



# Just for the ASKing!

by Bruce Oliver

February 2016 Volume XIII Issue II

## Mental Health Issues of 21<sup>st</sup> Century Learners



Bruce Oliver, the author of *Just for the ASKing!*, lives in Burke, Virginia. He uses the knowledge, skills, and experience he acquired as a teacher, professional developer, mentor, and middle school principal as he works with school districts in across the nation. He has written more than 150 issues of *Just for the ASKing!* He is also a co-author of *Creating a Culture for Learning* published by Just ASK.

The **World Health Organization (WHO)** defines mental health as “a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.” **The Center for Disease Control (CDC)** uses the **WHO** definition. The **WHO** website states that “around 20% of the world’s children and adolescents have mental disorders or problems. About half of mental disorders begin before the age of 14. Similar types of disorders are being reported across cultures. Neuropsychiatric disorders are among the leading causes of worldwide disability in young people.”

Educators often work with children who lack the resilience and coping skills they need to be successful. These are the students whose behavior may fluctuate and become unpredictable. They may be defiant and argumentative; they may be withdrawn or demonstrate feelings of highs and lows; they may be unable to cope with regular occurrences and daily routines; or their academic performance may take a sudden drop. Sometimes the practitioner recognizes these problem areas but does not know how to intervene successfully. In other instances, a child’s problematic behavior may go overlooked. It is vitally important that school personnel delve more deeply into the issue of mental health and become as educated as possible about the signs of distress in students and, as well, know when and how to follow up in order to address a potentially serious condition.

The mental health problem is not confined to the United States. HRH Duchess of Cambridge is featured in a recently released clip available at [www.youtube.com/watch?v=21jqtj-UB\\_w](http://www.youtube.com/watch?v=21jqtj-UB_w)

in which she, along with primary age students, explain their needs, and publicizes her support for the UK’s first mental health week this month. She says, “Every child deserves to grow up feeling confident that they won’t fall at the first hurdle, that they cope with life’s setbacks,” she said, speaking from a classroom at Salusbury Primary School in London. “This resilience - our ability to deal with stressful situations - is something we begin to learn in childhood.”

In 2007, **ASCD** launched the **Whole Child Initiative** in an “effort to change the conversation about education from a focus on narrowly defined academic achievement to one that promotes the long-term development and success of children.” The tenets contained in the initiative are as follows:

- Each student enters school healthy and learns about and practices a healthy lifestyle.
- Each student learns in an environment that is physically and emotionally safe for students and adults.
- Each student is actively engaged in learning and is connected to the school and broader community.
- Each student has access to personalized learning and is supported by qualified, caring adults.
- Each student is challenged academically and prepared for success in college or further study and for employment and participation in a global environment.

Words and phrases embedded in these tenets transcend the requirement for students to simply meet curriculum standards. Terminology including **healthy lifestyle, physically and emotionally safe, connected to the school and broader community, and supported by qualified, caring adults** indicate that there is much more involved in reaching success with our children than school attendance, graduation rates, and improved test scores.

### **Alarming Data**

The **Youth Risk Behavioral Surveillance System** is a survey conducted by the **CDC**. According to 2013 data, suicide is the second leading cause of death for ages 10-24. Equally alarming is the fact that “more teenagers and young adults die from suicide than from cancer, heart disease, AIDS, birth defects, stroke, pneumonia, influenza and chronic lung disease, COMBINED.” The **CDC** has reported that one in five teenagers in the U. S. considers suicide annually. Stated more succinctly, “Every 15 seconds a teen in the United States tries to commit suicide. Every 90 minutes, one succeeds.” The most common cause of suicide is depression which can be caused by a number of factors including chemical imbalances, eating disorders, drug abuse, being bullied, divorce of parents, or academic failure in school.

