
CHAPTER 6

Physical and Mental Health Issues

Mental health is influenced by biological, social, cultural and psychological factors. Some researchers believe many of the recent trends in adolescent, health-compromising behaviors (e.g., increased alcohol and other drug use, suicide, and sexual behavior) mirror psychological and emotional difficulties teens today experience. Nationally, suicide is now the third leading cause of death among 15 to 24 year-olds (Arenofsky, 1997; National Institute of Mental Health, 1999). In New Hampshire, suicide is the second leading cause of death among those in the same age group. There were twelve suicides in Cheshire County in 1998, four of which were youth under the age of 20 (NH Medical Society, Bureau of Health Statistics).

Feelings of depression, loneliness and despair are often associated with attempted suicides (Arenofsky, 1997; Koch, 1999). The presence of a social support system, however, can help to buffer teens from such feelings and possible negative consequences. Similarly, teens with positive self-esteem may be better equipped to resist negative influences and pressures in the environment than teens who have low self-esteem (Arenofsky, 1997).

Teen Worries

What do local teens worry about? Their concerns (in order of greatest to least) are: 1) getting good grades at school; 2) how they look; 3) getting along with their parents at home; 4) how well their parents get along with each other; 5) not fitting in with the other kids at school; 6) that their family has enough money to get by; 7) that their parents drink too much or use drugs and 8) being pressured to drink or use drugs. Figure 6-1 shows the eight worries as indicated by the percentage of students responding "quite a bit" or "very much" and shows the differences between middle school and high school students. Middle school students are more concerned than high school students in all areas except for getting good grades and getting along with their parents. For these two worries, there are virtually no differences between high school and middle school students.

Note: Due to rounding, some graphs may not total 100%.

Figure 6-1: Teen Worries
(Quite a Bit or Very Much, by School Level)

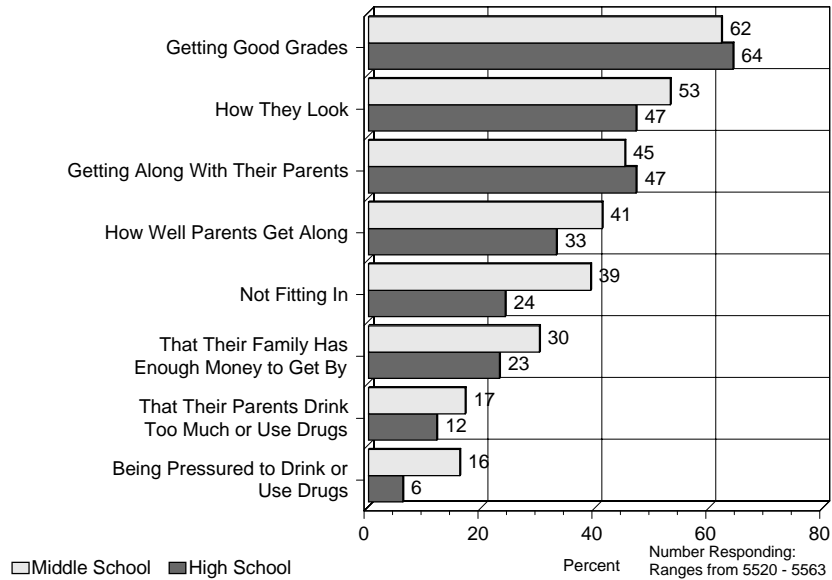
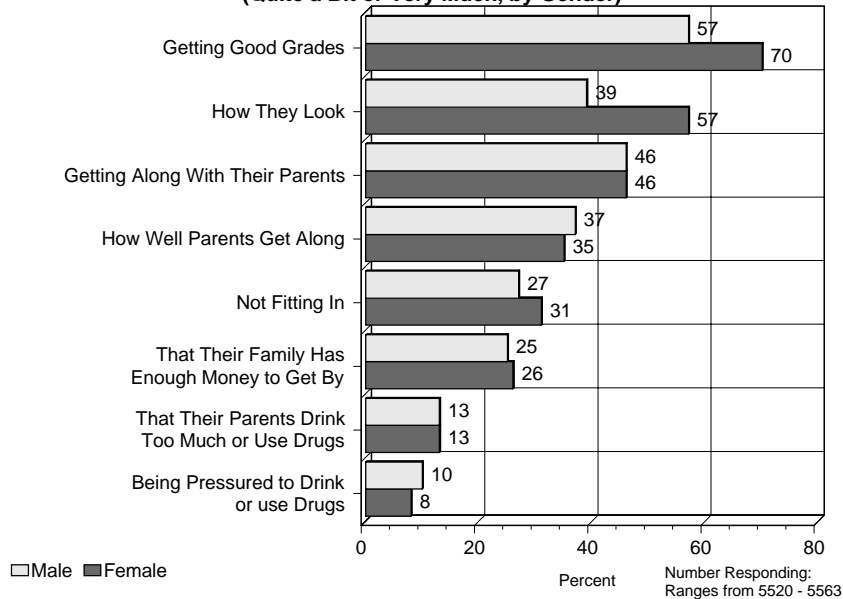


Figure 6-2 shows the same worries on the basis of gender. Females are more worried than males about getting good grades, (females, 70%; males, 57%), how they look (females, 57%; males, 39%), and not fitting in (females, 31%; males, 27%). Males and females are equally worried about other issues named in the surveyed.

Figure 6-2: Teen Worries
(Quite a Bit or Very Much, by Gender)



Local teens were asked whether they ever felt confused about being gay, lesbian, or bisexual. Two percent (2%) of youth consider themselves gay, lesbian, or bisexual, while 6% feel confused "sometimes," "a lot of the time," or "always" on the topic. As Figure 6-3 and Figure 6-4 show, there are no differences between school level or gender in terms of responses.

