

Name:

Date:

# Social Emotional Learning Remote Learning Activities

## *Understanding Mental Health Disorders*

**Directions:**

Choose one of the 3 scenarios below and answer the accompanying questions.

**Character 1**

- a. This morning, everything was going wrong. Stuff at home blew up and I had a test first period that I totally bombed. Thankfully today I had art class, my favorite! Even though my morning was rough, focusing on something I liked made me feel better. Good thing, because in the afternoon, I got an assignment back and didn't do as well as I thought I would.

**Character 2**

- b. I started my week feeling great! Football is going really well and things are on track with school. Everything was awesome! Then, out of the blue, my girlfriend said she wanted to take a break. It caught me totally off guard. I couldn't concentrate in class at all and ended up just skipping school. I didn't want anyone to see me upset and I definitely didn't want to run into her. I finally came back on Friday for practice and talked to my coach. He helped me remember all of the other good things I have going for me. I hate how I feel right now, but hopefully it will get better with time.

**Character 3**

- c. When Staci asked me to her party, I was really excited, but nervous too. I really want to make more friends but I just don't feel like I fit in. I was so anxious that whole week, I couldn't focus at school. When it came time to go to the party, I didn't even want to come out of my room. I forced myself to go, but felt super awkward the whole time and barely talked to anyone. I didn't want to see anyone for weeks after. What's the point? I just don't want to try anymore. I hate myself.

Questions:

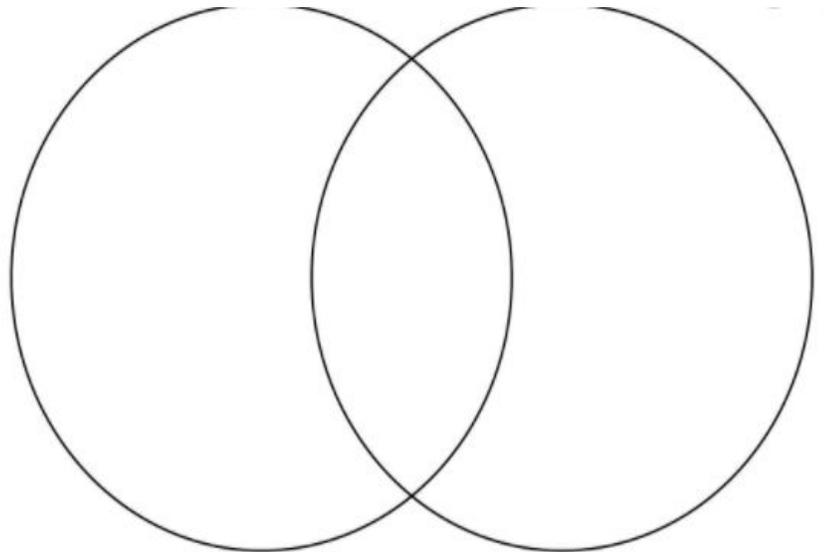
- a. What are some signs this character's mental health may be out of balance? (See glossary for observable/non-observable warning signs)

- b. What is a coping strategy? Are there any present in this scenario? Are there any you'd suggest the character try?

- c. If you knew this character, what action steps would you take to help them out? (use the words emotional awareness and/or positive mindset in this answer)

2. Read [this article](https://www.hhs.gov/ash/oah/adolescent-development/mental-health/) (<https://www.hhs.gov/ash/oah/adolescent-development/mental-health/>) and fill out the graphic organizer as you go.

3. Using the diagram here, put a mental health concern below one circle, and a physical health concern below the other circle. In the circles, list the symptoms, feelings, signs for each. Where these things are true for both, put in the middle section where they overlap. Choose a mental disorder (depression, anxiety, substance use disorder) and compare it to a physical disorder (flu, broken bone, food allergy are options)





## **APPENDIX A**

### **Lesson Glossary**

#### **Non-Observable Warning Signs**

Signs that can be seen which may indicate that someone may be dealing with a mental health disorder.

Examples include:

- Feeling worthless or hopeless.
- Thoughts of self-harm.
- Difficulty concentrating.
- Feeling like giving up.
- Feelings of anxiety that might be paralyzing.
- Hearing voices or seeing things that aren't there.

#### **Observable Warning Signs**

Signs that cannot be seen which may indicate that someone may be dealing with a mental health disorder.

Examples include:

- Pushing away or avoiding good friends.
- Showing less interest in things.
- Acting more angry or irritable than usual.
- A change in appearance, sleeping, or eating habits.
- Engaging in risky or impulsive behaviors like drug or alcohol use.

