



Association of Community Mental Health Centers of Kansas, Inc.

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Combating Stigma with Education in Behavioral Health

As a graduated senior from Blue Valley North's class of 2020, I know firsthand how proactive conversations about mental health can help students. In high school, I was able to help a friend who was struggling with suicidal thoughts realize that she is loved. Having that conversation and showing her support helped her to realize that she did not have to face her struggles alone and that there is a support system to help. However, for other youth it may be more challenging to recognize and seek the services that are readily available to them because there is an inherent cultural stigma against mental health.

In order to increase access to and ensure the success of these school-based behavioral health services, it is imperative that student populations are willing to seek out available resources and do not encounter added anxiety due to fear of negative peer response. Because of stigma, many students worry that seeking mental health services or even discussing their personal struggles will lead to a tarnished reputation or loss of friends. As a result, it is crucial that communities come together to end mental health stigma. Collaboratively, we must work together to build a societal understanding that it is okay not to be okay.

So how do we accomplish this feat?

We push for a world in which mental health is treated and viewed in the same light as physical health. To help others grasp this concept, I like to explain that for physical health injuries, seeking treatment is encouraged and largely supported, yet seeking behavioral health treatment is often avoided. The best means of eliminating stigma is redefining societal and cultural perspectives on mental health. This process begins in schools where children need to be actively engaged in learning and teachers in teaching.

For elementary students, tier-one social-emotional curriculums should be taught on a daily basis whereby the teacher reinforces emotional learning with their academic lessons. An example of this is that a teacher could give a lesson on sharing and then have the students share classroom supplies for a later activity.

In agreement with the need to look at school-based behavioral health services, during a personal conversation, Representative Samsel from Kansas House District 5 stated,

We cannot realistically expect to educate children unless their mental health is stable. Anxiety, depression, suicidal thoughts, and any number of issues related to mental well-being must be addressed before we can expect students to perform well and excel in the classroom. It is both the fiscally smart and moral choice to get our kids on a sound path as early as possible. Yes, it will require an investment, but the dividends will be tremendous.

By providing mental health education at an early age, students will be more equipped to understand their own emotions, have an open mindset about discussing their emotional well-being, and will be more likely to seek behavioral health services should they need them.

The need for an increase in mental health education becomes even more apparent for the middle school age group. According to the World Health Organization, more than 50% of lifetime mental health conditions develop before the age of 14. This age group encounters added stress due to changing bodies, friend groups, and perspectives on who they are and who they want to be. In my experience, this early mental health intervention and education can have a tremendous impact as it will greatly aid them in dealing with challenges in high school and beyond.

In order to make behavioral health education more effective, activities and lessons must engage students and encourage them to reflect on and discuss what they have learned with their peers. Peers are the biggest influence on these students and encouraging peer-to-peer mental health conversations is the greatest way to counter stigma and ensure students are open to services. By increasing behavioral health education, students will engage in more active conversations about their own mental health and well-being. In turn, there will be a reduction in stigma, and the services provided will yield better results.

Increasing behavioral health education and access to treatment unlocks the greatest opportunity to raise a generation that is unashamed of their mental health. Thus, we cannot lose the gains we are making. Now is the time to increase our state and community investments in behavioral health.

-Caleb Nelson

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Caleb Nelson is a recent graduate of Blue Valley North's class of 2020. During his time in high school, he actively worked on the #ZeroReasonsWhy storytelling campaign which focuses on reducing stigma, committing to education, and building community support with regards to mental health. Caleb is now interning at the Association of Community Mental Health Centers of Kansas and will pursue higher education at Baylor University this fall.