Figure 6-3: How Often Teens Feel Confused About Their Sexuality (By School Level)

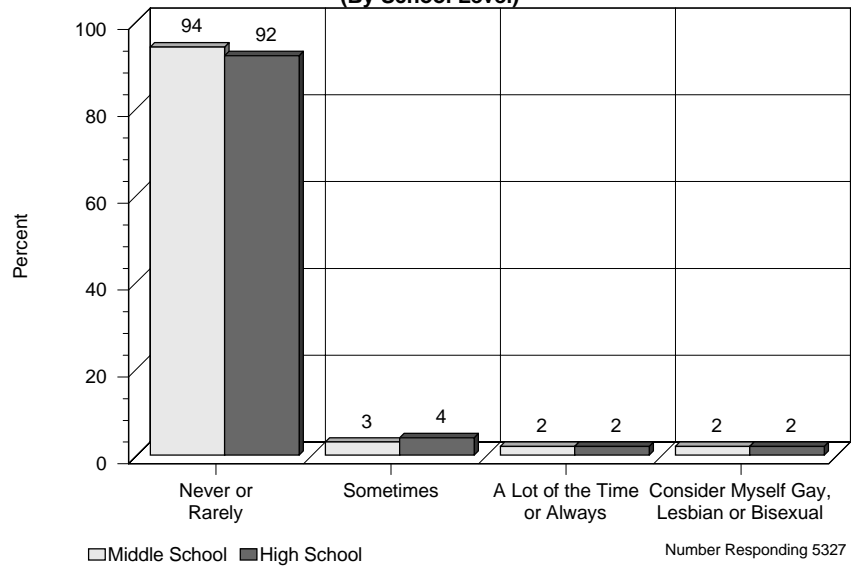
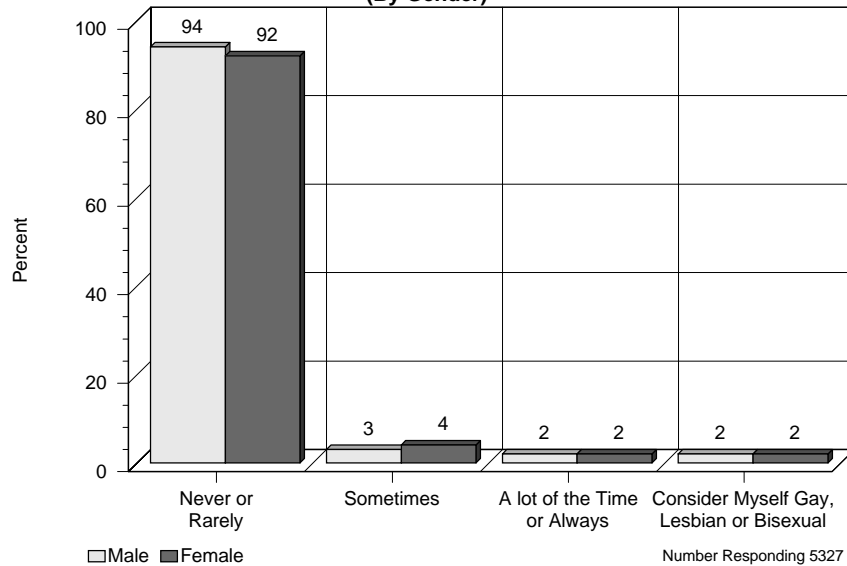


Figure 6-4: How Often Teens Feel Confused About Their Sexuality (By Gender)



Support and Advice

When asked "If you were having a personal problem and needed someone to talk to, to whom would you most likely go?", more teens (46%) responded "Boyfriend/girlfriend or one of my friends" than any other category. Teens' second choice was a parent or step-parent (30%) and their third choice was a brother or sister (10%). Figure 6-5 shows who students would talk to based on the school level of the students. Middle school students were most likely to talk to a parent or step-parent (37%) or a boyfriend/girlfriend (36%). High school students were more likely to talk to a boyfriend/girlfriend or one of their friends (50%). Four percent (4%) said they have no one to talk to.

**Figure 6-5: Who Teens Would Talk to About Problems
(By School Level)**

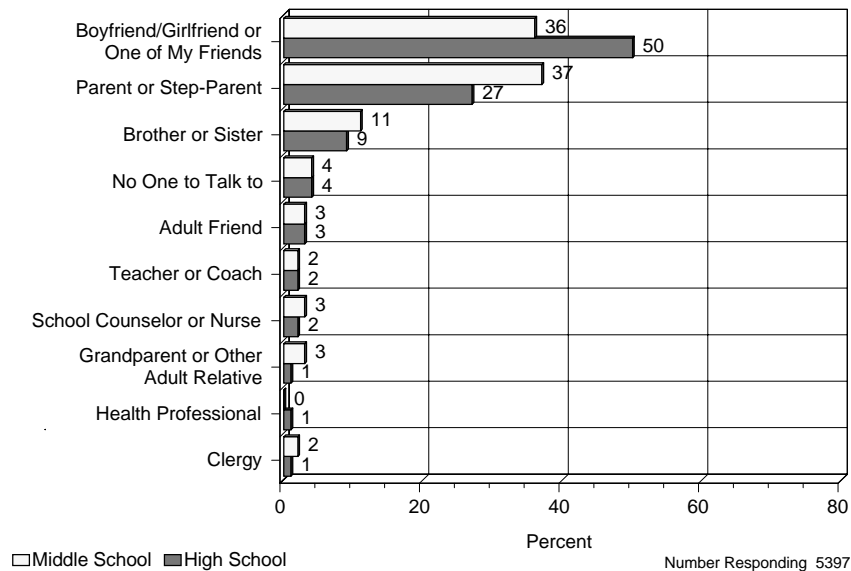
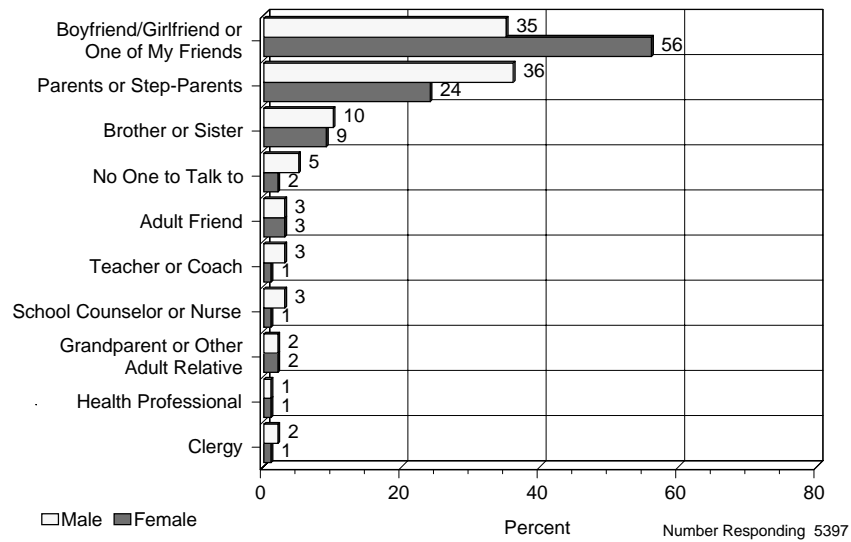


