

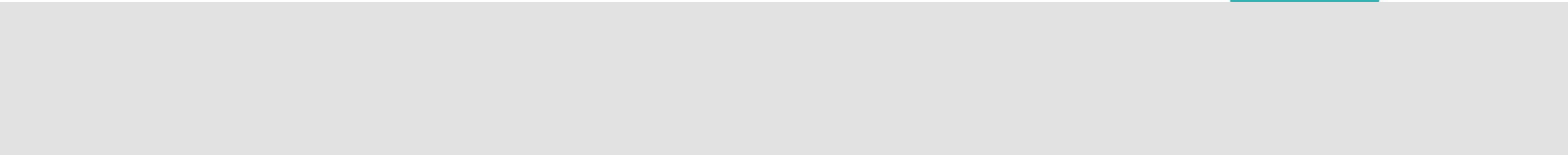


Your mental wellness.
Our mission.

Welcome to

Our Teens and Their Mental Health

*Raising Awareness for Students, Parents
and Educators*



Today's Presenter

Elise Resnick, PhD, LGMFT,
Mental Health Therapist,
EveryMind

Do Now Activity

Write down 2 questions you have about mental health and wellness

Agenda

LEARN key data on youth mental health and suicide

DESCRIBE the risk factors and warning signs of anxiety, depression and other mental health conditions

LEARN how to help someone struggling with a mental health challenge

IDENTIFY resources to support your family

EveryMind



60+ years serving Montgomery County



Largest provider of school-based mental health services in Montgomery County



Programs and services for the **entire lifespan** – from young children to older adults



Community education on mental health and wellness topics including Mental Health First Aid



Expanding our reach across the National Capital Region

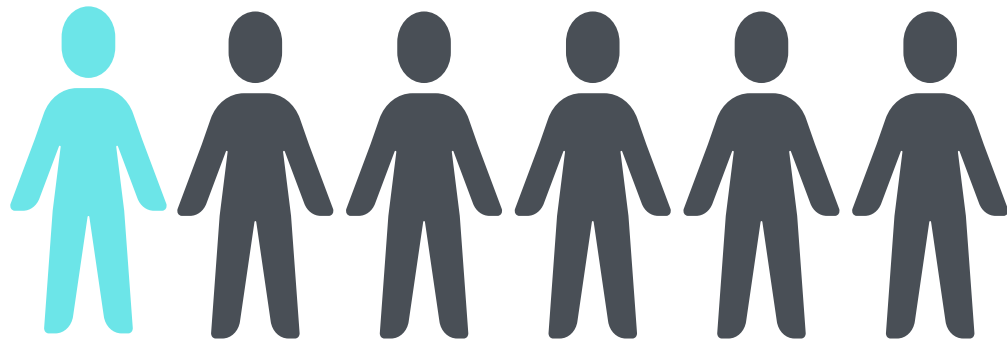
Learn key data on youth mental health and suicide

Objective 1

MYTH or FACT ?

Please put your answer in chat

If my child has friends and is doing well in school, they must not be struggling with their mental health.



More Common than You Think

1 in 6 youth experienced a
mental health concern in the
past year.

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Youth Mental Health- by the numbers



37%

High school students reporting persistent feelings of sadness and hopelessness (2019, YRBS)

1 in 6

High school students reported making a suicide plan (2019, YRBS)

1/3

High school students reported experiencing poor mental health during the COVID-19 pandemic (2022, CDC)

66%

Youth who feel connected at school and home are LESS likely to experience health risk behaviors

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LGBTQ Youth Suicide-by the numbers



42%

Seriously considered attempting suicide in the past year

75%

Reported that they had experienced discrimination based on sexual orientation or gender identity

1 in 5

Transgender and non-binary youth attempted suicide

40%

Lower risk of suicide when LGBTQ Youth have one accepting adult in their life

Mental Health Conditions in Teens – By the Numbers

31.9%	Anxiety
19.1%	Behavioral Disorders
14.3%	Mood Disorders
11.4%	Substance Abuse



When do mental health conditions start?



14 Age that $\frac{1}{2}$ of all long term-term mental health conditions begin

24 Age that $\frac{3}{4}$ of all long term-term mental health conditions begin

Common Age of Onset:

- Anxiety Disorders – Age 11
- Eating Disorders – Age 15
- Substance Use Disorders – Age 20
- Schizophrenia – Age 23
- Bipolar – Age 25
- Depression – Age 32

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Typical Adolescent Development

Physical Changes

- Changes in hormones
- Increases in height and weight
- Becoming more focused on physical concerns

Mental Changes

- Developing more abstract thinking skills
- Using logic and reason more in decision making
- Developing own beliefs
- Beginning to question authority

Typical Adolescent Development

- Emotional Changes
 - Can be quick to change
 - Feel more intensely
 - Can lead to risk taking and impulsive behavior
- Social Changes
 - May experiment with different levels of social and cultural identity
 - Peer influence increases
 - Notice sexual identity
 - Learn to manage relationships, including romantic relationships

MYTH or FACT ?

