BHT2026 • NASHVILLE •
WORKSHOP FIELD NOTES

BHT IMPACT

MCert

BY YOUR POWERS COMBINED

BHT Impact & MCert Take on Measurement at BHT2026

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90 minutes. Big questions. The whole ecosystem in one room.





So what happened in Nashville?

Imagine 90 minutes of nonstop lightbulb moments about showing real, measurable impact in youth mental health getting locked away in a conference room in Nashville! Couldn't be us!

On paper, **Measure What Matters: Building an Actionable Measurement Strategy in Youth Behavioral Health was an interactive workshop** at Behavioral Health Tech's 2026 Annual Conference.

The real ones know, that **workshop was really code for a measurement barter party (BBQ if you will- we were in the south after all),** where MCert and BHT Impact teamed up to get youth, caregivers, payors, builders/innovators, providers and researchers together in a room to dance with three of the biggest challenges related to demonstrating measurable success in youth mental health services and solutions.

And apparently, when it comes to throwing a party about measurement, we know ball. **Since the session, we've received word from dozens of attendees and counting, that the "workshop" was one of the most useful and actionable conversations about key challenges related to measuring impact in youth mental health**, and we're here for it! Our goal was not only to begin the discussion, but to continue a broader conversation where the ideas, perspectives and expertise of multiple stakeholders are brought together to help solve these difficult problems.

If you couldn't make it to BHT, **consider this your seat in the room where it happened (thank you Lin-Manuel, iykyk), to learn about why we created this session, what we learned, what challenged us and what we can't stop thinking about.** If you were in the room, we want to share what happened at other tables and give you takeaways to bring back to your schools, companies, and communities.





Wait, who's throwing this measurement party?

BHT IMPACT

Focused on accelerating the impact of youth-focused innovators while amplifying the lived experiences of youth and caregivers through resources, collaborations, and partnerships.

MCert

A non-partisan organization that defines evidence-informed Quality Standards for subclinical digital youth mental health tools, and coordinates the stakeholders needed to drive their adoption and implementation in real-world settings.





BHT Impact is a fiscally sponsored project of Moore Impact, a 501(c)(3) public charity. BHT Impact is collaborating with Behavioral Health Tech on youth-focused programming for the BHT 2026 Conference. BHT Impact does not own or operate the conference, and Moore Impact and Behavioral Health Tech are separate organizations.

The Measurement Party MVPs

Shout out to *everyone* who participated in the session! We especially want to thank our youth experts, table facilitators and panelists!

YOUTH EXPERTS

Sahria C.
Lalah J.
Javier G.
Sadie L.
Eli G.
Madison W.
Sidney T.
Courtney C.
Aanika N.
Kalan D.
Mumtaz C.
Anika N.
Ashmita A.
Andres V.
Mlumbeni N.

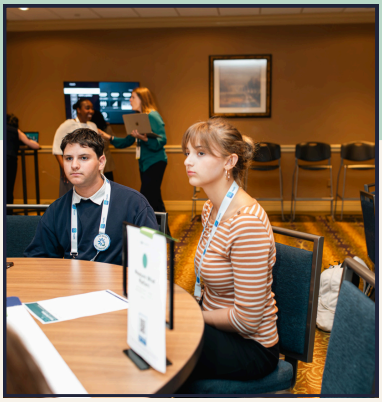


TABLE FACILITATORS

Sidrah Durrani
Robin Rich
Amanda Beausoleil
Vivian Chong
Greg Milarnik
Samira Moosavi
Correy O'Neal
Annette Fellows
Bridgette Nielsen



EXPERT PANELISTS

Kay Nikiforova
Adele Wang
Angel Zhong
Amy Pearlman
Nathaan Demers



Girl, back up. Why did we do this?

Figuring out how to measure success in youth mental health is a huge, and often confusing, task. A few priority grievances rose to the top:

01

We don't all agree on what matters.

Different stakeholders prioritize different outcomes—and may not even be asking the same questions.

02

Doing the measurement is its own hurdle.

Even when people agree on what to measure, the nuts and bolts of collecting, protecting, and using data are hard.

03

The value story has to reach the people holding the purse strings.

We need credible ways to show how services and solutions make a real difference in people's lives.

And that's the short list.

Keeping it real, we just knew we didn't have the answers to all of these questions. In fact, here at BHT Impact we've been keeping track of how much we know and don't know using this handy Measurement Map.

So, rather than stewing on these challenges alone, we decided it was time to take these challenges to the people!

So, what did y'all do?

You've trekked across the longest conference center ever built and finally arrived in a small, slightly sweaty room. Young people, caregivers, health plan leaders, innovators, clinicians, researchers, and advocates are seated at more than ten roundtables. Flip charts, sticky notes, and markers are everywhere.

The goal of the session was to use part of the time to drill into the problems we all face every day and then switch up tables to then brainstorm solutions, ideas, and hypotheses of how to solve those problems. We split our room into 3 of the biggest problem buckets and provided one key question for the tables to think through depending on which problem bucket they chose.