### **Telltale Signs**

A recent issue of the *Virginia Journal of Education* included a feature on the importance of watching for signs that children may be suffering from mental disorders that are not properly addressed. According to the article, “what often seems like continuous belligerent, defiant or disengaged behavior could very well be indicative of a mental illness or emotional disorder.” The website **Mental Health America** provides an extensive list of signs of mental illness in young people. Common warning signs include:

- Confused thinking
- Social withdrawal
- Inability to cope with daily problems
- Excessive fears or anxiety
- Substance abuse
- Changes in sleeping and/or eating habits
- Hyperactivity
- Frequent outbursts of anger
- Unexplained physical ailments

The article concludes, “If educators were provided proper knowledge, training, and resources to recognize and effectively address such behaviors, it’s possible a few things can happen:

- Young people with mental illness could be identified sooner
- Proactive strategies could be developed for youth who have already been identified
- Safer and more effective interventions could be used by teachers and other educators.”

### **Academic Competition**

Students may experience pressure from sources different than those faced by the adults in their lives. In today’s schools, the curriculum may be more demanding, gaining admission to the college of one’s choice is more competitive, and success on high stakes standardized tests is imperative for future education decisions. The *Washington Post* reported, “Although the push for achievement at all costs may be its most intense in affluent communities, the pressure also exists in middle and working class communities. Lower-income parents are beginning to tell researchers that although they have neither the time nor the resources to take part in the hyper-competitive parenting culture, they worry that their kids will fall further behind as a result.”



## Social Media

In addition to learning to cope with the normal stress of facing the hurdles of adolescence, today's young people have the extra-added phenomenon of social media. Although there are many positive benefits derived from technological innovations, social media adds a dimension that can result in excessive peer pressure and cyberbullying. Most teenagers (and many tweens) have phones and social media platforms right at their fingertips. Some observers have concluded that social media is becoming more than just part of their world; for some teens it's almost their entire their world. **Connection** news reporter Victoria Ross writes, "Add social media to the mix, where students can compare their existence to other teens 24 hours a day on Facebook, Snapchat, Twitter and other social networks, and the resulting stress can lead to depression and suicidal thoughts." Discovery.com cites multiple studies including a survey of 753 middle school and high school students in which researchers found that those who spent more than two hours a day on social networking sites like Facebook, Instagram or Twitter were more likely to report distress, poor mental health and even suicidal thoughts.

## Personal Trauma

Some children experience pressure and stress from a trauma in their personal lives, including the death of a family member or loved one, witnessing violence or a crime, coping with family infighting or divorce, personal bullying, or homelessness. Reaction to these traumatic experiences may inadvertently show up in classroom behavior and impact the climate of the classroom. Elementary educators Pete Hall and Kristin Souers promote the idea of creating "trauma-sensitive" learning environments for students. They write, "When children lose the ability to cope with the traumatic events in their lives, they seek ways to regulate. They access whatever resources they have – healthy or unhealthy – to manage the intensity associated with the stress of these events." Hall and Souers point out that as educators we may not fully understand what students have experienced or understand their reactions. They recommend certain practices that may create a more peaceful and safe environment for all students. Their ideas are as follows:

- Understand student motives: Instead of scolding or punishing outbursts of negative behavior, try to understand what was behind the behavior.
- Build positive relationships: Pay specific attention to the students with the most challenges and gain their trust through acceptance.
- React strategically: Remain calm, consistent, and caring in the "face of provocative behavior" which can serve as a model for other students.
- Keep one's footing: Remain true to your beliefs and stay rooted in personal behaviors that will help students cope and improve their behavior.

## Adult Awareness

The message on the **American Psychological Association (APA)** website states, "Teen Suicide is Preventable." Although suicide may be difficult to accurately predict, the **APA** publicizes the following warning signs as ways to predict when a person may be suicidal:

- Talking about dying
- Recent loss
- Change in personality
- Change in behavior
- Change in sleep patterns
- Change in eating habits
- Fear of losing control
- Low self esteem
- No hope for the future



The APA website also reports that “National suicide prevention efforts have focused on school education programs, crisis center hotlines, and screening programs that seek to identify at-risk adolescents.” Some school divisions sponsor parent education sessions where health concerns are openly discussed in order to help parents watch for signs outside of school.

