

Mental Health in Adolescents and the Importance of Seeking Help

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Abstract

Adolescents aged fifteen to nineteen have an increasing trend in the diagnoses of mental illness disorders. Along with this, the suicide rates have increased within this age group. Our research dives into the effects of different cognitive behavior therapies and their role on treating children with mental health disorders. We compared these results to suicide rates in children who have no exposure to medicinal or therapy treatment.

Introduction

Many children have mental disorders from a number of different factors that come into play on each individual child. Through these different disorders affecting children, we have several interventions in place as to what should be taken into account for children with mental disorders due to childhood trauma incidents. These interventions are determined by various factors, one being if the child has received therapy or not. “More than 90% of adolescent suicide victims met criteria for a psychiatric disorder before their death” (Shain, 2016). Through this statistic alone, it is shown that mental disorders within children are far higher than it should be. Through these interventions to follow, they prove to show progress through therapies and various regimens to assist in childhood trauma issues. Psychological therapy is one of the most common interventions taken by health care professionals to treat their mentally ill pediatric patients. Mental illness can lead to more severe problems in adolescents if left untreated, such as an inflict to self harm or commit suicide.. These include those who have a history of sexual or physical abuse, exposure to bullying, negative social media pressures, substance abuse, negative body image, and many more implications. These children are at an increased risk for developing suicidal ideations (Shain, 2016).

Methods

Cognitive behavioral therapy is one of the methods used for treating mental illness in children. This type of therapy focuses on psycho-social improvements and emotional coping through psychologist visits. The psychologist role is to teach coping mechanisms and healthy behaviours to have a sense of self control. As the psychologist experiences multiple visits with the child, a diagnosis can be made and further interventions can be set into place, such as pharmaceutical therapy. (“Mental Illness in Children,” 2020)