WHAT TO MEASURE AND WHY

What counts as progress or a desired outcome depends on who you ask and what that stakeholder values. For instance, quality of life, wellbeing or other aspects of functioning in day-to-day life may be the most important metrics to a young person, whereas another stakeholder may prioritize metrics around use of services. In a world where prevention of an undesired outcome reigns supreme, success may look like nothing bad is happening, but also that "nothing is happening." A young person doesn't eventually escalate, or a family becomes more stabilized which helps to maintain the wellbeing status of the young person.

Core Question: ***How do we prove the value of something that doesn't actually happen?***

GETTING MEASUREMENT DONE

Every party does have a slightly unglamorous part, and getting measurement done was about the challenging "how" behind measurement. Setting up data collection and reporting systems, protecting data security and privacy, and making sure that data are usable and useful is no small task. It's also expensive. The reality is, many small organizations doing great work can't afford a dedicated data role, but they can't get funding or additional resources/support without data. And that friends, is called a "chicken-and-egg" problem.

Core Question: ***What is the realistic minimum viable infrastructure, and who should actually be paying for it?***

SHOW ME THE MONEY

And lastly, we cut to the chase. Or cut to the checks depending on who you ask. The reality is, builders and innovators in youth mental health are able to offer their services because they are the solution to a problem that someone has. Whether that is a payor, a funder, a state agency, or a provider. The list goes on.

Core Question: ***How can our data be used to prove the value story that we have to offer?***

So What Did We Actually Figure Out? Plot Twist: It's All Connected

Right upfront, we laid these out as individual categories to try and get our arms around a manageable chunk of the problem. You'll clock pretty quickly as you read that each of these problems is interconnected, and so too are their solutions. Le sigh.

That said, we came away with more clarity on the nitty gritty details of these problems, and most importantly ideas about solutions that, collectively, we might be able to pursue if we have the right folks at the table (that's you. If you're reading this, we mean you specifically).







What to Measure and Why Takeaways

"Health plan leaders shouldn't decide what quality means on their own."

Start with what youth value and work backwards

We're not going to sugar coat it, youth and funder priorities must co-exist.
We absolutely need to identify measures that are tied to reimbursement and/or funding. That said, it was clear that sequencing may be an opportunity for innovators to consider. Rather than building first around what is fundable, establish the value for youth and families, measure what helps to get at the root of the problem youth are facing, and then identify how to tie those metrics to resources. In fact, Amy Pearlman kept it real and said "health plan leaders shouldn't decide what quality [or outcomes] means on their own." They need inputs from youth, families, researchers, providers and more to make those determinations. Youth leaders, including Gabriel Funches, clued us in that youth well-being is "how safe you feel at home, how heard you feel, and how much stress you carry from school, jobs and money." If your metrics aren't finding ways to also capture these kinds of elements, your measurement battery is likely incomplete.

Co-design with youth from the beginning

Bringing young people in only after a solution is built is tokenism.

Community-based participatory research, youth advisory boards, and other ongoing approaches can help youth shape the questions being asked. Innovation has to fit the context of the population it serves; strong research evidence alone can't make a mismatched solution work.

Answer "what's in it for me?" for people filling our surveys

- **Share results in real time** with the people who complete them.
- **Explain where their data goes** in plain language.
- **Pay or reward people for their time**, and consider gamification.
- **Keep a human in the loop,** whether that's a conversation, encouragement, or a trusted adult.

Getting Measurement Done Takeaways

"It's one thing to collect it, it's another thing to deliver it back."

Data collection has to be built into care & meaningful to the people asked

Participants wanted collection to be a normal part of care, so it stops being an extra ask. They stressed mapping what data already exists, building meaning for youth, and compensating or motivating respondents in ways that go beyond a gift card. A concern raised was that youth may refuse to give data they don't find valuable, even when payors want it, so 'measuring what matters' is also critical for successful implementation.

Impact means different things to different stakeholders, and standards are unsettled

A clinician's idea of impact may differ from a funder's or payer's, and the challenge is finding shared language without diluting the narrative.

Participants proposed starting small and scaling over time, but the tasks are big and value is still being defined. Questions of who pays, who is accountable, and how to standardize and compare data came up repeatedly, with no resolution on how comparability fits with what youth find meaningful

Data has to flow back, with transparency, trust, and participant agency

Participants reflected on the need for more ethical circulation of data to all stakeholders, rather than focusing exclusively on collection.

Ideas included providing progress reports to respondents, translating impact back to the people surveyed, facilitating participant control over their data, and keeping youth involved in leading the work.

Show Me The Money Takeaways

When it comes to funding youth mental health, the system isn't always set up to reward the outcomes we care about most. Participants wrestled with how to demonstrate value to funders when prevention takes years to pay off, data is fragmented, and the people holding the purse strings don't always prioritize the same outcomes as the young people receiving support.