## Appendix B

### Lesson Article

#### Article from:

<https://www.hhs.gov/ash/oah/adolescent-development/mental-health/adolescent-mental-health-basics/index.html>

## Adolescent Mental Health Basics

Most adolescents experience positive mental health, but one in five has had a serious mental health disorder at some point in their life.<sup>1</sup> Problems with mental health often start early in life. In fact, half of all mental health problems begin by age 14.<sup>2</sup> The good news is that promoting positive mental health can prevent some problems from starting. For young people who already have mental health disorders, early intervention and treatment can help lessen the impact on their lives.

### Impact of Mental Health Problems in Adolescence

It is a normal part of development for teens to experience a wide range of emotions. It is typical, for instance, for teens to feel anxious about school or friendships, or to experience a period of depression following the death of a close friend or family member. Mental health disorders, however, are characterized by persistent symptoms that affect how a young person feels, thinks, and acts. Mental health disorders also can interfere with regular activities and daily functioning, such as relationships, schoolwork, sleeping, and eating.<sup>3</sup>

Depression is the most common mental health disorder, affecting nearly one in eight adolescents and young adults each year.<sup>4</sup> Adolescents who experience symptoms of depression most of the day, nearly every day, for at least two weeks in the year are having a major depressive episode.<sup>5</sup> The number of adolescents who experienced major depressive episodes increased by nearly a third from 2005 to 2014.<sup>6</sup>

When left untreated, mental health disorders can lead to serious—even life-threatening—consequences. Depression, other mental health disorders, and substance use disorders are major risk factors for suicide.<sup>7</sup> Suicide is the second leading cause of death for 15- to 24-year-olds.<sup>8</sup> In 2013 and 2014, children ages 10 to 14 were more likely to die from suicide than in a motor vehicle accident.<sup>9</sup> Any concerns that family members or healthcare providers have about an adolescent's mental health should be promptly addressed.

### Common Mental Health Warning Signs

Mental health is not simply the presence or absence of symptoms. Mental health includes generally feeling and functioning well and resiliently when faced with setbacks.<sup>1</sup> Adolescents may have different symptoms than adults with the same mental health disorder and symptoms may vary

from person to person. Some adolescents only experience one or two symptoms while others experience more. Furthermore, adolescents may experience symptoms only once or infrequently, in which case they may be just experiencing emotions that are common at this age. These variations can make identification and diagnosis of mental health disorders challenging.<sup>2</sup> According to the [National Institute of Mental Health \(NIMH\)](#), a child or teen might need help if they:

- Often feel very angry or very worried
- Have difficulty sleeping or eating
- Lose interest in activities that they used to enjoy
- Isolate themselves and avoid social interactions
- Feel grief for a long time after a loss or death
- Use alcohol, tobacco, or other drugs
- Obsessively exercise, diet, and/or binge eat
- Hurt other people or destroy property
- Have low or no energy
- Feel like they can't control their emotions
- Have thoughts of suicide
- Harm themselves (e.g., burning or cutting their skin)
- Think their mind is being controlled or is out of control
- Hear voices

If you observe a teen experiencing these symptoms and need to seek help, consult your healthcare provider or mental health professional. In crisis or life-threatening situations, call 911, contact the [National Suicide Prevention Lifeline](#) , or go to your nearest hospital emergency room. Visit NIMH's [Help for Mental Illness](#) page for more details and to identify treatment options in your area.

## Common Mental Health Disorders in Adolescence

Did You Know?



[The number of adolescents ages 12-17 who experienced a major depressive episode was higher in 2016 than in any year in the previous decade - PDF.](#)

Common mental health disorders in adolescence include those related to anxiety, depression, attention deficit-hyperactivity, and eating.<sup>1,2</sup>

## Anxiety disorders

- Characterized by feelings of excessive uneasiness, worry, and fear
- Occur in approximately 32 percent of 13- to 18-year-olds<sup>3</sup>
- Examples include generalized anxiety disorder, post-traumatic stress disorder, social anxiety disorder, obsessive-compulsive disorder, and phobias

## Depression

- Depressed mood that affects thoughts, feelings, and daily activities, including eating, sleeping, and working
- Occurs in approximately 13 percent of 12- to 17-year-olds<sup>4</sup>
- Examples include depressive disorder, postpartum depression, and seasonal affective disorder

## Attention deficit-hyperactivity disorder (ADHD)

- Characterized by continued inattention and/or hyperactivity-impulsivity that interferes with daily functioning or development
- Occurs in approximately nine percent of 13- to 18-year-olds<sup>5</sup>

## Eating disorders

- Characterized by extreme and abnormal eating behaviors, such as insufficient or excessive eating
- Occur in almost three percent of 13- to 18-year-olds<sup>6</sup>
- Examples include anorexia nervosa, bulimia, and binge eating disorder

