



Promoting Student Mental Health

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Welcoming Inclusion

We want to learn about
you...

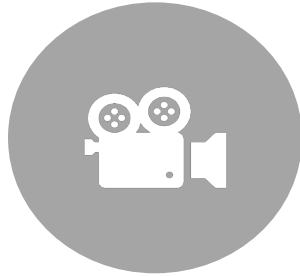


From [CASEL's 3 Signature Practices](#)

Housekeeping Notes



WEBINAR
IS BEING
RECORDED



PARTICIPANTS
ARE ON MUTE
& CAMERAS
ARE DISABLED



INVITE YOU TO
USE THE CHAT
TO CONNECT/
COMMENTS



QUESTIONS
CAN BE ADDED
TO THE Q & A

NYS
TEACHS
Help Line

800-388-2014

Accessible 24/7, Specialists are
available 9 am to 5 pm

If you leave a message, someone
will call back next business day

Learning Objectives

Participants will:

- understand student mental health, including prevalence, risk and protective factors, and signs and symptoms.
- explore common misunderstandings and stigma.
- identify strategies to promote student mental health in school.
- identify and practice staff wellness strategies for managing stress at home and in the workplace.



“It would be a terrible tragedy if we beat back one public health crisis only to have another one grow in its place.”

Dr. Vivek H. Murthy, U.S. Surgeon General
Protecting Youth Mental Health

Framing the Conversation



Underlying Beliefs about Youth Mental Health

- Mental health is a public health concern that requires a public health approach.
- Schools can help students develop health promotion strategies but we need to engage youth in defining what is best for them.
- The mental health of adult caregivers should be prioritized.





MENTAL HEALTH CONTINUUM



*There is no health
without mental health.*

~ USSG Satcher

Paulie – 13 yo, 7th grade, Native American & White

Paulie lives with their mom in a small, rural community in WNY about one hour drive from the reservation where their dad lives. Paulie sees their dad about 1-2 times/year. Paulie's mom recently left an abusive relationship and now Paulie, a younger sibling and mom are living in a DV shelter. Paulie feels safe from the abuser but doesn't trust the people working at the shelter and thinks there are too many "rules". They are also concerned their dad will not know how to find them. Paulie has always enjoyed playing basketball and is close with their teammates but as a result of some recent fights at school, Paulie has been benched for 3 games. Now the team is mad at them because they are heading into the play-offs and Paulie was the top scorer. Also, Paulie just failed a Science test because there was no where quiet to study at the shelter, ruining an A they had in class. Finally, Paulie is frustrated because they missed several meetings of Robotics Club due to transportation problems.



Students will have a *severe* mental illness before age of 18.¹

More than **1/2** will be diagnosed with mental health disorder sometime in their life.¹

Among children ages 3-17, the most common diagnoses²:

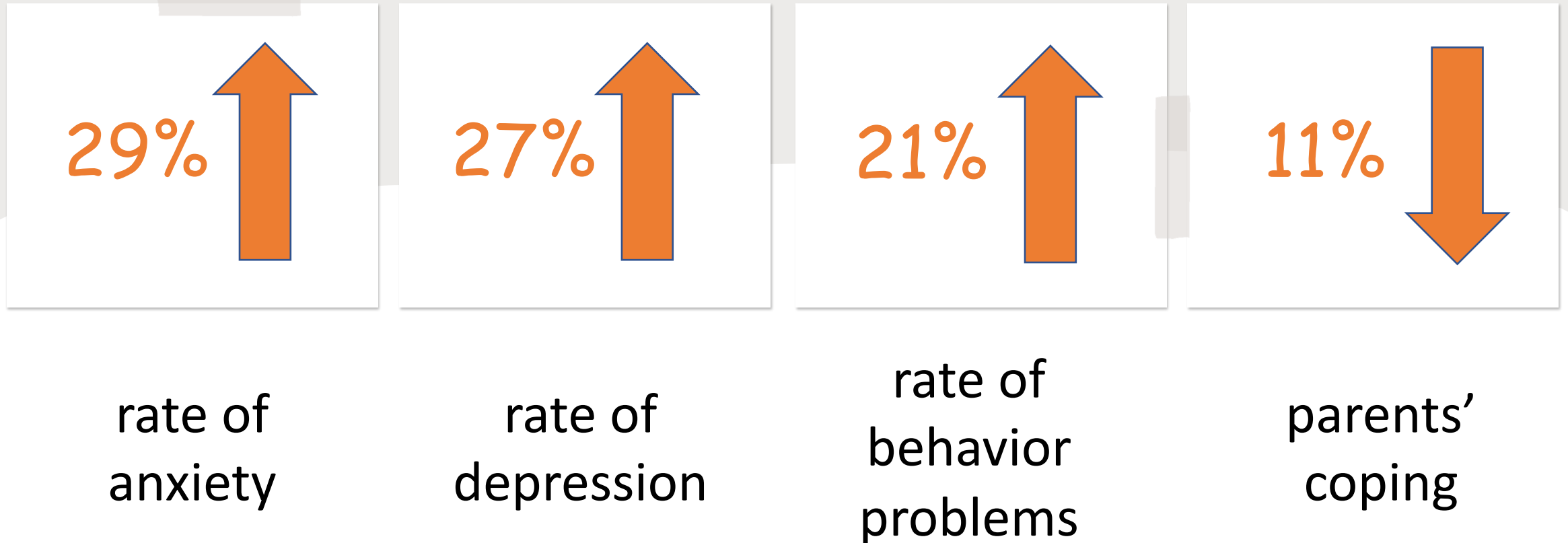
9.8% ADHD

9.4% Anxiety

It is not uncommon for mental health disorders to begin in adolescence or younger. The median amount of time between the onset of symptoms and professional help is

8-10 years

Children & Youth Mental Health, 2016-2020



Journal of American Medical Association Pediatrics (2022). Five-Year Trends in US Children's Health and Well-Being, 2016-2020. Retrieved from <https://jamanetwork.com/journals/jamapediatrics/fullarticle/2789946> on December 12, 2022.

Between April and October 2020, the proportion of mental health-related emergency room visits increased while the overall number decreased.