Figure 6-6 highlights the differences between males and females on the issue of whom local teens felt they would turn to with a personal problem. Females were more likely to turn to their friends than were males (females, 56%; males, 35%), while males were more likely to turn to their parents or step-parents than females (males, 36%; females, 24%). Slightly more males (5%) than females (2%) said they have no one to talk to.

**Figure 6-6: Who Teens Would Talk to About Problems
(By Gender)**



We asked teens who they considered to be their most positive role model. More students (35%) chose their parents or step-parents as their most positive role model than any other response. About one out of five teens surveyed (22%) responded "None of the above" to this question. Figure 6-7 shows only small differences between middle school and high school responses.

Figure 6-7: Who Teens Consider Their Most Positive Role Model (By School Level)

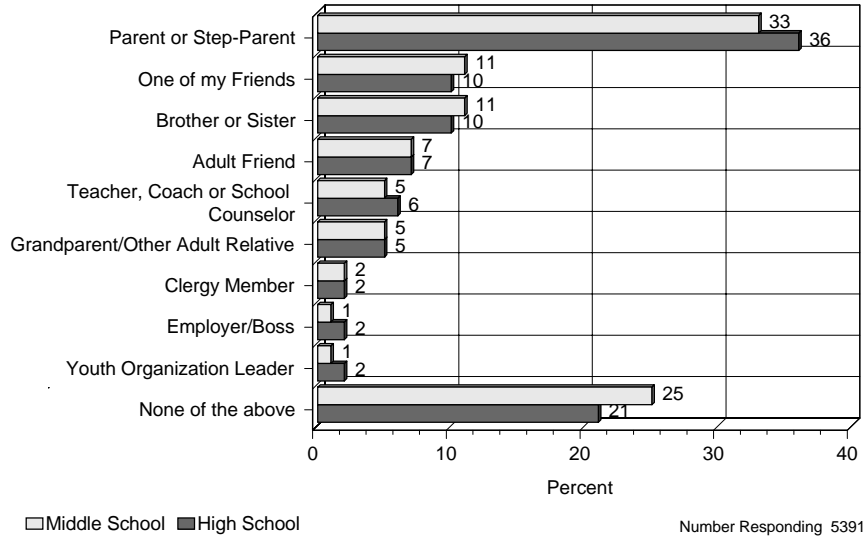
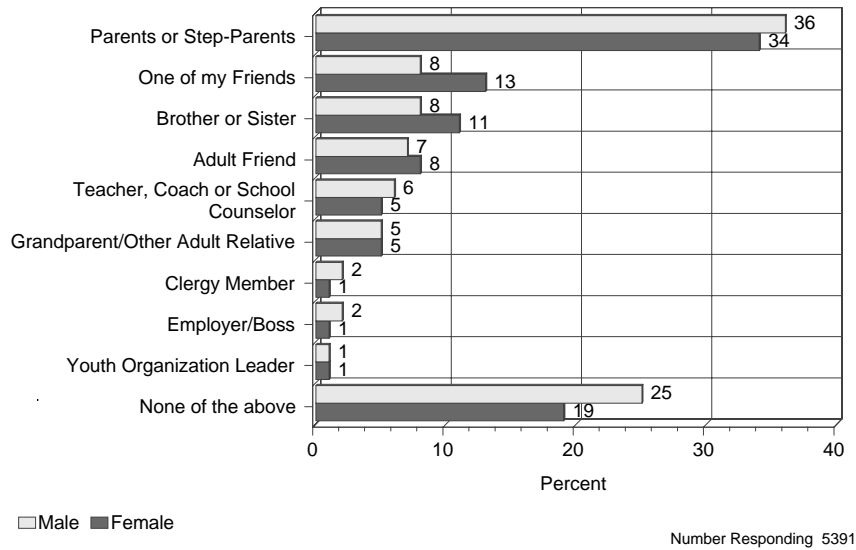


Figure 6-8 shows slightly more females than males consider either a friend or a sibling to be their most positive role model (friend: females, 13%; males, 8%; sibling: females, 11%; and males, 8%). More males (25%) than females (19%) responded "None of the above."

Figure 6-8: Who Teens Consider Their Most Positive Role Model (By Gender)



Teen Depression and Suicide

National surveys of non-hospitalized youth have found between 35% and 40% of teens reported having feelings of sadness or worthlessness some of the time (Adams et al., 1995; Schichor, Bernstein and King, 1994). Feelings of sadness or mild depression are not uncommon and are often associated with feelings of loss. For example, losing an important romantic relationship can contribute to depressive feelings. Similarly, loss of self-esteem can follow experiences of failure or feelings of guilt.

