

# *Mental Health for Teenagers*

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# ***What Is Mental Health***

# *Mental Health*

***“There is no health without mental health”***

***W.H.O. 2001***

# *Mental Health*

- ❑ It is a balance between all aspects of our lives: social, physical, spiritual and emotional.
- ❑ It impacts how we manage our surroundings and make choices in our lives.
- ❑ It is very much an integral part of our overall health.
- ❑ It has to do with many aspects of our lives: how we feel about ourselves, how we feel about others, how we are able to meet the demands of our lives.

# *Mental Ill Health*

*'Mental ill health' or 'mental illness' are broad terms used to describe a wide range of psychiatric illnesses, from anxiety and depression to eating disorders and schizophrenia.*

# *Mental Ill Health*

*Everyone has times in their life when they feel depressed, anxious, or under stress. For some people these feelings become so overwhelming they produce physical or behavioral symptoms that affect an individual's ability to go about their day to day life.*

# *Mental Ill Health*

*Factors such as academic, social, or financial pressure, lack of familiar surroundings, and drug or alcohol abuse can trigger the onset of mental health conditions in some people.*

# *Mental Ill Health*

- *Approximately one in four people experience mental ill health at some point in their life*

# *Mental illness*

- *Experiencing mental illness (MI) is an important risk factor for suicidal behaviour.*
- *Research suggests that approximately 90% of all individuals who die by suicide exhibit symptoms of mental illness (Arsenault-Lapierre et al., 2004).*

# *CAUSES OF SUICIDE?*

- *Often complex and multiple in nature*
- *Typically, a number of stressors are present for each individual*
- *It is rare that one stressor results in suicide*
- *Presence of certain risk factors such as mental illness e.g. depression increase an individuals risk of contemplating suicide*
- *Presence of certain protective factors such as ability to access and accept help decrease a persons risk*

# *Factors of Influence*

- **Predisposing Factors**

set the stage for a vulnerability to suicide  
(e.g. family history of suicide)

- **Contributing Factors**

exacerbate the existing risk (e.g. substance abuse)

- **Precipitating Factor**

act as a trigger for predisposed persons (e.g. sudden loss or failure)

- **Protective Factors**

lessen the risk for suicide (e.g. availability of at least one significant adult who can provide warmth, care and understanding)

# *Substance Abuse*

Abuse of alcohol is a significant risk factor for the following reasons:

- Alcohol acts as a depressant, sometimes making a problem(s) seem worse
- Intoxication impairs problem solving ability
- Alcohol reduces inhibitions which further increases the likelihood of acting impulsively on suicidal thoughts

- *Drug use/ misuse is also associated with depression and suicidal thoughts and behaviour.*
- *Ecstasy, cocaine and other amphetamines may initially have a stimulating effect. However, in cases where an individual is feeling low or vulnerable prior to ingesting such substances, the 'low' can sometimes cause them to hit rock bottom. A real sense of hopelessness can pursue.*
- *Furthermore, financial pressure may take hold if an addiction becomes apparent. This can lead to a sense of entrapment.*

# *Eating Disorders*

- **An eating disorder is merely a symptom of an underlying problem, the causes of which vary for each individual. It is a reaction to a low self-esteem and a negative means of coping with life and stress.**

## *Anorexia Nervosa*

- **Anorexia nervosa can be termed as an eating disorder in which the person experiences hunger but refuses to eat because of a distorted body image which leads to a self-perception of fatness. Starvation ensues.**
- **Signs of the disorder include extreme weight loss due to:**
  - obsession with dieting and food (even though person is thin)
  - preoccupation with calories - weighing, measuring
  - compulsive exercising – strict exercise routines
  - strange eating rituals – eating in isolation, fixed ideas about food
  - fear of weight gain
  - lack of menstrual periods
  - insomnia
  - brittle hair and nails
  - social withdrawal

# *Bereavement*

- *Bereavement is a significant risk factor for suicide. This risk is further increased if the loss is as a result of the tragedy of suicide.*
- *Of all age groups, young people are most vulnerable to imitation (often referred to as copy cat suicide or suicide contagion) following a suicide or attempted suicide.*
- *Adolescents in particular learn by modeling the behaviour of those around them.*