Please put your answer in chat

The cause of mental illness is mostly genetic.

Adverse Childhood Experiences (ACEs)

Link established between ACEs and adult mental health and social outcomes. ACEs include:

- Abuse (Physical/Sexual/Emotional)
- Neglect (Physical/Emotional)
- Witness to Intimate Partner Violence (particularly mother)
- Substance Abuse in the Home
- Mental Illness of Adult Living in the Home
- Parental Separation/Divorce
- Incarcerated Household Member

Adverse Childhood Experiences (ACEs)

In children, ACEs can impact:

- Brain Development
- Learning/Cognition
- Social Relationships
- Physical Health
- Ability to Tolerate Stress/Frustration

As adults, ACEs increase the risk of:

- Substance Use/Abuse
- Depression
- Unintended Pregnancies
- Obesity
- Heart Disease
- Missed work

ACEs by the Numbers...

- 38% of children in a national study had at least one ACE
 - 40% of white children
 - 51% of Hispanic children
 - 64% of black children
- 6–17-year-olds who experience 2 or more ACEs are twice as likely to be disengaged from school.



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DESCRIBE the risk factors and warning signs of common youth mental health conditions

Objective 2

It's Up to Us to Notice



<https://www.youtube.com/watch?v=zqMyLWMIuns>

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Warning Signs for Common Mental Health Conditions - Depression

- Poor academic performance
- Withdrawal from friends and activities
- Sadness and hopelessness
- Lack of enthusiasm, energy, motivation
- Anger and/or rage *
- Overreaction to criticism
- Poor self esteem
- Indecision, inability to concentrate, forgetfulness
- Restlessness/ agitation
- Changes in sleeping/eating patterns
- Substance use
- Problems with authority
- Suicidal thoughts

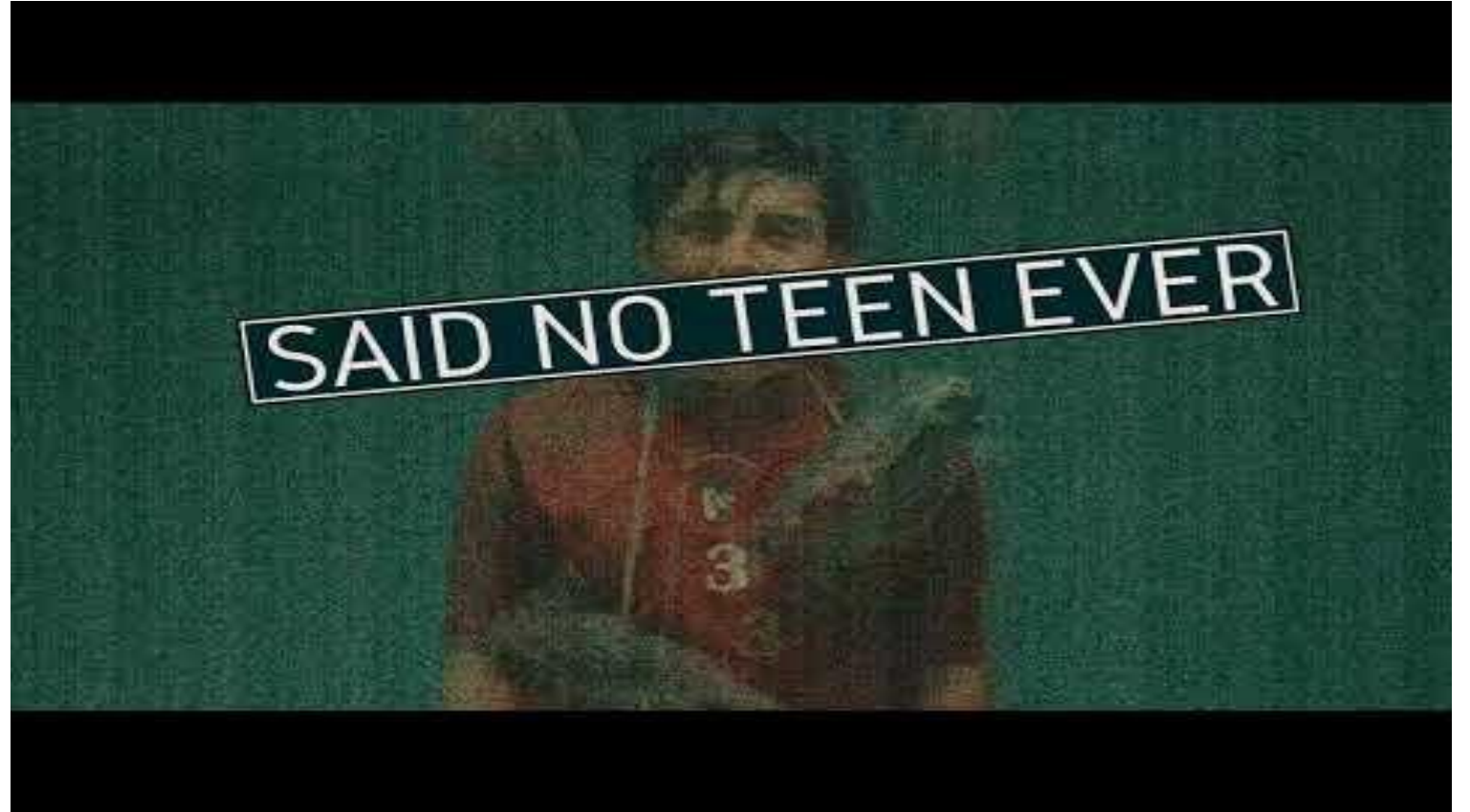
Warning Signs for Common Mental Health Conditions - Anxiety

