Youth Risk Behavior Surveillance Surveys 2011 & School Health Profiles Comparison 2010:

Mental Health Among Louisiana Public School Students
Introduction

The Youth Risk Behavior Surveillance Survey (YRBSS) is a national school-based survey supported by the Centers for Disease Control and Prevention (CDC) and implemented by Louisiana state agencies to monitor priority health-risk behaviors among youth. In 2011, the YRBSS was administered to a total of 1,160 students at a random sample of 24 public high schools in Louisiana. Results from the YRBSS are used to guide programs and policies that support health as well as set and track progress towards health goals. For more information on the CDC’s YRBSS, please visit http://www.cdc.gov/HealthyYouth/yrbs/index.htm.

In 2010, the School Health Profiles Survey (Profiles) was completed by 231 principals and 225 lead health teachers (as designated by the principal) in Louisiana, representing approximately 74% and 72% of Louisiana public high school principals and lead health teachers, respectively. School Health Profiles is a system of surveys that assess school health policies and practices.

A comparison of results from the 2011 YRBSS and the 2010 School Health Profiles Survey provides useful insight into how well policies and student health practices are aligned, as well as how accurately school personnel perceive student behavior related to health-risk behaviors. Implications and recommendations are presented herein based on these perceptions and practices. For more information on the background, content, results and trends from the 2010 School Health Profiles Survey, please visit http://www.cdc.gov/healthyyouth/profiles/2010/profiles_report.pdf.

Figures 1 – 7 represent findings from the 2011 YRBSS. Figures 8 and 9 display findings from the 2010 School Health Profiles, and reference relevant questions from the YRBSS in the same figure.
Mental Health in Louisiana: What are the Students Saying?

Figure 1. 2011: Felt Sad or Hopeless

- 30% of Louisiana students and 29% of students nationally reported feeling sad or hopeless every day for 2 or more weeks in a row so that they stopped doing some usual activities (Felt Sad or Hopeless).
- More females (35%) than males (25%) reported feeling sad or hopeless every day for 2 weeks.
- 31% of Caucasians and 28% of African-Americans reported feeling sad or hopeless every day for 2 weeks.
- Reports of feeling sad or hopeless decreased with grade level; with 34% of 9th graders feeling sad or hopeless, 29% of 10th and 11th graders feeling sad or hopeless, and 27% of 12th graders feeling sad or hopeless.

Figure 2. 2011: Mental Health Not Good

- 46% of Louisiana students reported that their mental health was not good on one or more of the 30 days prior to taking the survey, compared to a national rate of 29% (Mental Health Not Good).
- 56% of females and 39% of males reported that their mental health was not good.
- 56% of Caucasians and 40% of African-Americans reported that their mental health was not good.
- Students of all grade levels reported similar rates of poor mental health, ranging from 44% to 50%.
Figure 3. 2011: Seriously Considered Attempting Suicide

- 16% of students seriously considered attempting suicide during the past 12 months (Seriously Considered Attempting Suicide).
- Males (17%) and females (16%) reported similar rates of seriously considering attempting suicide.
- Caucasians (17%) and African-Americans (15%) also reported similar rates of seriously considering attempting suicide.
- The likelihood of seriously considering attempting suicide decreased with grade level, from 23% in 9th graders to 7% in 12th graders.

Figure 4. 2011: Made a Suicide Plan

- 12% of Louisiana students and 13% of students nationally surveyed made a plan about how they would attempt suicide during the 12 months prior to the survey (Made a Suicide Plan).
- More females (14%) than males (10%) made a suicide plan.
- Similar rates of Caucasians (12%) and African-Americans (12%) reported that they made a suicide plan.
- The rates of 9th, 10th, and 11th graders who had made a suicide plan were similar (13%-15%). This trend decreased substantially for 12th graders (4%).
Figure 5. 2011: Attempted Suicide

- 11% of Louisiana students actually attempted suicide one or more times during the 12 months prior to the survey, compared to the national rate of 8% (Attempted Suicide).
- 10% of females and 11% of males attempted suicide.
- 10% of both Caucasian and African-American students attempted suicide.
- The rates of 9th, 10th, and 11th graders who had made a suicide plan were similar (13%-15%). This trend decreased substantially for 12th graders (4%).