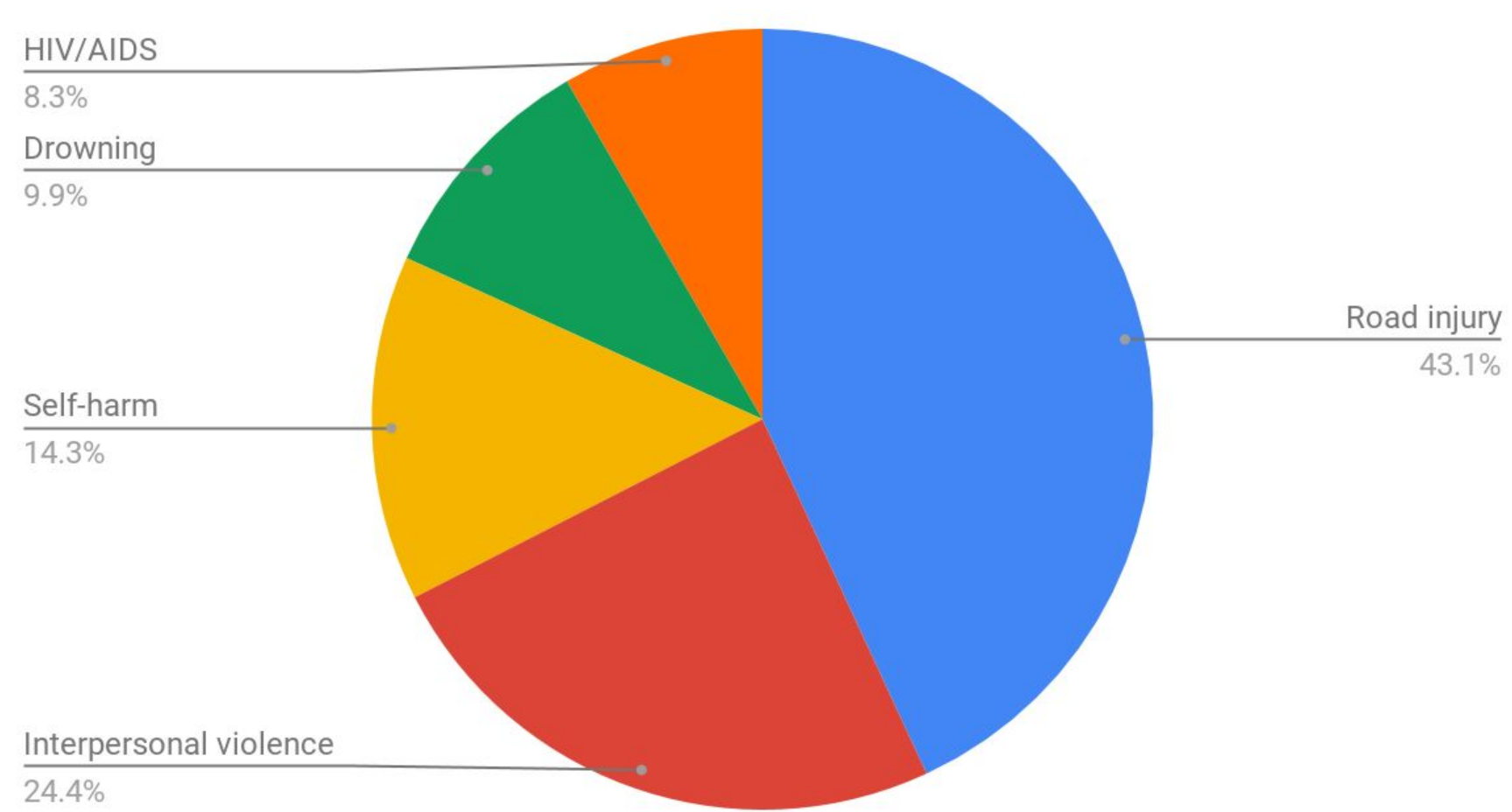
Clinical PICO Question

In adolescents aged 15 to 19 with mental illness disorders due to previous trauma, what is the effect of adolescents treated with cognitive behavioral therapy compared to adolescents with no diagnosis of a mental disorder and the outcome of enhanced emotional coping skills leading to a decreasing trend in suicide rates?

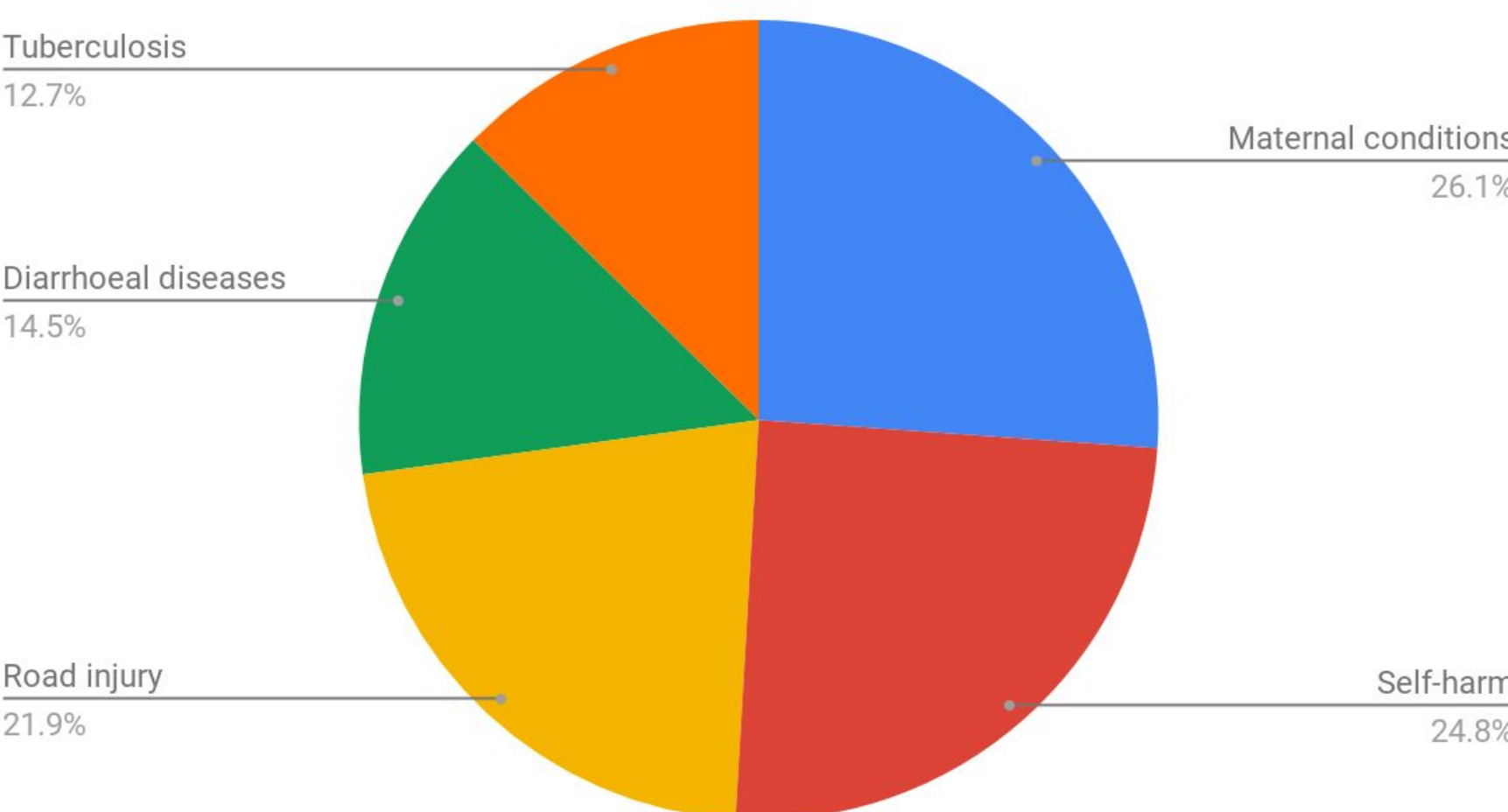
Nursing Interventions for Pediatric Mental Health