- Restless, feeling keyed up or on edge
- Being easily fatigued
- Difficulty concentrating or mind going blank
- Irritability
- Somatic issues: stomachaches, headaches, muscle tension
- Sleep disturbances
- “Nagging” thoughts

Many different manifestations:

- Generalized anxiety
- Panic Disorder
- Social Anxiety
- OCD

Its Up to Us to Notice



<https://www.youtube.com/watch?v=Q1T1lx4CJIE>

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Recognizing Panic Attacks

- Palpitations, pounding heart or rapid heart rate
- Sweating
- Trembling/Shaking
- Shortness of breath, sensations of choking or smothering
- Chest pain/discomfort
- Abdominal distress/nausea
- Dizziness, light-headedness, feeling faint, unsteady
- Feelings of unreality
- Feelings of being detached from oneself
- Fear of losing control or going crazy
- Fear of dying
- Numbness or tingling
- Chills/hot flashes



Helping Someone Through a Panic Attack

- Speak calmly, slowly
- Ask what has helped in the past
- Try deep breathing
- Assure them it will pass, and you will stay with them until it does
- Seek medical attention if this is the first time or new symptoms are experienced

Its Up to Us to Notice



<https://www.youtube.com/watch?v=-WWe9uXn9ml>

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Non-Suicidal Self Injury (Self Harm)

- Deliberate, direct, and self-inflicted destruction of body tissue resulting in immediate tissue damage, for purposes not socially sanctioned and without suicidal intent.
 - **17.2%** among adolescents
 - **13.4%** among young adults
 - **5.5%** among adults
 - **75-80%** of all report NSSI is repeat (25% single incident)
- Higher rate of NSSI among those identifying as bisexual or questioning.

Risk Factors for Youth Suicide



- Mental health and/or substance use issues
- History of trauma or abuse
- Physical health issues
- Easy access to lethal means
- Impulsive or aggressive tendencies
- Isolation and/or loneliness
- Hopelessness
- Stressful life events, job loss, rejection, financial crisis
- Loss of a friend or loved one to suicide



Warning Signs

- Talking about feeling trapped or in unbearable pain
- Acting anxious or agitated; behaving recklessly
- Sleeping too little or too much
- Withdrawing or isolating themselves
- Showing rage or talking about seeking revenge
- Displaying extreme mood swings

Physical Warning Signs of a Possible Pending Mental Health Crisis

- Changes in weight or appetite
- Changes in sleep behavior
- Changes in appearance
- Fatigue or loss of energy
- Excessive crying or crying easily
- Ongoing severe headaches or muscle aches
- Non-suicidal self-injury

Behavioral Warning Signs of a Possible Pending Mental Health Crisis

- Suddenly making a will/settling affairs/saying goodbye
- Giving away prized possessions
- Running away
- Statements of intent or a plan
 - A statement of intent is a clear expression of suicidal thoughts
- Non-suicidal self-injury (cutting, wall punching, etc...)
- Prior suicide attempt
- Actively seeking lethal means – asking where to buy a gun, seeking pills

Mental and Emotional Warning Signs of a Possible Pending Mental Health Crisis

- Feelings of sadness
- Inability to concentrate
- Difficulty making decisions
- Loss of interest in activities and/or friends
- Withdrawal and/or isolation
- Thoughts of suicide or death
- Changes in behavior and/or personality
- Feelings of:
 - Guilt
 - Hopelessness
 - Worthlessness
 - Helplessness
- Decrease in work efficiency
- Engaging in self-destructive or risk-taking behaviors
- Sudden peace of mind

The Suicidal State of Mind – What's Going On?