24%



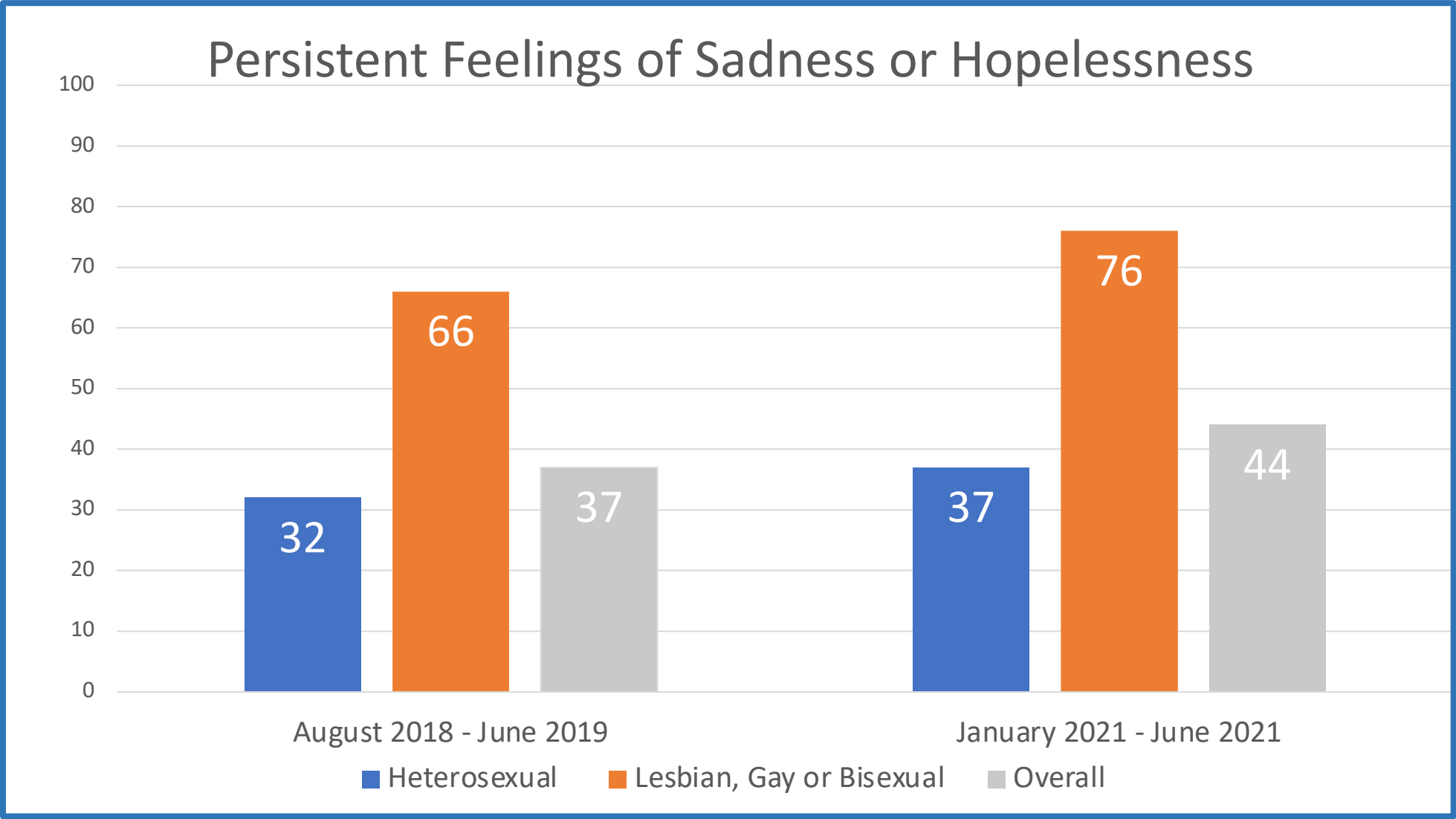
among 5-11
year olds

31%



among 12-17
year olds

Youth Mental Health



Centers for Disease Control and Prevention.(2022). Mental Health, Suicidality, and Connectedness Among High School Students During the COVID-19 Pandemic — Adolescent Behaviors and Experiences Survey, United States, January–June 2021. Retrieved from https://www.cdc.gov/mmwr/volumes/71/su/su7103a3.htm?s_cid=su7103a3_w on Aug 2, 2022.

Impact of Mental Health Challenges

Academic

- chronic absenteeism
- withdrawal from school
- lower academic achievement
- suspension, expulsion
- lack of engagement

Social-Emotional

- isolating, avoidant behaviors
- inability to regulate emotions
- challenges in relationships
- low self-esteem
- impulsive behaviors, lack of attention

Safety & Crisis

- risky behaviors
- unhealthy relationships
- exposure to or engaging in violent behaviors
- substance use/misuse, potential for overdose
- suicide thoughts and behaviors

Youth Suicide Thoughts & Behaviors

(US statistics)

In a High School classroom of 25 students...



seriously considered suicide



made a plan



made an attempt



44%

Centers for Disease Control and Prevention (2020). Suicidal Ideation and Behaviors Among High School Students, Youth Risk Behavior Survey, United States, 2019. Retrieved <https://www.cdc.gov/mmwr/volumes/69/su/pdfs/su6901a6-H.pdf> on December 12, 2022.



Black Students

- Suicide rate among Black students is increasing faster than any other racial or ethnic group. Historically, Black Americans have had some of the lowest rates.
- Black students under 13 are 2x as likely to die by suicide than their white counterparts.
- Attempts have increased 75% and yet Black students are less likely to receive care for depression and other mental health concerns.

National Action Alliance for Suicide.(2020). Ring the Alarm: the Crisis of Black Youth in America. Retrieved from <https://theactionalliance.org/resource/ring-alarm-crisis-black-youth-suicide-america> on December 12, 2022.



Hispanic/Latino/Latinx Students

- 22% of students have depressive symptoms; the highest of all other minority populations with the exception of AI/AN.
- Rates of suicide ideation are highest among Hispanic students that identify as female and rates for all Hispanic students are greater than their White and Black peers.
- Family and cultural stressors are a key contributor including migration issues, poverty, language barriers and acculturation.

Salud America! (2017). Mental Health and Latino Kids: A Research Review. Retrieved from <https://salud-america.org/healthy-minds-research/> on Aug 2, 2022.



