Mental Health and Youth

Signs, Symptoms & Interventions

Girl Scouts of WNY
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Agenda

• What is mental health?
• Mental Health Disorders
• Trauma
• Disruptive Behavior Disorders
• Mood Disorders
• Psychosis
• Self-injury
• Risk/Protective Factors
• Interventions
• Treatment
• What can you do?
• Resources
What is Mental Health?

- Emotional, psychological, and social well-being
- How we think, feel, and act
- Helps determine how we handle stress, relate to others, and make choices
Factors Contributing to Mental Health Disorders

- Biological factors, such as genes or brain chemistry
- Life experiences, such as trauma or abuse
- Family history of mental health problems
- Stigma
Rise in Mental Illness Among Teen Girls
Mental Health Disorders

- Anxiety Disorders
- Behavioral Disorders
- Mood Disorders
Anxiety Disorders

• Anxiety disorders affect one in eight children
• Research shows that untreated children with anxiety disorders are at higher risk to perform poorly in school, miss out on important social experiences, and engage in substance abuse
• Anxiety disorders often co-occur with depression as well as eating disorders, attention-deficit/hyperactivity disorder (ADHD), and others
• Median age of onset is 11 years old
Anxiety Disorders

- Generalized Anxiety Disorder
- Social Anxiety
- Specific Phobias
- Obsessive Compulsive Disorder
- Panic Disorder
Generalized Anxiety Disorder

- Persistent and excessive worry about a number of different things
- May anticipate disaster and may be overly concerned about money, health, family, work, or other issues
- May worry more than seems warranted about actual events or may expect the worst even when there is no apparent reason for concern
Social Anxiety

• Intense anxiety or fear of being judged, negatively evaluated, or rejected in a social or performance situation

• May worry about acting or appearing visibly anxious (e.g., blushing, stumbling over words), or being viewed as stupid, awkward, or boring
Social Anxiety

- They often avoid social or performance situations, and when a situation cannot be avoided, they experience significant anxiety and distress.
- Strong physical symptoms, such as a rapid heart rate, nausea, and sweating, and may experience full-blown attacks when confronting a feared situation.
Specific Phobias

• Strong irrational fear reactions, work hard to avoid common places, situations, or objects even though they know there's no threat or danger

• People who experience these seemingly excessive and unreasonable fears in the presence of or in anticipation of a specific object, place, or situation have a specific phobia

• While some phobias develop in childhood, most seem to arise unexpectedly, usually during adolescence or early adulthood
Obsessive Compulsive Disorder

• People with OCD experiences obsessions and compulsions

• Obsessions are intrusive and unwanted thoughts, images, or urge that cause distress or anxiety.
  • Concerns about contamination, cleanliness, aggressive impulses, or the need for symmetry

• Compulsions are behaviors that the person feels compelled to perform in order to ease their distress or anxiety or suppress the thoughts
  • Checking, washing/cleaning, and arranging are common compulsions
Panic Disorder

• People who experience spontaneous seemingly out-of-the-blue panic attacks and are very preoccupied with the fear of a recurring attack
• Panic attacks occur unexpectedly, sometimes even when waking up from sleep
• Panic disorder usually begins in adulthood (after age 20), but children can also have panic disorder and many children experience panic-like symptoms (“fearful spells”)
Trauma

• Abuse – physical, sexual, or emotional
• Neglect
• Effects of Poverty
• Being separated from loved ones
• Bullying
• Witnessing harm to a loved one
• Natural disasters or accidents
• Unpredictable parental behavior (MH or SA)
Adverse Childhood Experiences (ACE) Study
Post-Traumatic Stress Disorder

• A serious potentially debilitating condition that can occur in people who have experienced or witnessed a natural disaster, serious accident, terrorist incident, sudden death of a loved one, war, violent personal assault such as rape, or other life-threatening events.
Signs and Symptoms of Trauma

• Difficulty paying attention
• Being quiet or withdrawn
• Frequent tears or sadness
• Talking often about scary feelings and ideas
• Difficulty transitioning from one activity to the next
• Fighting with peers or adults
Signs and Symptoms of Trauma

- Changes in school performance
- Wanting to be left alone
- Eating much or less than peers
- Getting in to trouble at home or school
- Frequent headaches/stomach aches with no apparent cause
- Behaviors common to young children (thumb sucking)
Mood Disorders

- Major depressive disorder
- Persistent depressive disorder (dysthymia)
- Bipolar disorder
- Disruptive mood dysregulation disorder
- Premenstrual dysmorphic disorder
- Mood disorder due to a general medical condition
- Substance-induced mood disorder
Major Depressive Disorder

- Persistent feelings of sadness or irritability
- Loss of interest or pleasure in all or almost all activities once enjoyed
- Feeling hopeless or helpless
- Having low self-esteem
- Feeling inadequate
- Excessive guilt
- Difficulty with relationships or social withdrawal
- Sleep disturbances, whether sleeping too much or too little
Major Depressive Disorder