## Co-occurring Disorders

When a person has a mental health and substance use disorder at the same time, they have [co-occurring disorders](#). Compared to the general population, people with mental health disorders are more likely to experience a substance use disorder, repeatedly use alcohol and/or drugs to the point of impairment, and neglect major responsibilities at home, work, or school.<sup>7</sup> Youth who have experienced a major depressive episode are twice as likely to start using alcohol or an illicit drug. A 2010 study found that more than 29 percent of youth who started using alcohol within the past year did so after a major depressive episode, compared to 14.5 percent of youth who had not experienced a major depressive episode. The same pattern also occurred with the use of illicit drugs.<sup>8</sup>

Substance use shares many characteristics with mental illness. Prevention efforts and early treatment are beneficial for people who are at risk for both substance use and mental health disorders.<sup>9</sup> A recent [U.S. Surgeon General's report](#) highlights the scope of substance use (including alcohol) and its negative health impacts for individuals and the nation. Because mental health and substance use disorders are complicated and involve biological, psychological, and social elements, the Substance Abuse and Mental Health Services Administration (SAMHSA) supports an integrated treatment approach to co-occurring disorders. This approach allows practitioners to comprehensively address symptoms and underlying causes, which often lowers the cost of treatment and leads to better outcomes.<sup>10</sup>

Substance use is not the only disorder that occurs at the same time as mental health disorders. Different mental health disorders can occur together (like anxiety and depression) or mental health disorders can overlap with physical health disorders (like depression and diabetes).<sup>11</sup> Symptoms of mental health disorders can also be similar to other conditions. For example, [autism spectrum disorder](#) (ASD) is the name for a group of developmental disorders often characterized

by impairments in the ability to communicate and interact with others. ASD includes a wide range of symptoms, skills, and levels of disability. These disorders occur in about 1.5 percent of children and often co-occur with disorders such as depression, anxiety, and sensory integration disorder.<sup>12</sup>

## Access to Adolescent Mental Health Care

### Did You Know?



["Collaborative Care" programs integrate behavioral health care management and consultations with specialists into primary care services.](#)

Adolescents ages 12-17 receive mental health services in a variety of settings. In 2016, 3.6 million received mental health services such as seeing a psychiatrist, psychologist, or counselor in a specialty mental health setting, 3.2 million received services such as counseling or participating in a behavioral health program in an educational setting, and 708,000 received mental health services from a pediatrician or family physician.<sup>1</sup>

As symptoms of mental illness emerge and develop, they have strong influences on an adolescent's behavior and can become more difficult to treat. Although effective therapies exist for many mental illnesses, not all adolescents who need treatment receive it.<sup>1</sup>

## Barriers and Disparities in Mental Health Care

In 2016, only 41 percent of the 3.1 million adolescents who experienced depression within the past year received treatment.<sup>1</sup> Stigma and cultural norms regarding mental health are some of the barriers to mental health treatment. There also are shortages of child and adolescent psychiatrists in some parts of the United States, particularly in rural areas. Over 15 million children and

adolescents need psychiatric help, but only about 8,300 child and adolescent psychiatrists practice in the United States.<sup>2</sup> Furthermore, when most adolescents turn 18, they can make decisions about mental health treatment and hospitalization without parental consent.

The following barriers may partially explain why use of mental health services differs by gender, age, race/ethnicity, income, and other characteristics:

- Female adolescents are more likely than male adolescents to receive mental health services, regardless of setting.<sup>3</sup>
- Younger adolescents are more likely than older adolescents (ages 16 to 17) to receive mental health services in an educational setting.<sup>3</sup>
- White youth are more likely to receive mental health services compared to youth of color.<sup>4</sup>
- Asian adolescents are less likely than adolescents of most other races/ethnicities to receive mental health services, regardless of setting.<sup>3</sup>
- A higher proportion of Hispanic youth have unmet mental health needs, compared to their black and white peers.<sup>4</sup>
- Lesbian, gay, bisexual, and transgender (LGBT) youth have higher rates of mental disorder diagnoses than other youth in national samples.<sup>5</sup>
- Twenty-one percent of youth ages 6 to 17 who live in poverty have mental health disorders.<sup>3</sup>
- Youth with any health insurance coverage (private or public) are more likely to receive mental health services than those without coverage.<sup>6</sup>
- Adolescents living in rural areas are less likely than those living in urban areas to receive mental health services from a pediatrician or family physician.<sup>3</sup>
- Half of all youth in the child welfare system, and nearly 70 percent of youth in the juvenile justice system, have a diagnosable mental health disorder.<sup>4</sup>
- Children who are living in foster care have a substantially greater risk of experiencing mental health disorders, especially those connected with traumatic stress, such as abuse and neglect.<sup>4</sup>