Mental Health Issues in Schools & Time/Stress Management

Presented By:
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Perspectives/Approaches

Cognitive-Behavioral

Attachment

Solution-Focused
Mental Health Statistics

- Just over 20% (1 in 5) children, either currently or at some point during their life, have had a seriously debilitating mental disorder.
- Approximately 13% percent of children ages 8 to 15 had a diagnosable mental disorder within the previous year.
- ADHD is most common childhood disorder (8.5%)
- Mood Disorders account for 3.7% of children
- Autism Spectrum Disorder is diagnosed in 1 out of 68 children by the age of eight (5:1).
- Bipolar Disorder is typically diagnosed in adolescence (0%-3%). Rare in children – often misdiagnosed
Diagnoses

Attention-Deficit/Hyperactivity Disorder
Oppositional Defiant Disorder
Conduct Disorder
Disruptive Mood Dysregulation Disorder
Bipolar Disorder
Diagnoses cont.

Anxiety Disorders
Mood Disorders
PTSD & Acute Stress Disorder
Adjustment Disorder
Autism Spectrum Disorder
Learning Disorders
Understanding Diagnoses

Mainstream disorders are often over-diagnosed/misdiagnosed

The negative impact of assumptions and misinformation

“Not who they are”
Model for Children

ICEBERG

Behaviors

Thoughts  Feelings
NC Domestic Violence Statistics

“Behavior that physically injures or violates intimate partners or family members”

- The North Carolina Council for Women received 6,435 calls about domestic violence in WNC from 2014-2015 and served a total of 2,360 victims of domestic.

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Know Yourself

- Background
- Experiences
- Beliefs
- Strengths & Weaknesses
- Culture

- Biases, prejudices
- Hot Topics/Triggers
- Transference
- Attribution Bias
- Cognitive Distortions
What is a power struggle?

- The struggle for power; A battle for control
- An unwillingness for either individual to change
- An unpleasant competition for power
- The “back and forth” between a child and an adult

- A child’s attempt to gain control of a situation through unwanted responses combined with an adult’s reactivity to a perceived loss of control
 Wouldn’t it be great...

“Excuse me, it is hard for me to wait. I feel frustrated when this happens, but I will control my urge to hit you and use my words to express how I feel.”
You can’t control a child…
Key points to consider:

• What are your expectations? (Avoid the shoulds)
• Have roles been identified?
• Are the rules clear and consistent?
• Is the behavior developmentally appropriate?
• Is the consequence/intervention age-appropriate?

• Do you respond the right way as staff every time?
  • Why not? What gets in the way?
The Four Functions of Behavior

- **Attention**
  (positive or negative)
- **Avoidance**
  (i.e., unwanted task, punishment)
- **Reward**
  (internal or external, reinforcement)
- **Sensory**
  (pain, rocking, sexual)

*Identify the function of the behavior*

*The same behavior can have a different function in a different situation*
When things go wrong…

- Simple redirection and non-confrontational approach first
- Keep moving forward when possible – reflective listening, validation, positive reinforcement, humor, active ignoring, avoid pacifying
- Empathic and Understanding Responses
- Self-assessment
  - Have Self-awareness – Am I making things worse? And I overly invested?
  - Trade out, even if you are unsure
How to apply praise

1) Close proximity to event

2) Clear statement – what do he/she do, when did he/she do it, how he/she did it, why behavior is important

3) Over-show and sell your emotions (exaggerate!)
Toxic Stress

• Occurs when our system is overtaxed by repeated, intense or chronic stress.

• The chemicals response and reactions go from saving one’s life to damaging one’s health.

• Children are especially vulnerable to chronic stress and trauma.

• Can’t turn off the switch - The “fight or flight” system is activated so often that it stays on.

• These high levels of emergency hormones can lead to changes in the structure and function of children’s developing brains and bodies.

http://developingchild.harvard.edu/resources/toxic-stress-derails-healthy-development/
Children exposed to family violence show the same pattern of activity in their brains as soldiers exposed to combat, new research has shown.

- Exposure to family violence was associated with increased brain activity in two specific brain areas (the anterior insula and the amygdala) when children viewed pictures of angry faces, which is similar to soldiers who have been exposed to violent combat situations.
Stress & Its Impact on You

- According to the APA 25% of Americans experience high levels of stress & 50% report moderate stress levels.
- Limbic system is activated, adrenal glands respond, drains the body of stored nutrients.
- This all occurs with little thought or interpretation.
- Repeated activation of the stress response impacts:
  - Blood pressure
  - Causes changes in brain structure
  - May contribute to depression, anxiety, & addiction
  - May also be linked to obesity.
Research suggests…

- Relaxation responses to counter stress response
- Physical activity
- Social support (family, friends, co-workers)
  - Positive relationships
Stress/Time Management

- Don’t focus on the problem
- Get off the island
- Be open minded
- Closed minded = stress/defensiveness/guarded…takes energy
- Bring your passion to the classroom!
- Don’t internalize student failure
- Have boundaries
Stress/Time Management

- Stay professional with angry parents/families – reactivity does not work
- Stay in contact with parents about positive behavior
- Identify administration and peer support
- Surround yourself with positive, professional coworkers
- Find resources (i.e., teaching, strategies, specific populations)
- Keep your emotion in check when sending emails
Stress & Time Management

• How do you pull away from drama? Avoid social media outlets
• Take time for yourself – How?
• Recharge - You are no help to anyone on an empty battery
Resources and Supports

• What is available in your school, district, community?

• Who can you refer to?
  • School Psychologists
  • School Counselors
  • Therapists
  • Psychologists
  • Psychiatrists

• What community agencies do you have access to?
Questions
Current Strategies and Interventions

• How effective are your current interventions?
• Is the child listening, learning?
• Do they feel heard?

Remember:
• Communication is paramount
• Reactivity leads to power struggles
• If your focus is on consequences, you’ve missed the boat
Strategies and Interventions: Where to start

- Consistency (keep it feasible/realistic – one time can wipe out hard work)
- Follow Through (empty threats)
- Communicate thoughts and feelings (be specific) – use their language
- Clear directives (calm, consistent, not modifying directive)
- Increase positive communication (3:1)
- Must have “do” with “don’t”
- Turn off the *Shark Music*
- Active ignoring
- Model the behavior you want to see in your students
- Have a clear schedule – prepare them for transitions
- Start small, start slow (expect peaks, valleys, and plateaus)
Specific Strategies and Interventions

- Check-ins/Monitoring mood
- Provide Choices
- Joining Jar
- Re-word the Directive; Rewind
- Use visuals (charts, timers, schedule)
- Take a break (can be proactive/preventative)
- Ask “what,” not “why”
- Use humor
- Understand how anger works
- Practice Problem Solving (lost art)
Things to remember

- You don’t have to ‘accept their invitation’ to a power struggle
- Not all behaviors require a lesson (i.e., lecture)…It’s about timing
- Have realistic expectations and understand development
- It’s okay if a child fails
- It’s okay to feel mad, sad, scared, etc.
- Apologize
- Develop strategies, new rules, or plans with them - collaboration
- Don’t disregard sleep, diet/nutrition, exercise