Severe depression is distinguished from mild depression by the intensity and duration of symptoms. Symptoms of serious depression may include changes in appetite and sleeping patterns, loss of interest in activities, fatigue, feelings of guilt or self-blame, inability to concentrate, feeling hopeless and helpless, and suicidal thoughts or attempts (American Academy of Child & Adolescent Psychiatry, 1997).

Overall, 72% of local youth surveyed reported having experienced depression or sadness at some time in the past month (middle school, 65%; high school, 76%; males, 61%; and females 83%). Figure 6-9 shows the percentage of local teens who experienced depression or sadness in the past month, on the basis of grade and gender. Note, the rate for females is much higher than the rate for males at every grade level.

Figure 6-9: Depression or Sadness Among Students
(At Any Time in the Past Month, by Grade and Gender)

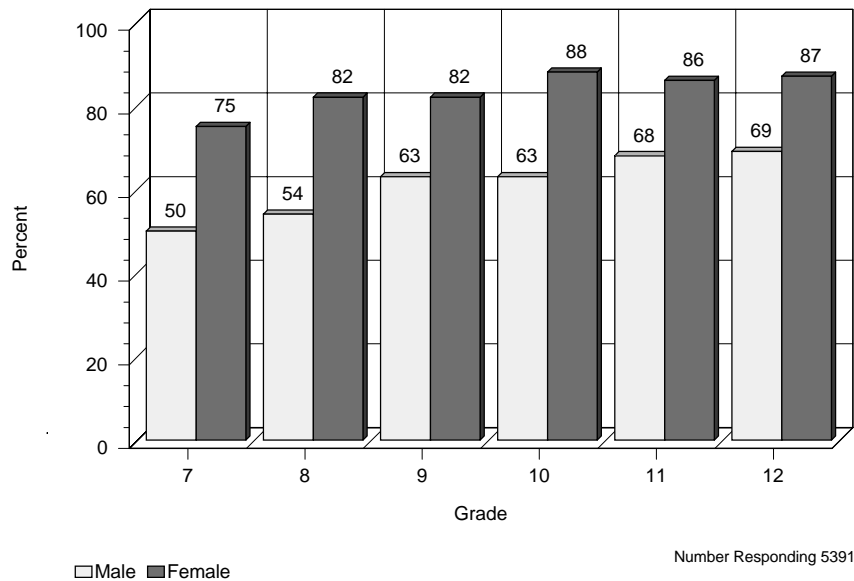
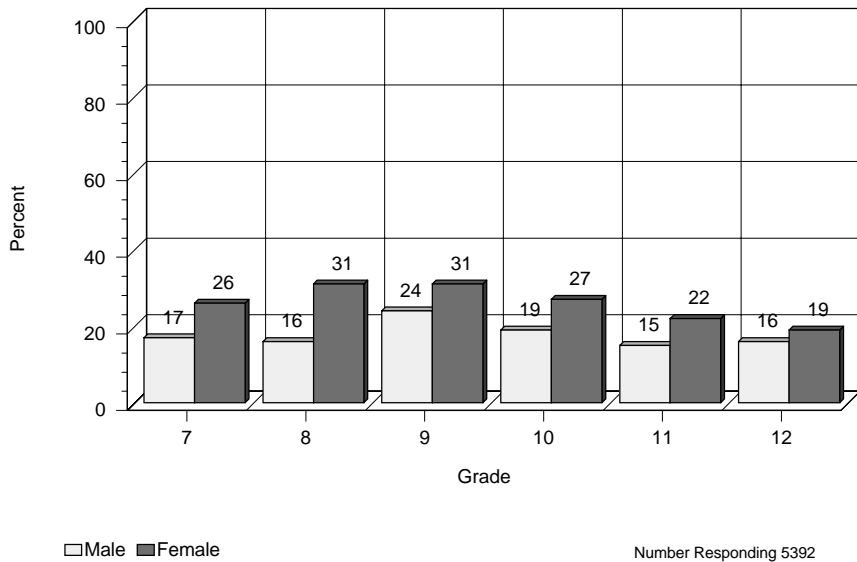


Figure 6-10 displays the percentages of local teens who reported they had *seriously thought about killing themselves during the past month.* Overall, 23% of local youth had serious thoughts about suicide during the past month. There was little difference between high school youth and middle school youth on this question (high school, 22%; middle school, 23%), but females were more apt to report they had serious thoughts about killing themselves in the past month than males (males, 18%; females, 27%).

Figure 6-10: Serious Thoughts About Killing Themselves
(At Any Time in the Past Month, by Grade and Gender)

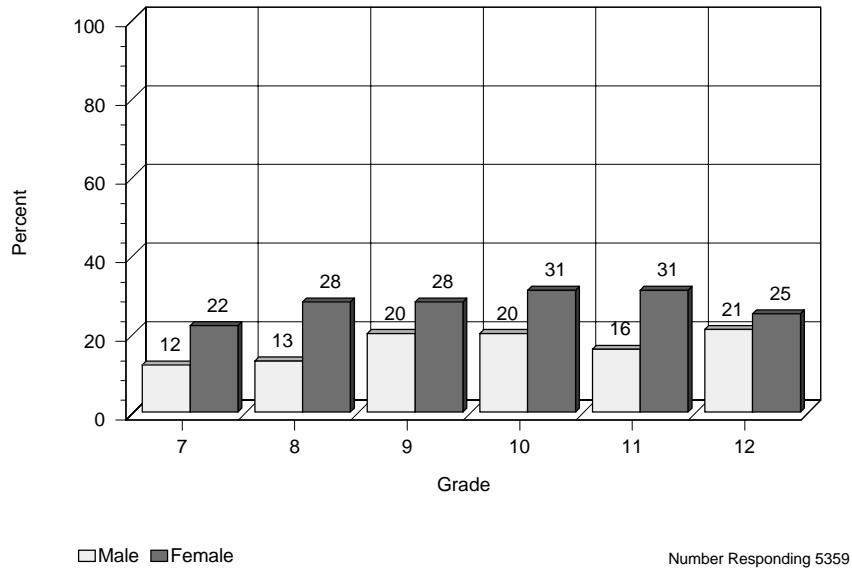


The Youth Risk Behavior Surveillance Survey found 19.3% (N.H., 20%) of high school youth (*grades 9-12*) had seriously considered suicide in the 12 months prior to the survey (Centers for Disease Control and Prevention, 2000). New Hampshire ranks 9th highest out of 32 states surveyed by the CDC.