Figure 6. 2011: Attempted Suicide with Injury

- 5% of the aforementioned suicide attempts resulted in injury, poisoning, or an overdose that had to be treated by a doctor or nurse during the 12 months before the survey (Attempted Suicide with Injury).
- 6% of females and 4% of males attempted suicide with injury.
- 4% of Caucasians and 6% of African-Americans attempted suicide with injury.
- 7% of both 9th and 10th graders who attempted suicide experienced injury, and 5% of 11th graders who attempted suicide resulted in injury. *
Figure 7. 2011: Have an Adult at School to Talk To

- 62% of students reported that there is at least one teacher or other adult in their school that they can talk to if they have a problem (Have an Adult at School to Talk To).*

- 63% of females and 61% of males reported that they have an adult to talk to.

- A higher percentage of Caucasian students (66%) than African-American students (58%) reported that they have an adult to talk to.

- 55% of 9th graders, 62% of 10th graders, 63% of 11th graders, and 72% of 12th graders responded that they have an adult to talk to.

*National data not available.
Youth Mental Health in Louisiana: What are the School Leaders Saying?

**Figure 8. Suicide Consideration and Attempts: School Prevention Effort vs. Student Reports**

![Bar chart showing suicide attempts and consideration among teachers and students.](chart)

- **Lead Health Teacher Report (Profiles):** Teachers tried to increase student knowledge about suicide prevention.
- **Student Report (YRBS):** LA students who seriously considered suicide in the year prior to the survey.
- **Student Report (YRBS):** LA students who attempted suicide in the year prior to the survey.

*Figure 8. Although only 50% of Lead Health Teachers reported to have received professional development on suicide prevention, 71% of Lead Health Teachers tried to increase student knowledge on suicide prevention. Despite these efforts, 16% of public high school students in LA seriously considered attempting suicide, and 11% of public high school students in LA actually attempted to commit suicide.*

**Figure 9. Emotional and Mental Health: School Curriculum vs. Student Reports**

![Bar chart showing emotional and mental health among teachers, principals, and students.](chart)

- **Lead Health Teacher Report (Profiles):** Teachers tried to increase student knowledge about emotional and mental health.
- **Student Report (YRBS):** LA students whose mental health was not good on one or more of the 30 days prior to the survey.

*Figure 9. With 48% of public high school students in LA reporting poor mental health, only 18% of surveyed schools had School Improvement Plans that included goals about mental health and social services. Although 85% of teachers tried to increase student knowledge about emotional and mental health, only 41% of teachers received professional development on emotional and mental health.*
Limitations

- YRBSS and Profiles are both based on self-reported responses, potentially leading to some response bias by students and school administrators while completing their surveys. For students, this could be due to both the inability to recall all risk behaviors and the conscious decision to not report all risk behaviors accurately due to fear or discomfort. For school health leaders, this could be due to both the inability to recall policies and practices and the conscious decision not to report on said policies and practices accurately.

- The School Health Profiles were conducted one year prior to the 2011 YRBSS surveys, and differ in the methodology, and sampling. Therefore, the relationship between the results of the two reports should be interpreted with caution.

- The current findings do not capture risk behaviors of Louisiana youth that are not enrolled in the public school system. Approximately 14% of Louisiana students (k-12) are enrolled in private schools.

- The sample size for 12th grade students was less than 100, which may affect generalizability.

Conclusions & Recommendations

Results from the 2011 YRBSS indicate that mental and emotional health programming may be particularly important if specific attention is given to two target groups: (1) white females and (2) 9th graders. Rates of poor mental health were higher for females than males for all questions, aside from actually attempting suicide (see Figures 1 – 4). Additionally, 9th graders reported the highest rates of feeling sad or hopeless, having poor mental health, and attempting suicide with or without injury. Moreover, 9th graders also reported the lowest rate of having an adult to talk to at school (see Figures 1 – 7).

This data suggests that more Louisiana public schools should have School Improvement Plans that include mental health services. Louisiana students reported higher percentages of poor mental health indicators than the national average on the majority of 2011 YRBSS survey questions. The Profiles report indicates that the teachers may see the need for mental health education; however, the programming and professional development on the administrative end may not be sufficient. Future work in mental health improvement should focus on expanding suicide prevention education in schools, and mental and emotional health counseling services in schools. Educational programs and counseling services are also important outside of the school system, as not all of Louisiana’s youth are enrolled in public school. Moreover, an expansion of these services outside of the school system as well as efforts towards more parental and community education will also lead to enhanced exposure and reinforced messaging of mental health promotion and suicide prevention efforts for students who are enrolled in school.