### **Examining Practices**

If educators are truly Whole Child advocates, it is important for them to do some soul searching by asking important questions:

- As a school, are we tuned in to our students so we can recognize when they are experiencing extreme pressure, and can we spot the signs of unusual duress?
- Are there ways our school can minimize the academic pressures students are experiencing?
- Are we building supportive relationships with students who may be more likely to feel undue pressure?
- Should we be more proactive as a school community to educate ourselves and have honest discussions so that we can prevent a tragedy from occurring that will negatively impact all of us?
- Are all personnel aware of the specific resources available to teachers and students?

We must remember that students cannot learn when their minds are distracted by extraneous events. Taking the right steps to help students regain and maintain mental stability will be life changing for students, their families and teachers as well.

## **Resources and References**

### **World Health Organization’s (WHO) Definition of Mental Health**

[www.who.int/features/factfiles/mental\\_health/en](http://www.who.int/features/factfiles/mental_health/en)

### **ASCD’s Whole Child Approach**

[www.ascd.org/whole-child.aspx](http://www.ascd.org/whole-child.aspx)

### **Suicide Prevention**

[www.afsp.org/understanding-suicide/facts-and-figures](http://www.afsp.org/understanding-suicide/facts-and-figures)

### **Youth Suicide Statistics**

<http://jasonfoundation.com/prp/facts/youth-suicide-statistics/>

### **Facts for Families Guide – Teen Suicide**

[www.aacap.org/AACAP/Families\\_and\\_youth/Facts\\_for\\_Families/FFF-Guide/Teen-Suicide-010.aspx](http://www.aacap.org/AACAP/Families_and_youth/Facts_for_Families/FFF-Guide/Teen-Suicide-010.aspx)

### **Academic Competition and Parental Pressure**

[www.washingtonpost.com/lifestyle/style/in-mclean-a-crusade-to-get-people-to-back-off-in-the-parenting-arms-race/2014/03/23/9259c6a2-a552-11e3-a5fa-55f0c77bf39c\\_story.html](http://www.washingtonpost.com/lifestyle/style/in-mclean-a-crusade-to-get-people-to-back-off-in-the-parenting-arms-race/2014/03/23/9259c6a2-a552-11e3-a5fa-55f0c77bf39c_story.html) by Bridgid Schulte

### **Preventing Teen Suicides**

[www.connectionnewspapers.com/news/2014/mar/05/preventing-teen-suicides/](http://www.connectionnewspapers.com/news/2014/mar/05/preventing-teen-suicides/) by Victoria Ross

### **Helping Students Who Struggle with Mental Illness**

[www.veanea.org/home/2657.htm](http://www.veanea.org/home/2657.htm)



**Negative Impacts of Social Media**

<http://news.discovery.com/human/psychology/is-too-much-social-media-use-bad-for-teen-health-150910.htm>

**Teen Suicide Is Preventable**

[www.apa.org/research/action/suicide.aspx](http://www.apa.org/research/action/suicide.aspx)

**Youth Risk Behavior Surveillance System (YRBSS)**

[www.cdc.gov/healthyyouth/data/yrbs/index.htm](http://www.cdc.gov/healthyyouth/data/yrbs/index.htm)

**Address Trauma with Calm, Consistent Care**

[www.naesp.org/sites/default/files/Hall\\_Souers\\_MA15.pdf](http://www.naesp.org/sites/default/files/Hall_Souers_MA15.pdf)

© 2016 Just ASK Publications & Professional Development

Permission is granted for reprinting and distribution of this newsletter for non-commercial use only. Please include the following citation on all copies:

Oliver, Bruce. "Mental Health Issues of 21<sup>st</sup> Century Learners" *Just for the ASKing!* February 2016. Reproduced with permission of Just ASK Publications & Professional Development (Just ASK).

© 2016 by Just ASK. All rights reserved. Available at [www.justaskpublications.com](http://www.justaskpublications.com).

To subscribe to this free monthly e-newsletter please visit: [www.justaskpublications.com](http://www.justaskpublications.com)



**Just ASK | [www.justaskpublications.com](http://www.justaskpublications.com) | Phone: 800-940-5434 | Fax: 703-535-8502**