- Intense emotional pain
- A belief that one cannot tolerate or endure emotional pain
- A feeling of being isolated, that no one understands or cares very much
- Perceived burden on others
- A feeling that there is no way to escape the emotional pain except by dying



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Learn how to help someone struggling with a mental health challenge

Objective 3

How to Help

- Take any warning signs seriously
- Reflect that you noticed a change and are concerned
- **Be non-judgmental**
- Create a safe place to talk and lots of opportunities to talk (shouldn't be just one conversation)
- Ask directly if the person is thinking about killing themselves?

What NOT to Do

- Don't act shocked or panicked
- Don't avoid the discussion
- Don't taunt or dare them
- Don't argue or dismiss their concerns
- Don't be sworn to secrecy
- Don't make empty promises
- Don't offer false hope or a way to fix their problems
- Don't leave the person alone

Helpful things to say

Helpful

“I am here to listen” (then don’t talk)

- "Have you tried anything in the past, that has worked to make you feel better?"
- Reflect how bad they feel
- “What do you need from me?”
- “How can we work together to help you be safe.”
- "Is there anything I can do that won't make things feel worse?"
- “You have every right to be upset”
- “That stinks”
- “This is really tough, but you are too”

Unhelpful things to say

Unhelpful

- “I understand”
- “When I was your age....”
- “It’s no big deal.”
- "Be thankful for what you have"
- "Get over it"

Connect and Follow-up

Help them connect

- Identify and connect to support system
- Suicide hotline number/988 in phone
- Encourage connecting with a mental health professional
- Offer to help with a support system plan or find resources with them

Follow-up

- After an acute crisis and connecting them with resources--keep checking in.
- It's especially important if they are getting treatment that is new to them
- Remember that when someone is suffering, they may not be able reach out for support

MYTH or FACT ?

Please put your answer in chat

Mental illness and poor mental health are the same thing.

Resiliency – bouncing back from adversity



Good News!

- Most youth pass through adolescence with relatively little difficulty despite all these challenges.
- When difficulties are encountered, youth tend to be quite resilient:
 - Thrive
 - Mature
 - Increase their competence

Protective Factors



- Healthy practices – diet, exercise, self-care
- High self-esteem
- Good problem-solving skills.
- Feeling of control in their own life
- Spirituality
- Avoiding alcohol, tobacco and other drugs
- Consistent home/family routine
- Parental/familial support
- Having a good social support system
- Economic security
- Availability of constructive recreation
- Community bonding
- Feeling close to *at least one* adult

Suggestions for Coping with Stress

Encourage your students (and yourselves!) to:

- Take one thing at a time
- Be realistic
- Don't try to be superman/ superwoman
- Use visualization, meditation and exercise
- Engage in hobbies
- Adopt healthy habits – sleep, diet, exercise
- Share/Vent to others in your support network
- Be flexible
- Don't be overly critical of yourself
- Adopt healthy habits – sleep, diet, exercise
- Share/Vent to others in your support network
- Be flexible
- Don't be overly critical of yourself



Identify resources to support your family

Objective 4

Mental Health First Aid (MHFA)

- Full-day training teaches people to **identify**, **understand**, and **respond** to signs of mental health and substance use challenges.
- Adult MHFA, Youth MHFA, and MHFA for Military Members, Veterans and their families
- 5-year SAMHSA grant for essential healthcare workers in the National Capitol Region