- Create a therapeutic environment
 - Establish a trusting relationship with the child
- Interview the child
 - Has there been a change in energy levels?
 - How much social interaction have you been involved in?
- Interview without parent/guardian present
 - Are you involved with illicit drug and alcohol use or partake in any illegal activity?
 - Have you had thoughts of killing or harming yourself?
- Communicate with the parent or guardian
 - Encourage “constant, open and honest” communication between parent and child (“Mental Health and Teens,” 2012)
 - Reassure that the mental health disorder is treatable
 - Educate on becoming a strong support system for the adolescent
- Perform a physical assessment
 - Assess for indications of self harm
 - Vital signs might be elevated due to stress and anxiety
- Document all findings to report to the health care provider and psychologist
- Referral and recommendation to the health care provider based on signs and symptoms displayed by the child to determine plan of care. Child will be recommended to a psychologist by the provider for talk therapy.

Cause of Death in Males age 15-19



Cause of Death in Females age 15-19



For both adolescent boys and girls, as you can see from the graph, self harm is among the top five causes of death for both boys and girls. According to the World Health Organization, “suicide is the third leading cause of death in older adolescents (15–19 years)” (WHO, 2019). This can be caused from untreated mental illness. As the graphs above show, the rate in self harm is a higher cause of death for females than males. These statistics alone show that adolescents are more likely to keep their issues to themselves, or even share them with others but without the correct treatment it can end in self harm for many individuals.

Evaluation & Analysis

Through evaluating the responses to different children with mental disorders who get treated versus those who do not. There is evidence showing the specific better outcomes from those who do receive the medical attention for various mental disorders. The effects of children with untreated conditions due to various traumas have shown as stated by Maryville University, “Untreated conditions such as PTSD, depression, anxiety, ODD, CD, and more can lead to risky and destructive behavior, including self-harm and potentially suicidal ideation” (“Mental Illness in Children,” 2020). Children without being treated can have an effect on the overall development of the child, the child’s emotional, physical, and well being can all be affected if going without treatment (“Mental Illness in Children,” 2020). Many children go without receiving treatment due to various different reasons. Some being the parent cannot pay for treatment, doesn’t have the time to get a child to a specialist, or doesn’t even realize the struggles a child goes through. These can all be causes that a child doesn’t receive specific treatment after trauma. However, if a child does get the treatment they need, it can help their overall wellbeing in years to follow. Through the different interventions placed to help the child and the various behavioral therapies, the child can overall get the treatment they need. Through cognitive behavioral therapy, the child gets the opportunity to focus on coping mechanisms that are appropriate for each situation a specific child faces. Through cognitive behavioral therapy, the child will gain a sense of self control over their situation. This gives the child an opportunity to discuss their moods, emotions, and all aspects they feel are affecting their life within a safe space with a therapist. Through comparing the two, treatment or none, this shows a clear understanding that treatment is the best way to cope with any childhood trauma experiences. If more children are exposed to cognitive behavioural therapy, the suicide rates among the adolescent age group will decrease.

Conclusion & Implications for Future Research

As you can see, mental health disorders in adolescents aged 15 to 19 with no therapy treatment, are far more damaging than those with treatment. With there being a multitude of studies and research on the effects of cognitive behavioral therapy on the improvements of said disorder, it has been proven that with treatment, suicide ideation risks are lowered compared to children with no exposure to treatment. In order to improve these studies and make them more reliable, there needs to be further research on the differences in childhood trauma and how each trauma affects these children. There should also be more studies focusing on the comparison between a child treated with therapy versus a child who has not had treatment.

References

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