

## **45th Biennial Convention (16-20 November 2019)**

### **Assessing Adolescent Mental Health Through a Vulnerable Population Lens**

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Awareness of depression and suicidal behaviors are all nurses' responsibility, and every opportunity to talk with an adolescent should be used as an opportunity to assess mental health. Nurses in public health settings have the ability to engage in formal and informal assessments that can identify adolescents at risk for mental health issues. Adolescents make up 12% of the people in the United States, with 30% of adolescents reporting symptoms of depression each year. Vulnerable populations in this age group have an increase in risk for developing mental health issues that can continue into adulthood if not addressed. Often vulnerable groups are only seen in a school, public health agency, or urgent care setting due to cost and access to healthcare; however, the potential to identify an adolescent that is predisposed to mental health issues can be in any setting that a nurse may practice. In some situations, the adolescent may not be a patient, but a family member of a patient and the opportunity arises to assess for potential mental health issues.

In many instances, nurses do not recognize adolescents as being in a vulnerable population because these populations differ among age groups. Literature reviewed identified vulnerable populations for adolescents. These included (a) low socioeconomic status, (b) race/ethnicity other than white/Caucasian, (c) early menarche for females, (d) nonconformity to prescribed gender roles, (e) exposure to school violence, and (f) family violence/abuse. These groups have an increased risk of developing depression and other mental health issues.

Further, these vulnerable groups are at an increased risk of suicide. The prevalence of association between suicidal behaviors and mental health disorders common in the adolescent population is high. Ongoing assessment of the following mental health issues is imperative:

- Fear and anger disorders (includes depression)
- Generalized anxiety disorders
- Disruptive behavior disorders
- Eating disorders
- Substance abuse
- Bipolar disorder

The risk of suicide is especially high in the time directly after a non-fatal, self-harm event. This risk is particularly increased in instances of young people that used violent methods for self-harm such as hanging or firearms. Therefore, identification and ongoing assessment to assure safety should be a priority. Knowing the potential warning signs of, and impending suicide, is imperative to know and teach to patients and family.

The literature reviewed on the topic uncovered many assessment strategies that can be used to improve assessment skills and will be discussed in detail. First, early detection

of mental health issues and suicidal behavior is a critical prevention strategy. Many families use emergency rooms for primary healthcare and assessment in these areas should be of high importance. Adolescents may present with physical complaints, but do not share their mental health issues; knowing characteristics and experiences of vulnerable patients and the questions to ask can identify youth at risk. Second, although adolescents are typically healthy, a thorough medical history that addresses past and present illnesses, medical problems, hospitalizations, and family history must be obtained to identify potential risk.

Next, adolescents may communicate better with peers or other adults, utilize informal conversation to gain information. When at all possible, assess adolescents one-on-one, this allows for them to speak freely without the parent or caregiver. Then, interview family members separately when possible to gain a clear picture of the situation. In addition, use open-ended questions and employ silence to allow time to completely answer questions. Overall, the focused interview should be structured to include fewer questions that obtain the most information. Adolescents may be uncomfortable asking questions.

Finally, nurses must realize the opportunity to assess adolescents for mental health issues in every setting. A common misconception among nursing students is that mental health issues are only assessed if the admitting diagnosis suggests such. This presentation was created in response to the need for nursing students to understand their responsibility in mental health assessment and to improve assessment skill/knowledge and patient outcomes. The information presented can be used to improve the assessment skills of all nurses practicing in any setting.

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**Title:**

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**References:**

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### **Abstract Summary:**

Awareness of depression and suicidal behaviors are all nurses' responsibility. Every opportunity to talk with an adolescent should be used as an opportunity to assess mental health. Early detection through recognition of certain characteristics and strategies will be highlighted.

### **Content Outline:**

#### **I. Introduction (2 minutes)**

Recently when talking with nursing students about school shootings and mental health issues in adolescents, it was suggested by a student that only a mental health nurse assesses for mental health. This detailed lecture was created through literature review in response to the need for further understanding and knowledge of assessing adolescent mental health.

Adolescents make up 12% of the people in the United States, with 30% of adolescents reporting symptoms of depression each year. Vulnerable populations in this age group have an increase in risk for developing mental health issues that can continue into adulthood if not addressed. In addition, suicidal behaviors are common among US adolescents with mental health disorders.

When assessing patients, it is imperative to understand this risk and utilize interactions to identify adolescents with potential mental health issues. Often vulnerable groups are only seen in a school, public health agency, or urgent care setting due to cost and access to healthcare. Nurses in public health settings have the ability to engage in formal and informal assessments that can identify adolescents at risk for mental health issues.

#### **II. Body (10 minutes)**

##### **A. Discussion of Vulnerable Populations**

1. Often, nurses know that low socioeconomic status or being a victim of abuse can lead to depression, however it is often not known that the following are also vulnerable populations that predispose adolescents to depression and suicide: Socioeconomic Status, Race/Ethnicity, Sexual Orientation, Early Menarche, Nonconformity to Prescribed Gender Roles, Exposure to School, Violence, and Family Violence.
2. It is EVERY nurse's responsibility, in EVERY setting to understand and identify adolescents at risk.

##### **B. Association with Suicidal Behavior**

1. The prevalence of association between suicidal behaviors and mental health disorders common in the adolescent population is high. Ongoing assessment of adolescents with the following mental health issues is imperative: Fear and Anger Disorders (includes

depression), Generalized Anxiety Disorders, Disruptive Behavior Disorders, Eating Disorders, Substance Abuse, Bipolar Disorder.

2. The risk of suicide is especially high in the time directly after a non-fatal, self-harm event. This risk is particularly increased in instances of young people that used violent methods for self-harm such as hanging or firearms. Therefore, identification and ongoing assessment to assure safety should be a priority. **TEACH** family and friends the **Potential Warning Signs of an Impending Suicide**.
  3. Briefly review warning signs.
- C. Assessment Strategies
1. Early detection of mental health issues and suicidal behavior is a critical prevention strategy. Many families use emergency rooms for primary healthcare. Adolescents may present with physical complaints, but do not share their mental health issues. Knowing characteristics and experiences of vulnerable patients and the questions to ask can identify youth at risk.
  2. Although adolescents are typically healthy, a thorough medical history that addresses past and present illnesses, medical problems, hospitalizations, and family history must be obtained to identify potential risk.
  3. Adolescents may communicate better with peers or other adults, utilize informal conversation to gain information.
  4. Assess adolescents one-on-one, this allows for them to speak freely without parent or caregiver.
  5. Use open-ended questions and employ silence to allow time to completely answer questions.
  6. The focused interview should be structured to include fewer questions that obtain the most information. Adolescents may be uncomfortable asking questions.
  7. Interview family members separately when possible to gain a clear picture of the situation.

### **III. Conclusion (2 minutes)**

A. Awareness of depression and suicidal behaviors are all nurses' responsibility, and every opportunity to talk with an adolescent should be used as an opportunity to assess mental health. Nurses in public health settings have the ability to engage in formal and informal assessments that can identify adolescents at risk for mental health issues.

B. Encourage making changes to how you address and question adolescents and overall be more cognizant of characteristics that predispose the adolescent to mental health issues.

### **IV. Question and Answer (6 minutes)**

First Primary Presenting Author

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**Author Summary:** Holly Farley is an Assistant Professor of Nursing at Eastern Illinois University. She has been an academic nurse educator for 13 years, and holds a Doctorate of Education degree and a Master's degree in nursing education. Prior to her current position, she taught for 9 years in an Associate Degree Nursing program. Dr. Farley holds a Master Online Teaching certificate and has given oral and poster presentations on the topic of online education.