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Society’s Responsibility to Prevent Rising Mental Illness in Youth

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Abstract

The increasing rates of mental illness in the world is becoming an issue that has been ignored for too long. Stigma and ableism, “discrimination against individuals with disabilities or the tendency to be prejudiced against and to stereotype them negatively,” are contributing factors to the delay of seeking mental health treatment and worse prognosis (VandenBos & American Psychological Association, 2007). Preventing mental illness in youth requires changes in education. By increasing education at school, from parents, and understanding personal responsibility, it may be possible to prevent or mitigate mental illness development. Though there seems to be no one best practice for prevention, this multi-faceted approach can be adaptable to each individual circumstance to greatly increase the efficacy of early intervention and prevention therapies.

Keywords: adolescents, mental health, early intervention, mental health education, stigma
Society’s Responsibility to Prevent Rising Mental Illness in Youth

An 8-year-old child cries as he is driven away from the place where he grew up, and on to a new town and new life. He is utterly devastated, lost, and confused with where he stands among his peers. The differences in culture that are evident in just a few hundred miles makes him a social outcast, incompatible with the other children around him. This bright, extroverted child quickly retreats within himself as he is tormented and bullied by people he thought could be his new friends. Quickly, he becomes an introverted, shy, anxious, and completely depressed child. In a perfect world, immediate action would be taken by either teachers or parents to help this child get the support he needed to adjust and understand what he was going through. Fast forward, and the child is now an adult in his early 20s, and for the first time is told that constantly thinking about taking his own life is not a normal state of being. This man now realizes that he has a mental illness, a word that seems almost foreign in his own mouth. The tragedy of this story does not lie in the illness, but in the simple realization that earlier understanding and recognition could very well have changed the course of this person’s life.

Though this may be a fictional representation, the circumstances described could become the norm for many young people. Around the world, the rate at which children and adolescents have submitted to psychological care has increased dramatically over the past few years (Appleyard et al., 2007). However, there are many students that choose not to disclose when they are struggling either because of stigma or ignorance. For example, in a study on the effects of a suicide prevention program, it was found that just under half of the participants in the study that were in the at-risk population, had yet to seek any outside help (Bailey et al., 2017). This trend is made all the more impactful when added with the fact that many major depressive symptoms peak during adolescent years. Not only do these symptoms peak during the formative years of puberty, but they also carry on into early adulthood and beyond (Kwong et al., 2019). If these patterns continue, the ramifications could be catastrophic. Unless something is done to reverse this upward trend of the downward spiral, the next generation will likely face a similar reality.

There is a stigma of ableism that surrounds the mentally ill. Ableism, which is defined as “discrimination against individuals with disabilities or the tendency
to be prejudiced against and to stereotype them negatively,” is unfortunately very prevalent against those with mental illnesses (VandenBos & American Psychological Association, 2007; Young et al., 2019). This is likely because, unlike other handicaps or disabilities, mental illness can be invisible. Many people with these disabilities refuse to allow it to come to light due to the stigma of ableism that can accompany a disease that cannot be seen (Young et al., 2019). This associated stigma is an additional struggle that someone experiencing a mental crisis should not have to endure. Yet, if people can overcome the stigma that surrounds mental illness, the road to recovery may become much clearer. As the largest stumbling block when first beginning treatment for mental illness, stigma often impedes progress toward recovery; when it is overcome the number of people that seek help grows. When an individual starts the help-seeking process for the first time, the likelihood of later help-seeking behaviors also increases (Schomerus et al., 2019). Though there is stigma surrounding mental illness (with the topic itself generally shunned or avoided for fear of triggering those who suffer), a more in-depth and multi-faceted approach to mental health education for adolescents should be adopted. Heightening awareness in an academic environment, learning about mental health at home, and enhancing active awareness of one’s own psychological well-being can dissipate feelings of shame and increase young people’s willingness to seek help when needed.

**Heightening Awareness at School**

In a multifaceted approach to mental illness, it makes sense to ensure that measures are taken in the places that adolescents spend a large amount of time. With many high schools running on a schedule of eight hours per weekday, creating an environment there that promotes heightened awareness for students would be a good place to start. This does not mean that school-based intervention programs are a sure way to prevent mental illness, there have been many studies that have found that intervention programs in schools have had a limited effect in combating disease (Gaete et al., 2016; Singh et al., 2019). However, while there did not seem to be direct positive effects to the mental health of the participants, there are longitudinal benefits to school-based interventions that may indirectly contribute to the increase of good mental health in the students (Singh et al., 2019). Even without direct effects, creating an environment in schools where mental illness can be discussed freely should not be abandoned. The task becomes
finding a way to best capitalize on the indirect benefits that a school centered intervention may bring.