Thoughts about suicide are fairly common during the teen years. Fortunately, not many teens act on these thoughts. However, the fact they are having such thoughts may be an indication of several things, including a current disappointment or frustration, depression, feeling alienated or detached from others, as well as an unrealistic conception about suicide and death.

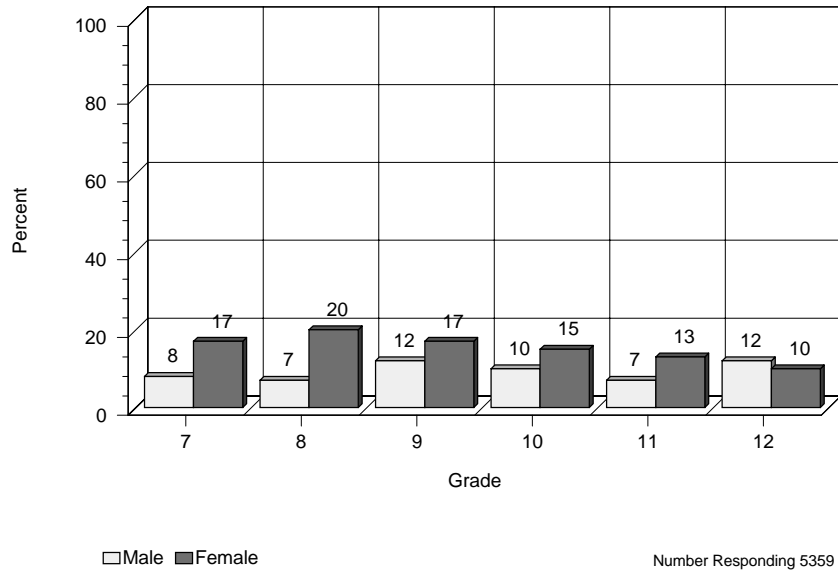
Teens were asked *"Have you ever made a plan to kill yourself?"* Figure 6-11 shows how teens answered this question by grade and gender. Overall, 23% of local youth reported making a plan to commit suicide at some time in the past. High school students were more likely to have actually made a plan to commit suicide than middle school students (middle school, 19%; high school, 24%). Females were nearly twice as likely to have made a plan for suicide than males (males, 17%; females, 28%).

Figure 6-11: Plans Made to Commit Suicide
(At Any Time, by Grade and Gender)



During the past year, 13% of local youth reported making a plan to kill themselves (middle school, 13%; high school, 12%; males, 9%; females, 15%). Figure 6-12 shows the breakdown of responses by grade and gender.

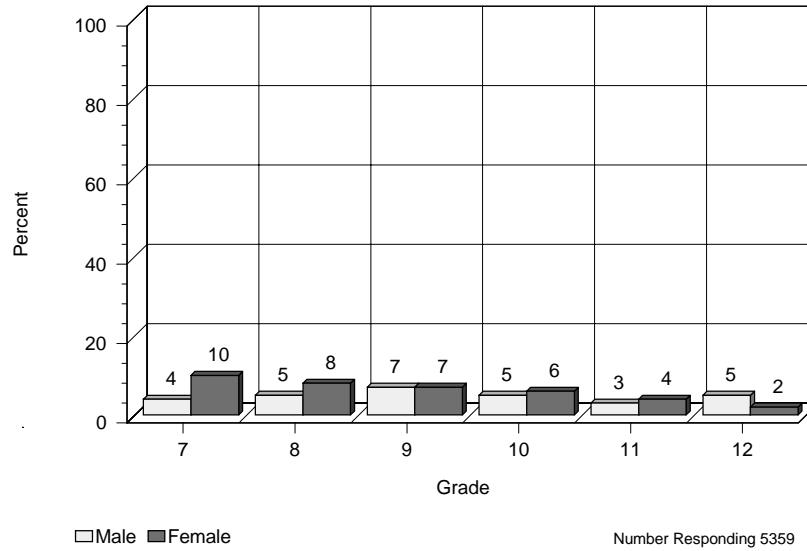
Figure 6-12: Plans Made to Commit Suicide
(In the Past Year, by Grade and Gender)



The Youth Risk Behavior Surveillance Survey found that 14.5% (N.H., 15.7%) of high school youth (*grades 9-12*) had made a plan to commit suicide in the 12 months prior to the survey (Centers for Disease Control and Prevention, 2000). New Hampshire ranks 8th highest out of the 32 states surveyed by the CDC.