American Indian/Alaskan Native Students

- Rate of suicide is higher than any other cultural or ethnic group in the United States.
- Among AI/AN population, 15-24 year olds have the highest rate. The suicide rate declines with age, whereas it increases with most other groups.
- Substance use and binge drinking among youth older than 12 is higher than any other racial/ethnic group.

Substance Abuse and Mental Health Services Administration. (2010). To Live to See the Great Day that Dawns: Preventing Suicide by AI/AN Youth and Young Adults. Retrieved from <https://store.samhsa.gov/sites/default/files/d7/priv/sma10-4480.pdf> on August 2.



LGBTQ+ Students

- 73% of LGBTQ students reported experiencing symptoms of anxiety and 58% experienced depression.
- Youth from highly supportive families attempted suicide at less than half the rate of those with less support.
- 60% of LGBTQ students who wanted mental health care were unable to get it.

The Trevor Project.(2022). The 2022 National Survey on LGBTQ Youth Mental Health. Retrievedf <https://www.thetrevorproject.org/survey-2022/#anxiety-depression> on Aug 2, 2022.

Signs & Symptoms of Mental Health Challenges

Emotional

- Persistent worry or intense anger
- Low mood or frequent mood swings
- Feeling overwhelmed or unmotivated

Behavioral

- Increase risky behaviors
- Avoid things previously enjoyed
- Poor academic performance

Physical

- Not concerned with self-care, personal hygiene
- Changes in eating and/or sleeping habits
- Feeling fatigued, lacking energy

Social

- Withdraw from family and friends
- Acting out or rebelling against authority
- Impatient with others; behaving aggressively

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Risk Factors for Mental Health Concerns

Social/Community

- Exposure to violence
- Unhealthy relationships
- Negative social media interaction/influences
- Lack of opportunity or sense of belonging
- Sudden/profound loss
- Discrimination/racism

Individual

- Feeling hopeless or helpless
- Stress & anxiety
- Previous episode or existence of another mental disorder
- Disability (physical or learning) or illness
- Substance use/misuse

Family

- Abuse and neglect
- Homelessness & poverty
- Chaotic or dysfunctional home
- Unhealthy learned behaviors
- Family mental health history

 cause

 likelihood

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Trauma Experience



experience at least one traumatic event before the age of 16, including:

- physical/sexual abuse or assault
- poverty and homelessness
- community violence
- bullying
- domestic violence
- sexual exploitation
- war or refugee experience
- natural disasters
- serious illness or accident
- sudden or violent loss

Homeless youth
are at an increased
risk for being
physically harmed



62%

LGBTQ+ Youth

& 47%

Heterosexual &
Cisgender Youth
report being
physically harmed



Homeless youth
report experiencing
mental health
problems.

Protective Factors to Promote Mental Health

Social/Community

- Early identification of challenges/concerns
- Support network, social connectedness
- Involvement in community, clubs and activities
- Meaning and purpose
- Safe community

Individual

- Healthy lifestyle choices & self-care
- Strong coping and emotional regulation skills
- Resilience, ability to with-stand adversity
- Secure sense of self and self worth

Family

- Safe and supportive environment
- Structure and clear expectations
- Model positive habits
- Openness and honest communication, inc. discussions about health, feelings, relationships.

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Relationships
Matter



Community Building Circles



- Writing prompts
- Literature discussions
- Current events
- Welcoming Inclusion
- “Leave it at the door”

Identify and
Regulate Emotions



Mindfulness Activities

- Integrate mindful activities, like guided imagery and grounding techniques, into the daily routine
- Provide materials such as manipulatives, color mandalas, chewing gum, DIY wellness tools for students





5



4



3



2



1



Grounding Technique:
Use Your Senses





Video available at <https://youtu.be/wGFog-OuFDM>



Love Your Space

*What helps you
reduce stress?*

- comfortable seats
- soft lighting
- relaxing sounds & smells
- plants & natural elements
- water features
- wellness tools



Welcoming Inclusion

Activities to build connection
Routines to support safety
Rituals to create structure

Engagement Strategies

Interaction and discussion
Partnering opportunities
Movement

Optimistic Closure

Reflection on learning
Making connections
Forward thinking





Thank you!

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