Mental Health
FIRST AID

from NATIONAL COUNCIL FOR
MENTAL WELLBEING

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Resources

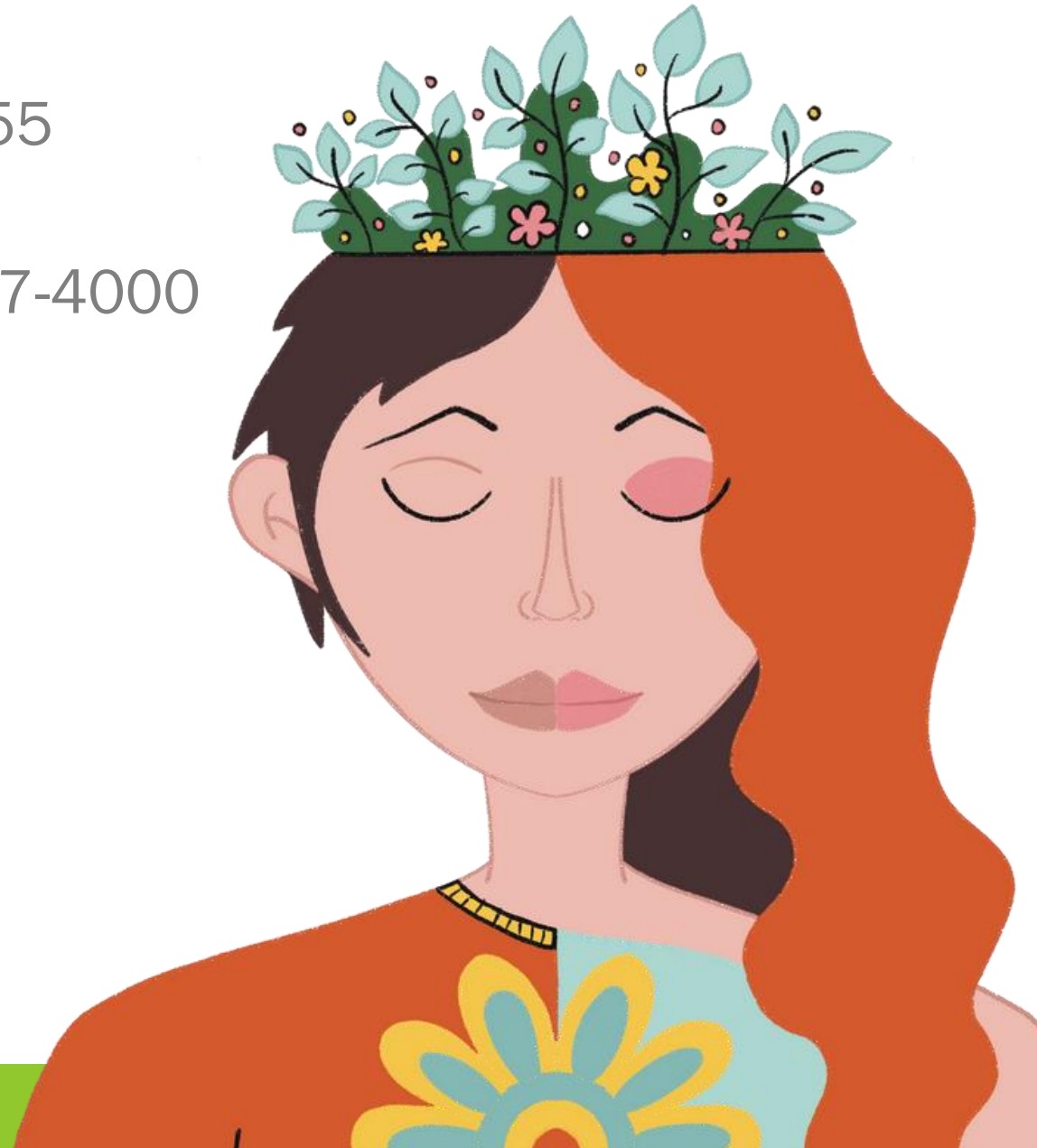
Montgomery County Hotline: 301-738-2255

Montgomery County Crisis Center: 240-777-4000

National Suicide Prevention Lifeline:
**9-8-8 or 1-800-273-8255

EveryMind Chat: [every-mind.org/chat/](https://www.every-mind.org/chat/)

Text: 301.738.2255* *limited hours*



BTheOne.org

1. Ask
2. Keep Them Safe
3. Be There
4. Help Them Connect
5. Follow Up



btheone_org



@BTheOne_Org



- Suicide and Addiction Prevention
- Information about how to help a loved one or yourself
- Links to other helpful websites for addiction and suicide prevention
- Website was designed by an 18-year-old MCPS graduate

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4 Steps to Reading QR Codes



Open your device's camera app.



Hold up the camera so that the QR code steadily appears in the viewfinder.
(Do not take a picture!)



Wait 2-3 seconds for the on-screen notification that will pop up when your device automatically recognizes the QR code.



Tap the notification and you will be taken to the destination of the QR code.



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