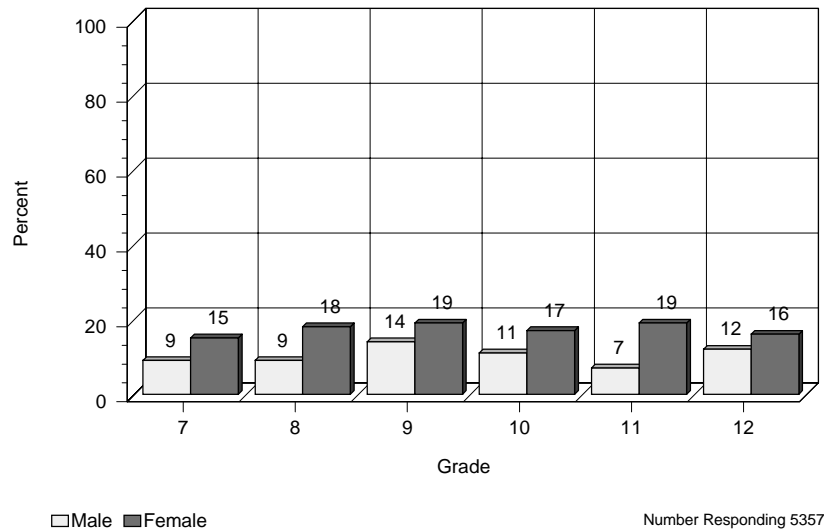
Figure 6-13 shows the percentages of local students who reported they had made a plan to kill themselves during the past month. Overall, 5% of local youth reported having made a plan to commit suicide at some time during the past month (middle school, 7%; high school, 5%; males, 5%; females, 6%).

Figure 6-13: Plans Made to Commit Suicide
(In the Past Month, by Grade and Gender)



When asked "Have you ever *actually tried* to kill yourself?", 14% of teens responded "yes" (middle school, 13%; high school, 15%; males, 10%; females, 18%). Figure 6-14 shows these responses by grade level and gender. There is no way to know what these attempts consisted of or how life threatening they were; however, they should all be taken seriously.

Figure 6-14: Suicide Attempts
(At Any Time, by Grade and Gender)

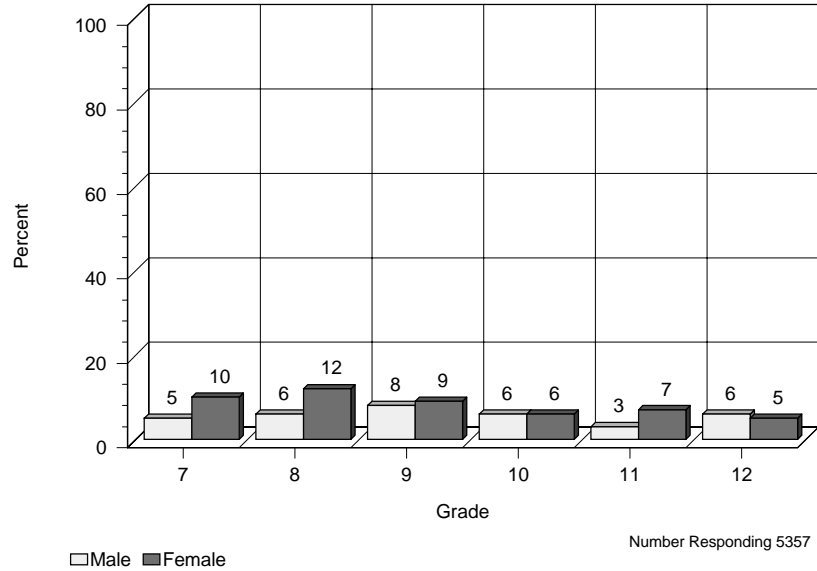


On a national level, the Youth Risk Behavior Surveillance Survey study found that 8.3% (N.H., 7.7%) of high school youth (*grades 9-12*) attempted suicide in the past year (Centers for Disease Control and Prevention, 2000). New Hampshire ranks 13th highest in suicide attempts out of 33 states surveyed by the CDC.

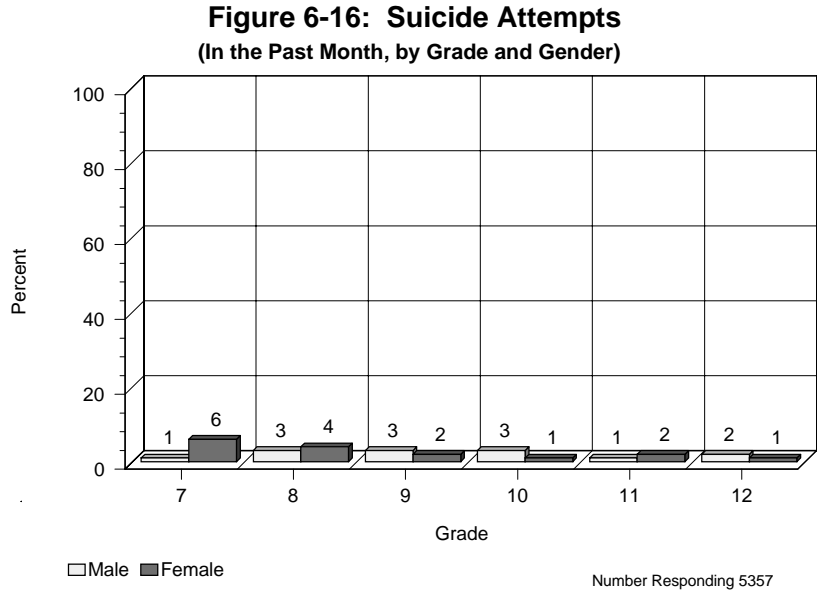
According to the National Institute of Mental Health (1999), there are an estimated 25 attempted suicides to one completion. Also, more females than males report a history of attempted suicide. However, more males die by suicide than females. This is often because males choose a more lethal method, such as using a firearm, whereas females are more likely to take pills or cut their wrists. The strongest risk factors for attempted suicide in youth are depression, alcohol or other drug use disorder, and aggressive or disruptive behaviors (National Institute of Mental Health, 1999).

Of all students surveyed, 7% reported they had actually tried to kill themselves in the past year (middle school, 8%; high school, 7%; males, 6%; females, 8%). Figure 6-15 shows the data broken down by grade level and gender.

Figure 6-15: Suicide Attempts
(In the Past Year, by Grade and Gender)



Three percent (3%) of students surveyed reported they actually tried to kill themselves in the past month (middle school, 4%; high school, 2%; males, 2%; females, 3%). Figure 6-16 shows suicide attempts in the month prior to the survey by grade level and gender.