Introducing mental health in school can bring awareness of these diseases to the students and to those in a position to promote changes in these students’ lives, as well as help normalize the discussion of mental illnesses. There have been many studies on programs in schools focusing on mental health and related concerns, like suicide, depression, anxiety, etc. In their study about suicide prevention in schools, Bailey et al. (2017) found that almost half of the students participating, who had no prior outcries or reporting of mental illness, had mental states that made them at-risk for suicide. This drastic increase in the rates of suicidal risk is concerning, but it may be combatted. Society can provide the support to prevent future illness through preventative measures like school programs focusing on mental illness (Jonge-Heesen et al., 2016; Silk et al., 2019). Mental illness is clearly not completely unavoidable, however, with the proper care and watchfulness for the warning signs, it may be avoided in a significant number of cases.

Although school-based interventions are not always greatly impactful in the short term and the longevity of the positive effects of these therapies leaves much to be desired, there may be indirect longitudinal benefits. Singh et al. (2019) conducted a study on others involved with the students, i.e., teachers and parents, and found that there were longitudinal benefits that came indirectly in the form of a reduction in depressive symptoms. This long-term benefit should be a focus of intervention and shows how important it is to highlight the important issue of mental illness. Within a support structure of teachers and parents, it may be much easier to target those within the adolescent population with a greater need for additional support, and that support may prove to be a long-term benefit that is worth the investment.

**Learning At Home**

As the main point of reference for how life should be lived, parents should be charged with the task of being a source of education regarding living a happy life. However, stigma seems to be thickest within the walls of the home. Knight and Winterbotham (2019) found that adults are less likely to perceive mild symptoms of mental illness as important enough to seek treatment, though they are more likely to identify major psychological issues than others. As mental
illness is often progressive, it is important to identify symptoms before the sickness interferes severely with daily life. A possible remedy for this could be to educate parents on their own influence and on effective methods of supporting their children.

Perhaps a parent’s largest influence in their children is the ability to affect how a child perceives themselves. As children hold their parents as their main role model, it follows that how they see themselves stems directly from what they have been told by that model. However, it is not just important to avoid demeaning a child, lack of positive encouragement also creates a void which may be filled with outside negative influences whether that be peers or other unrealistic standards set by the media. Positive reinforcement from parents is a necessity. When added to other methods of mental illness prevention, parents focusing on their children’s strengths significantly increases mental health (Shochet et al., 2019). If the role of a parent as an influencer can be emphasized, children’s mental health can be bolstered by having that type of positive influence to help maintain their wellbeing.

Another important factor of a parent’s influence comes from their own personal experience. If a parent understands their own mental health and can understand what it means to suffer from mental illness, they can pass on that knowledge. However, parents can be reluctant to disclose those challenges to their children, often to protect their child from that stressful topic. Claus et al. (2019) found that when placed in an open dialogue and a safe space, children were able to understand much more about depression with their parents and cope with stress. Additionally, the increased clarity in the parent/child relationship may have also had a positive effect on communication between parent and child. Thus, if parents are able to learn more about mental illness themselves and start opening a dialogue with their children about this sometimes touchy subject, both will reap the rewards of having a better understanding of the other. This increase in understanding may be instrumental in helping prevent further mental illnesses.

Providing support to a child in crisis is also a major role that parents can play. When faced with mental illness, it can be hard to know just what to do, especially if understanding of the symptoms and effects is limited. For many who have not experienced mental illness, it can be a scary and daunting thing. Parents often send their child to therapy and then hope for the best. However, a more effective approach to support may include attending counseling with
their child. The ability to actively support a child in their treatment may be a more accessible alternative to hospitalization for many parents and can be just as effective (Esposito-Smythers et al., 2019). Taking an active role in a child’s recovery may be an effective deterrent to further mental illness and ought to be considered by parents as a way to actively support a struggling child.

**Personal Responsibility**

Without personally understanding the need for change or help, it is almost impossible to successfully combat or overcome mental illness. This brings into play the need to teach adolescents about their personal responsibilities regarding living a mentally healthy life. Not only does understanding instigate changes in one’s mental state, but it can also prevent worsening mental illness from occurring. Some people find that understanding, in context to mental health, prevents much of the extra stress from interactions with others (Claus et al., 2019). It is therefore prudent to bring responsibility full circle and help the adolescent generation to understand, though they are not alone in their struggle towards recovery, they are responsible for their own wellbeing.