The system rewards crisis intervention, not prevention

Participants called out a fundamental mismatch between how youth mental health solutions create value and how that value gets measured and funded. Crisis intervention can generate immediate, visible costs and outcomes, while prevention often means proving the value of something that *didn't* happen. Demonstrating the impact of prevention may require following a young person's mental health journey over many years, making the return on investment difficult to capture in the short term. The group challenged the field to look beyond crisis metrics like emergency department visits and consider how to measure de-escalation, stability, and the long-term value of keeping young people well.

You can't prove your value without the right data, relationships, and runway

Organizations face a tough catch-22: they need data to secure funding, but they need funding to build the infrastructure required to collect and analyze that data.

Paid pilots and early access to claims data could help innovators demonstrate value before they have the resources to scale. Meanwhile, fragmented data across schools, providers, payors, and other entities makes it difficult to connect the dots between a solution and its impact. Participants surfaced the need for better data-sharing infrastructure, clearer expectations from funders, and measurement frameworks that are established early, not retrofitted when funding is on the line.

A compelling value story starts with the people you're trying to help

Funders and innovators don't always define success the same way young people and families do. A solution may look valuable through a cost-savings lens while missing the outcomes that matter most to the people receiving support.

Participants emphasized starting with a clear value proposition, engaging youth throughout the process, building trust with the communities being served, and asking funders directly what evidence they need to see. The goal isn't simply to produce data that makes a funding case; it's to build a credible, patient-centered story of impact that reflects people's lived experiences and helps direct resources toward solutions that make a meaningful difference.

Okay, but what do the experts say?

After brainstorming, debating, and collectively pulling at the many threads of these measurement challenges, our tables got to do something pretty great: put their biggest questions directly to a panel of experts.

The goal wasn't to have the experts swoop in with all the answers (if only!). It was to pressure-test the ideas coming out of the room, bring in perspectives from across the field, and get a little closer to figuring out what it will actually take to measure impact in youth mental health. ***A few themes really stuck with us.***

If young people aren't defining success, who are we measuring it for?

The experts reinforced something that sounds obvious but is surprisingly easy to lose sight of: real success is human success. Young people need to be involved not just in answering surveys, but in shaping the questions we ask, the outcomes we prioritize, and the way we define impact in the first place. Community-based participatory research and human-centered design offer ways to build measurement around young people's lived experiences, rather than asking them to fit into frameworks designed without them.

Maybe it's time to stop measuring what's wrong and start measuring what's going right.

Symptom reduction matters, but it doesn't tell the whole story of a young person's well-being. The panel challenged us to think beyond deficits and consider what it looks like for young people to actually thrive: feeling connected to others, experiencing belonging, building agency, and having supportive relationships across generations. The catch? The healthcare system and its payers aren't likely to shift toward well-being measures on their own. Moving the needle will take collective advocacy from providers, communities, and government—not just individual organizations deciding to measure differently.

Getting payers to care about what communities care about takes a village.

If the metrics that determine funding aren't capturing what matters to young people, how do we change them? The panel pointed to community and member advisory councils as one way to bring lived experience into payer decision-making. Local and regional health plans may be more receptive to these conversations than national ones, making them a practical place to start. Partnerships with city and state health departments and other local civic institutions can also help build the relationships and collective voice needed to advocate for better measurement and funding models.

More Expert Takeaways



Data collection shouldn't come at the expense of human connection.

We can collect all the data in the world, but if the process leaves young people feeling like a collection of checkboxes rather than people, we've missed something important. The experts emphasized that every question asked in a clinical setting should have a clear purpose and, ideally, a direct benefit to the person answering it. That means being thoughtful about survey burden, giving young people room to explain their experiences in their own words, and adapting the approach to the context. When someone is navigating a crisis or receiving short-term care, for example, a *minimum viable survey* focused on the information needed to support them right now is a much better starting point than a lengthy questionnaire.

The numbers matter. So do the stories behind them.

Quantitative measures can help us spot patterns and track change, but qualitative data can tell us what those patterns actually mean to the people experiencing them. Open-text responses give young people room to share nuance that a checkbox might miss. And as organizations explore tools like AI to help identify themes across large volumes of qualitative feedback, the experts emphasized that privacy and appropriate research safeguards can't be afterthoughts. The opportunity is to make richer, more human insights usable at scale without compromising the trust of the people sharing them.

The panel didn't magically solve measurement in youth mental health in one sitting. But it helped sharpen the questions, challenge some of our assumptions, and point toward a more human-centered way forward. And that's exactly what we hoped would happen: not a room full of people pretending to have all the answers, but a room full of people getting better at figuring out the right questions to ask together.

And maybe the simplest reminder from one of our panelists was the one worth holding onto most:

"It just has to be useful. That's all." - Kay N.

That's all for now!

Know a friend who wasn't there and you think would be kicking their feet with gladness to get this rundown? Send it their way!

If you had this forwarded to you and want to stay up to date on more Impact Measurement solutions in youth mental health, give us a follow below:

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Till soon...