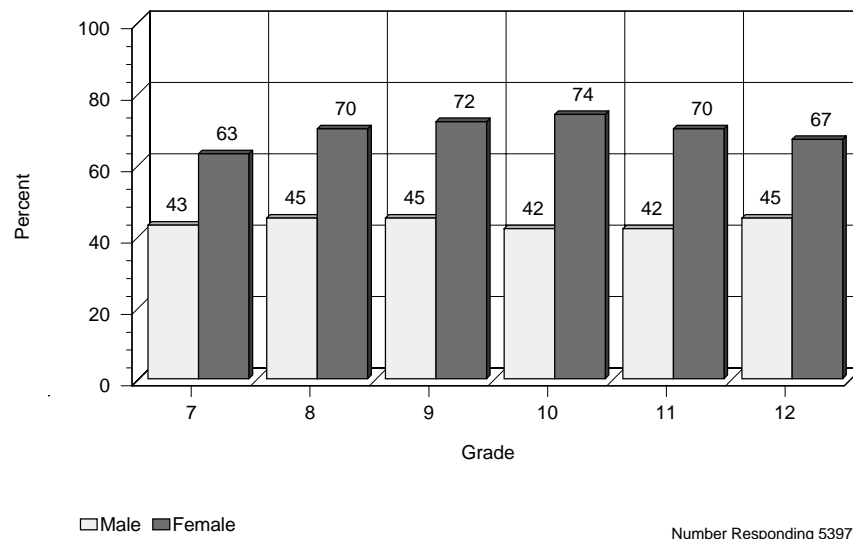
One group of teens more at risk for suicidal behavior is gay/lesbian and bisexual teens (McFarland, 1998; Remafedi, 1999). These teens are often very confused about their sexual identity and may feel they must hide it. The fact that being gay or lesbian may not be acceptable within their religion, family or culture is another difficult issue. In addition to these concerns is the fear of HIV infection, especially among gay males. Gay youth are more likely to attempt suicide than heterosexual young people (National Institute of Mental Health, 1999).

Dieting and Exercise

Many teens are concerned about their appearance. As shown in Figure 6-1, 53% of middle school students and 47% of high school students worry quite a bit or very much about how they look. This focus can lead to improper dieting practices. Specialists treating eating disorders report seeing children as young as 6 years old obsessed with dieting and weight. Dieting in high school is now the norm, involving 61-77% of the females and 28-42% of the males (Emmons, 1992).

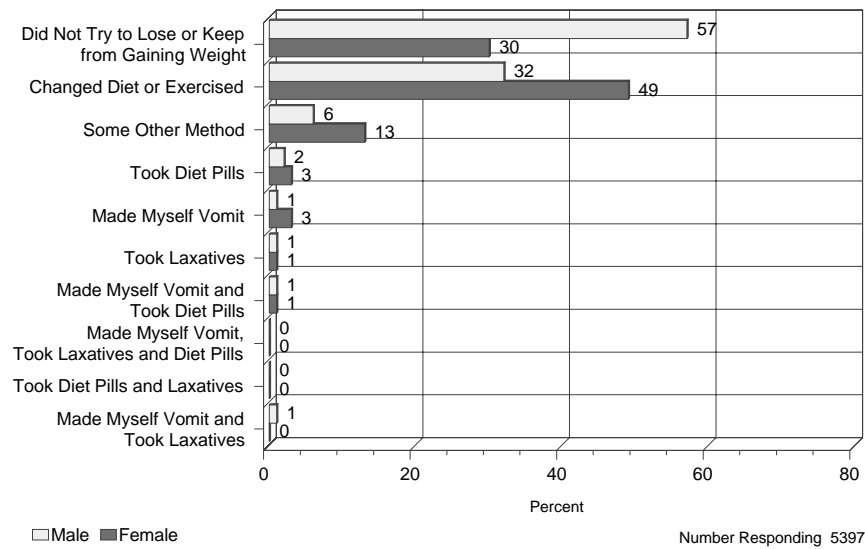
Adolescents are particularly sensitive about their appearance (Teens At Risk, 1996; Emmons, 1994). Dissatisfaction with body shape and size is prevalent, with female students less satisfied than male students (Emmons, 1994). One study of 14-16 year old females showed 77% wanted to lose weight and 51% had tried in the past month (Coleman, 1995). Nationally and in New Hampshire, more female high school students considered themselves overweight than male high school students (nationally - females, 36.4%; males, 23.7%; New Hampshire - females, 42.7%; males, 27.2%) (Centers for Disease Control and Prevention, 2000). Overall, TAP found 57% of all youth surveyed reported having attempted to lose weight or keep from gaining weight in the past month. Figure 6-17 shows how many students reported having attempted to lose weight in the past month on the basis of grade level and gender. More females than males were engaged in some form of weight control at every grade level. It is important to note that some students who report trying to lose weight or keep from gaining weight may be doing it in a positive and healthy way. Not all dieters are in danger of eating disorders.

Figure 6-17: Teens Who Tried to Lose Weight or Keep from Gaining Weight (In The Past Month, by Grade and Gender)