With personal uniqueness being a significant factor in all parts of life, it is important to understand oneself. By understanding how mental illness affects oneself, the options to combat failing health become clearer. This makes it essential to teach children to self-reflect in a more meaningful way. Hankin et al. (2018) found that testing to measure cognitive and interpersonal risks of depression makes it possible to predict what will cause the onset of depressive episodes. Early testing of youth could allow for the creation of personalized prevention plans for adolescents. With these new strategies, understanding one’s mental state may become easier and more straightforward. As further understanding is developed, adolescents may become more motivated to seek out changes, and that motivation may be key. Merrill et al. (2017) found that those with higher levels of motivation reaped more benefit from psychotherapy intervention than those with less motivation. Conversely, it was also found that the symptoms of mental illness greatly decreased youth motivation. This makes it imperative to teach youth to understand their mental states early. If it is possible to keep
adolescents motivated to stay mentally healthy, it will be much easier for them to prevent severe mental illness from ever occurring.

After understanding what mental illness means to them, society can then teach the youth how to self-manage these diseases. Successfully self-managing symptoms could lead to a positive effect on wellbeing, and may also lead to an increase in confidence in one’s ability to overcome these significant obstacles. There are numerous ways to self-manage. One study explored 50 different strategies to see which were most effective and found that of the 50, 45 were used by at least half of participants (van Grieken et al., 2018). With such a variety of techniques available, if society were to combine teaching the youth what types of things lead to their own personal illness episodes along with useful techniques in managing during those times, there may be a way to drastically reduce the rising rates of mental illness that is currently plaguing the world.

**Conclusion**

Through all the research that has been done about mental illness, it is clear that one single perfect treatment may not exist, as mental illness is not one single homogenous disease. There are many types, subtypes, and spectrums within mental illness. It seems many treatments may have similar effects, dependent on a variety of factors: the patient, the culture, the environment, the course of illness, etc. (Esposito-Smythers et al., 2019; Gaete et al., 2016; Singh et al., 2019). Despite the tenacity of mental illness and the struggles that society has faced in counteracting this pandemic, there is likely effective treatment options that can be applied to individuals in their unique situations/circumstances. The pattern of misunderstanding and stigmatization may be the reason that it becomes so hard to see when people are struggling with their mental wellbeing. To live in a world where being able to discern major mental illness is common, yet understanding mild symptoms is often overlooked is no longer a viable option (Knight & Winterbotham, 2019). Rejecting milder symptoms opens the door for more severe symptoms to emerge in the future. To prevent those harsher symptoms from ever becoming more prevalent, it is important to incorporate interventions into the core of an adolescent’s life.

In reducing the stigma around mental illness via a multi-faceted approach, the school system should become an environment where mental illness can be discussed openly. Though the benefits of increasing psychological education
may not directly influence the main student audience, the indirect benefit of having positive role models with a better understanding of mental health can be life changing (Singh et al., 2019). At the very least, being better able to identify adolescents that struggle with their mental health could provide an advantage in combating mental illness (Bailey et al., 2017). Ensuring that mental health is watched at school, a place where youth spend a majority of time, may enable positive changes to be made by those in a position to evoke that response.

As the primary role model, youth most often look to their parents for a baseline on how to live. This makes it important that parents share their experiences with mental health with their children. By doing so, parents can help to lift the stigma of mental illness and help reduce the stress of mental illness faced by their children (Claus et al., 2019). In addition to sharing experience, a parent can have a great effect on mental wellbeing by supporting their children. Focusing on their child’s strengths in combination with other therapeutic interventions can increase these positive effects (Shochet et al., 2019). Parents who are taught these skills can be better prepared to implement them into the lives of their children and help defend them against the rising rates of mental illness.

Perhaps most importantly, there must be a method by which the youth are taught to take responsibility for their own mental wellbeing. By becoming self-reliant and by self-managing symptoms, youth tend to have a more positive outlook and are more motivated to make changes for themselves (Merrill et al., 2017). With so many different forms of self-managing to incorporate, there are bound to be a few that are effective for each unique person (van Grieken et al., 2018). If society can raise awareness through educating the youth on these topics, the tide of rising mental illness may be stemmed.

Although there are limitations that have been found in the research that has been done so far, it shows a clear avenue for further research. The short-term failings of school- and home-based interventions, though concerning, should not hinder their uses. It may be possible that combining school and home interventions may have an additional positive effect in the short-term on mental health that each intervention is lacking separately. This is an area in which more research could and should be done.

The steps to ensure that mental illness does not impede the limitless potential of the younger generations are within reach. It is the duty of the schools, parents, and the individual to help combat this pandemic of mental illness. If society can work together to fight, the prognosis of the future may be much brighter, but
we need to begin the process now. Hopefully, it may be possible to reverse the current upward trend of mental illness and have a better hope for tomorrow.

References


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