# *Impulsivity & Method Restriction*

*While the association between impulsivity and suicidal behaviour is not clear, it is thought that suicide is more likely if*

- ❖ the person is having thoughts of suicide, whether fleeting or*
- ❖ fixed*
- ❖ the person is impulsive ‘by nature’*
- ❖ the person is using/abusing drugs and/or alcohol*
- ❖ lethal methods of suicide are readily available*

*Reducing access to methods of suicide has been identified as an important and evidence-based strategy in suicide prevention e.g. disposal of medication, licensing and control of firearms.*

# *History of suicidal behaviour*

- *Past suicidal behaviour is a significant risk factor for future suicide attempts and suicide.*
- *People who have engaged in deliberate self-harm (DSH) in the past are more likely to repeat the behaviour, as it becomes part of their coping repertoire.*

# *IDENTIFICATION:*

## *Recognition of risk*

- Be aware of risk factors and warning signs.*

# *Risk Situations which may trigger suicide or suicide attempts in vulnerable people*

- *Separation from friends, girlfriend / boyfriend*
- *Family breakdown*
- *Death of a loved one or significant other*
- *Break-up of a special relationship*
- *Bullying or victimisation*
- *Physical, sexual, emotional abuse or neglect*
- *Disappointment with exam results*
- *Depression*

# *How to Recognise Depression*

## **Symptoms may be experienced as mild, moderate or severe**

- **F** Feeling - Persistent depressed mood, including feelings of sadness, boredom, emptiness, hopelessness and helplessness. One may also feel guilty, restless, irritable or pessimistic towards the future.
- **E** Energy – Decreased energy, fatigue and feeling ‘slowed down’
- **S** Sleep - Insomnia, early morning awakening or oversleeping
- **T** Thinking – Difficulty concentrating, remembering and making decisions
- **I** Interest - Loss of or diminished interest or pleasure in activities that were once enjoyed, including work, hobbies and food. Loss of appetite is typically accompanied by weight loss, or overeating accompanied by weight gain. Loss of libido is also common
- **V** Value – Reduced sense of self-worth or low self-esteem
- **A** Aches - Persistent physical symptoms, such as headaches, digestive disorders or chronic pain that do not respond to medical treatment and for which no physical cause can be found
- **L** Life - Thoughts of dying or preoccupation with death. Deliberate self-harm (DSH) or thoughts of suicide. One may give away possessions in anticipation of same.  
» (Adapted from AWARE, 2006)

- **For a diagnosis of depression, one must have at least 5 or more of these symptoms, for at least 2 weeks, representing a change from previous functioning.**

## *Risk Situations – cont'd ..*

- *Unwanted pregnancy*
- *Serious illness, physical or mental*
- *Interpersonal conflicts or losses*
- *Absence of a confiding relationship*
- *Legal or disciplinary problems  
(consequences of same)*
- *Peer pressure e.g. sexual orientation*
- *A history of suicide in the family or someone else close to the person*

## *Life events/situations which may trigger stress*

- *Individual events in themselves do not bring about suicidal behaviour.*
- *Rare that a completed suicide can be explained by a single event.*
- *Some situations may precipitate a suicidal event, but it is how the individual perceives the situation that determines how they cope with it.*

# *Emotional Warning Signs:*

## *NOT VISIBLE OR EASY TO IDENTIFY*

- *Overwhelming Pain: (pain that threatens to exceed the person's pain coping capacities)*
- *Hopelessness: (the feeling that the pain will continue or get worse, things will never get better)*
- *Powerlessness: (the feeling that one's resources for reducing pain are exhausted)*
- *Worthlessness: (a sense that everyone will be better off without me)*

# *Early Warning Signs for Suicide*

## *Classic Signs of Depression*

- *Difficulties in school*
- *Depression (sad, angry)*
- *Drug/Alcohol abuse*
- *Sleep disturbances*
- *Disinterest in usual activities*
- *Restless, agitated*
- *Feeling like a failure*
- *Hopeless, helpless*
- *Pessimistic*
- *“Roller Coaster” moodiness, more often and for longer periods than usual*
- *Overly self-critical*
- *Persistent physical complaints*
- *Difficulty in concentration*
- *Preoccupation with death (often through music, poetry, videos)*