- Changes in appetite or weight
- Decreased energy
- Difficulty concentrating or a decline in school performance
- Increased sensitivity to failure or rejection
- Indecision
- Frequent physical complaints, such as a headache, stomachache, or fatigue
- Thoughts of wishing to be dead
- Suicidal thoughts or attempts
Bipolar Disorder

- Have a very short temper
- Talk excitedly and quickly about a lot of different things
- Be unable to focus
- Rapidly jump from task to task
- Be unable to sleep but not feel tired
- Feel incredibly happy or act silly in an unusual way
- Do risky things like drinking while driving
- Do compulsive things like binge shopping
- Become overly sexual or sexually active
Psychosis – Early Warning Signs

• A worrisome drop in grades or job performance
• Trouble thinking clearly or concentrating
• Suspiciousness or uneasiness with others

• A decline in self-care or personal hygiene
• Spending a lot more time alone than usual
• Strong, inappropriate emotions or having no feelings at all
Early or First Episode Psychosis

• Hearing, seeing, tasting or believing things that others don’t
• Persistent, unusual thoughts or beliefs that can’t be set aside regardless of what others believe
• Strong and inappropriate emotions or no emotions at all
• Withdrawing from family or friends
• A sudden decline in self-care
• Trouble thinking clearly or concentrating
Self-Injury

• Burning and hitting oneself
• Scratching or picking scabs (to prevent wounds from healing)
• Overdosing on medications
• Pulling out one’s hair, eyelashes, or eyebrows with the intention of hurting oneself
• Inserting objects into one’s body
Reasons for Self-Injury

- To reduce anxiety/tension
- To reduce sadness and loneliness
- To alleviate angry feelings
- To punish oneself due to self-hatred
- To get help from or show distress to others
- To escape feelings of numbness (to feel something)
Risk Factors - Individual

- Female gender
- Early puberty
- Low self-esteem
- Anxiety
- Low-level depressive symptoms and dysthymia
- Emotional problems in childhood
- Conduct disorder
- Favorable attitudes toward drugs
- Rebelliousness
- Early substance use
Risk Factors - Family

• Parental depression
• Parent-child conflict
• Poor parenting
• Negative family environment
• Child abuse/maltreatment
• Divorce/Marital conflict
• Parental drug/alcohol use
Risk Factors – School/Community

- Peer rejection
- Stressful events
- Poor academic achievement
- Poverty
- Traumatic event
- Associating with drug-using peers
- Loss of close relationship or friends
Protective Factors - Individual

- Positive physical development
- Academic achievement/intellectual development
- High self-esteem
- Emotional self-regulation
- Good coping skills and problem-solving skills
- Engagement and connections in two or more of the following contexts: school, with peers, in athletics, employment, religion, culture
Protective Factors - Family

• Family provides structure, limits, rules, monitoring, and predictability
• Supportive relationships with family members
• Clear expectations for behavior and values
Protective Factors – School/Community

• Presence of mentors and support for development of skills and interests
• Opportunities for engagement within school and community
• Positive norms
• Clear expectations for behavior
• Physical and psychological safety
Interventions

Youth Mental Health First Aid

• Ages 12-18
• Nationally certification program
• 5-Step action plan - ALGEE
• Raises awareness/reduces stigma
• Identify signs and symptoms
• Learn how to respond in a crisis
Interventions

- Trusting relationships
- Exercise
- Play
- Nutrition
- Parental involvement
- Mentoring
- Social supports
Treatment

Cognitive Behavioral Therapy
- “The way we think affects the way we feel and behave.”
- Social skills training – Conduct Disorders
- Problem solving skills training (PSST)
  - Emotional education and self-monitoring of feelings and behavior
  - Self-talk

Dialectical behavioral therapy (DBT)
- Emphasizes taking responsibility for one’s problems
- Helps children examine how they deal with conflict and intense negative emotions
Treatment

Medication

• Preferably a child or adolescent psychiatrist
• Should not be used alone
• Comprehensive evaluation
• Comprehensive treatment plan
• On-going assessment
What can you do?

• Communicate
• Recognize that mental health directly affects academic performance
• Seek help from a mental health professional
• Allow youth to talk about troubling events and describe their emotions
• Continue to educate yourself
What can you do?

• Be culturally sensitive
• Create awareness – physical vs. mental
• Document
• Work with parents – be sensitive
Suicide Prevention Resources

• Chautauqua County
  24 Hour Hotline
  800-724-0461
  Kids Helpline
  877-543-7400

• Monroe County
  Mobile Crisis Team
  585-275-5151

• Crisis Services of Buffalo and Erie County
  24 Hour Hotline
  716-834-3131
  Spectrum Kids Helpline
  716-834-1144

• Niagara County Crisis Services
  716-285-3515
QUESTIONS???
THANK YOU!!!
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