

Behavioral Strategies for Minors

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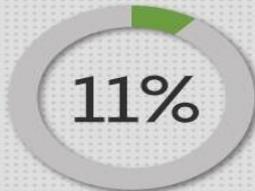
Mental Health Facts

CHILDREN & TEENS

Fact: 1 in 5 children ages 13-18 have, or will have a serious mental illness.¹



20% of youth ages 13-18 live with a mental health condition¹



11% of youth have a mood disorder¹



10% of youth have a behavior or conduct disorder¹



8% of youth have an anxiety disorder¹

Impact



50%

50% of all lifetime cases of mental illness begin by age 14 and 75% by age 24.¹

10 yrs



The average delay between onset of symptoms and intervention is 8-10 years.¹

37%



37% of students with a mental health condition age 14 and older drop out of school—the highest dropout rate of any disability group.¹

70%



70% of youth in state and local juvenile justice systems have a mental illness.¹

Suicide

3rd

Suicide is the 3rd leading cause of death in youth ages 10 - 24.¹



90%

90% of those who died by suicide had an underlying mental illness.¹



There may be participants in your program who may experience mental health symptoms but have not yet been diagnosed with a mental health condition. The average delay between onset of mental health symptoms to receiving intervention is 8 to 10 years.

Suicide is the 3rd leading cause of death in youth ages 10-24. On the next slide, you will see a list of behavioral changes which are warning signs that a child or teen is potentially in distress.

Warning Signs

- ! Feeling very sad or withdrawn for more than 2 weeks (e.g., crying regularly, feeling fatigued, feeling unmotivated).
- ! Trying to harm or kill oneself or making plans to do so.
- ! Out-of-control, risk-taking behaviors that can cause harm to self or others.
- ! Sudden overwhelming fear for no reason, sometimes with a racing heart, physical discomfort or fast breathing.
- ! Not eating, throwing up or using laxatives to lose weight; significant weight loss or gain.
- ! Severe mood swings that cause problems in relationships.
- ! Repeated use of drugs or alcohol.
- ! Drastic changes in behavior, personality or sleeping habits (e.g., waking up early and acting agitated).
- ! Extreme difficulty in concentrating or staying still that can lead to failure in school.
- ! Intense worries or fears that get in the way of daily activities like hanging out with friends or going to classes.

4 Things Parents Can Do



Talk with your pediatrician



Get a referral to a mental health specialist



Work with the school



Connect with other families

¹ This document cites statistics provided by the National Institute of Mental Health. www.nimh.nih.gov

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 **NAMI**
National Alliance on Mental Illness
www.nami.org



The graphic used is available on the www.uncfsu.edu/PMOC website under Resources.

Additional information on these facts can be found on the National Alliance on Mental Illness (NAMI) website which is www.nami.org

Behavioral Strategies

Goal 1: Help youth learn how to manage their own behavior.

Goal 2: Identify strategies that staff can utilize when assisting youth with managing behavior.

Research shows that certain strategies tend to work best when attempting to manage behaviors. Listed below are some of these strategies:

- ❖ Give positive recognition and model good behavior.
- ❖ Discuss rules and expectations about behavior early on.

Behavioral Strategies (continued)

- ❖ Be aware of what's happening around you in order to proactively intervene before a situation escalates.
 - ❖ Give warnings in order to give youth a chance to correct their behavior.

- ❖ Relax before responding.

- ❖ Be respectful while addressing the behaviors.
 - ❖ Discuss specifically why the behavior was wrong.
 - ❖ Calmly discuss appropriate ways to behave.

- ❖ Do not get entangled in arguments/ power struggles.

If you realize that you have been drawn into a power struggle, use strategies to disengage. Examples of disengaging strategies are

lowering your voice while using a more business-like tone or
move away from the youth.

Behavioral Strategies

Additional ideas that can be used while assisting youth in managing their behavior:

- ❖ Listen actively. Active listening demonstrates a sincere desire to understanding concerns and respecting their point of view. An example active listening statement would be: "Let me be sure that I understand you correctly....".
- ❖ Allow a "Cool Down" break. Cool down breaks should be available to all, not only youth with anger-control issues. Offer to talk the situation over once they have calmed down. Select an area to be the designated cool down spot. An example would be: "I want to talk with you about what is upsetting you; but first you need to calm down. Take five minutes in the cool down area and then come over so we can talk".
- ❖ Ask open-ended questions. If faced with a confrontational youth and the trigger for this type of response is unknown, ask neutral, open-ended questions to collect more information before responding. Use "who, what, where, when and how" questions to more fully understand the situation. An example question would be: "What do you think made you angry when you were talking with"?

Behavioral Strategies

- ❖ Avoid asking "why" questions. Why questions can imply that you are blaming them. Instead utilize open-ended questions to gather additional information about the situation.
- ❖ Emphasize the positive in your request. When your request has a positive "spin", you are less likely to trigger a power struggle and more likely to gain compliance. Avoid using negative phrasing like: "If you don't sit down, then I can't help you. Instead use a positive statement such as: "I will be over to help you once you sit down".
- ❖ Give praise that is specific & does not embarrass. Defiant youth respond well to adult praise but only when it is sincere, specific and does not embarrass them. Examples would be: writing a note of praise, praising them in a private conversation, calling their parent to praise them.
- ❖ Give frequent positive attention. Make an effort to give positive attention to problem youth at least three times more frequently than you reprimand them for negative behavior. Heavy dosing of positive attention can greatly improve your relationship with problem youth.

Behavioral Strategies

Develop a response plan for more aggressive behaviors. Identify the criteria for 'aggressive behaviors' in advance of your program beginning as well as any corresponding consequences to the aggressive behavior.

- ❖ Increase awareness about common behaviors and symptoms associated with youth mental health
- ❖ Contact your supervisor
- ❖ Contact parents

For more information on common behaviors and symptoms related to child and adolescent mental health, visit the following websites: the American Academy of Child and Adolescent Psychiatry at www.aacap.org or The National Institute of Mental Health at www.nimh.nih.gov

Behavioral Strategies

Keep in mind:

Best outcomes are achieved when you

- ❖ Remain calm and maintain a professional perspective.
- ❖ Follow pre-planned intervention strategies for misbehavior.
- ❖ Act with consistency and fairness when intervening.

Behavioral Strategies

References

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