# *Late Warning Signs*

- *Talk of suicide, death*
- *Neglect of appearance*
- *Dropping out of activities*
- *Isolating self from friends, family*
- *Feeling life is meaningless*
- *Hopelessness, helplessness increases*
- *Refuses help, feels beyond help*
- *Puts life in order – may make a will*
- *Picks a fight, argues*
- *Gives away favourite possessions*
- *Verbal clues*
- *Sudden improvement in mood, behaviour\**

*Responding  
to  
Risk*

# *Steps for Helping*

- *Take all threats seriously*
- *Acknowledge the persons feelings*
- *Listen- Use of silence- Let them talk*
- *Ask the person to tell you what is wrong*
- *Offer support*
- *Remove anything that could be lethal*
- *Don't leave the suicidal person alone*
- *Don't promise confidentiality*
- *Don't give quick advice – everything will be alright*
- *Don't be afraid to talk about suicidal thoughts and feelings*

# *Focusing on the Problem (s)*

- *What happened today?*
- *Can you tell me what's going on right now?*
- *What started all of this?*
- *How does this make you feel?*
- *How long has this been going on?*
- *Has something like this ever happened before?*
- *Have you ever felt like this before?*
- *How has all this affected you?*

# *Coping*

- *What have you tried so far?*
- *What has helped in the past? What hasn't?*
- *Who has been most supportive?*
- *What would help you right now?*
- *What have you thought of trying?*
- *What do you think needs to happen?*
- *Have you considered \_\_\_? (identify alternatives to suicide)*
- *Who can help you with this?*
- *How can I help?*

# *Link to Support*

- *All disclosures of suicide whether low or high risk should be taken seriously*
- *All individuals should be linked to others for further support*
- *Professional assessment and management may be needed at this time*
- *Link to at least one professional and one personal support*

# *Helplines*

- *Aware* 01 661 7211
- *Alateen (for teenagers of alcoholic parents)* 01-8732699
- *Adult Counselling Service* 1800 234 115
  
- *Barnardos (information & training on childhood issues)* 1850-222300
- *Bodywhys (information on eating disorders)* 1890-200444
- *Childline* 1800 66 66 66
  
- *Console* 1 800 201 890
- *CURA (counselling for unplanned pregnancy)* 1850-622-626

# Helplines

- *Gay Switchboard* 061-310101  
▪ [rainbowlmk@eircom.net](mailto:rainbowlmk@eircom.net)
- *GROW* 1890 474 474
- *Headsup (list of support services) Freetext 'Headsup' To* 50424
- *ISPCC* 01 6767960
- *1 Life Suicide Helpline* 1800 247 100
- *Living Links* 067 43999 Mobile 087 4122052
- *Mental Health Ireland* 01 284 1166
- *Senior Helpline* 046 9557766
- *Samaritans* 1850 60 90 90

# Helplines

- *National Association for Victims of Bullyin* 057-93-31590
- *Parenting Support Parentline* 1890-927277  
*Parenting Website* [www.rollercoaster.ie](http://www.rollercoaster.ie)
- *Rainbows (peer support after parental death/separation)* 01-4734175  
[www.rainbowsireland.com](http://www.rainbowsireland.com)
- *Rape Crisis Centre (support for survivors of rape or abuse),* 061 311 511  
Freephone, 1 800 311 511
- *Solos (Barnardos Bereavement Counselling* 01-4732110  
*(Service for Children)*
- *Spun out (National Youth Website, 16-25 year )* [www.spunout.ie](http://www.spunout.ie)
- *Teen-Between (for 12-21 year olds of separated parents)* 1800 303191  
[teenbetween@mracs.ie](mailto:teenbetween@mracs.ie)

# *PROTECTIVE FACTORS*

- *Good mental health.*
- *Early detection, assessment and treatment of MI*
- *Healthy socialising and coping strategies.*
- *Good problem solving skills – (identify the problem, consider options)*
- *Warm accepting relationships with family or friends*
- *Restriction of methods of availability*
- *Remaining in education or other structures*
- *Employment*
- *High self-value/self-esteem*
- *Healthy approach to help-seeking*

*Thank You*

*Further queries or concerns contact the  
Suicide Prevention Office*

*061-461454*