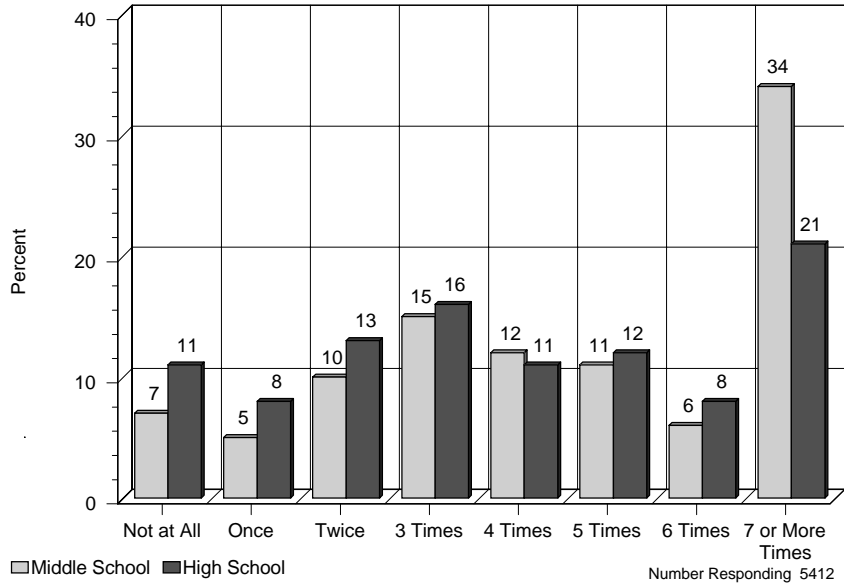
Nationwide, over 40% of adolescents are trying to lose weight, even though the majority are not overweight (Teens At Risk, 1996). However, the Centers for Disease Control report that the percentage of youth that are overweight has doubled in the past 20 years (Centers for Disease Control, 1997a). In addition, the CDC's Third National Health and Nutrition Examination Survey found 12% of teens and 14% of children were too heavy (CDC, 1997b). It is easy to see from Figure 6-18 that females were far more likely to have attempted to lose weight than were males (females, 70%; males, 44%). Slightly fewer middle school students (55%) than high school students (58%) reported they tried to lose weight in the past month.

Figure 6-18: What Teens Did in the Past Month to Lose Weight or Keep from Gaining Weight (By Gender)

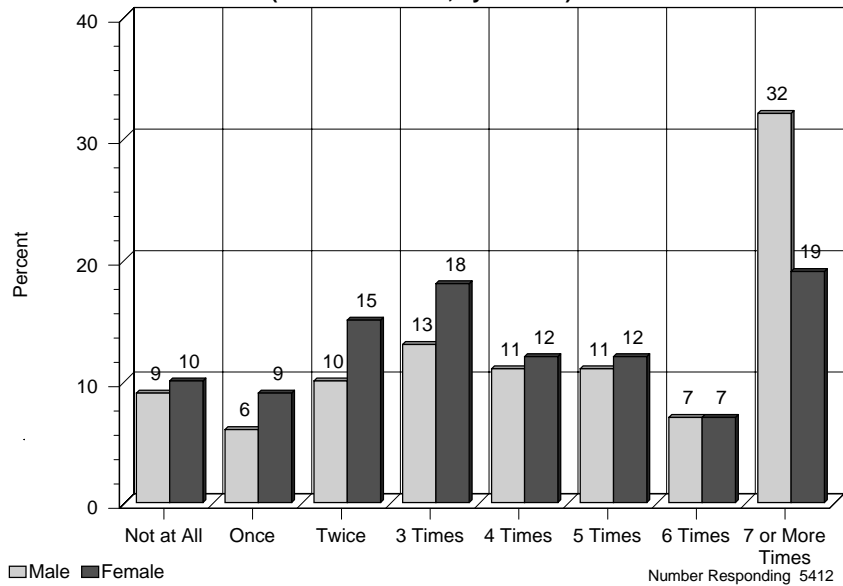


Local teens were asked *"In the past week, how often have you exercised or been physically active (for example, gone in-line skating, played basketball, done aerobics) for at least 20 minutes?"* Ninety percent (90%) of teens said they had exercised one or more times a week and 71% indicated they had exercised three or more times in the past week. Only 10% said they had not exercised at all in the past week. Figure 6-19 shows how often teens exercised in the past week by school level. Figure 6-20 shows how often teens exercised by gender.

**Figure 6-19: How Often Teens Exercised
(In the Past Week, by School Level)**



**Figure 6-20: How Often Teens Exercised
(In the Past Week, by Gender)**



Seat Belt Use

We asked students how often they wore seat belts when driving or riding in a motor vehicle. Half of students responded they "always" did (50%). Figure 6-21 shows more high school students (52%) than middle school students (45%) always use seat belts.

**Figure 6-21: How Often Teens Wear Seat Belts
(By School Level)**

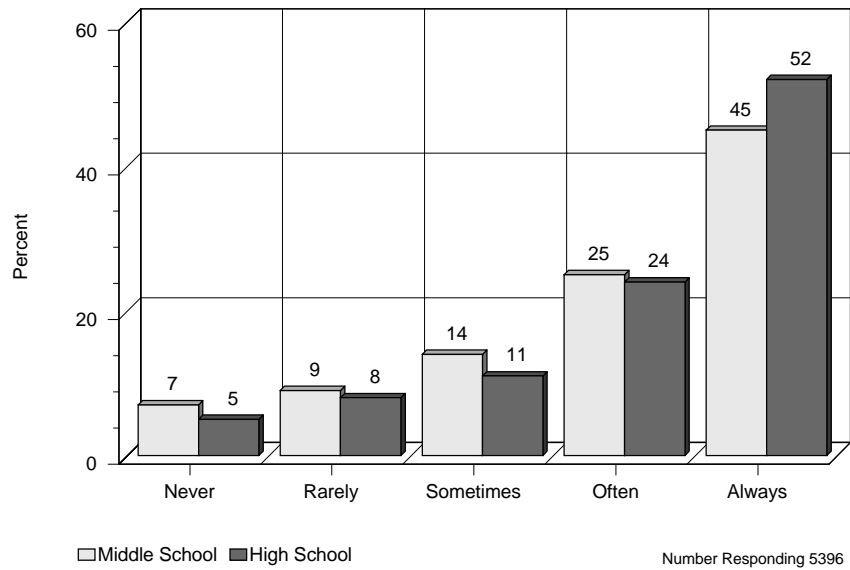


Figure 6-22 shows slightly more females (52%) than males (47%) said they always use seatbelts.

**Figure 6-22: How Often Teens Wear Seat Belts
(By Gender)**

