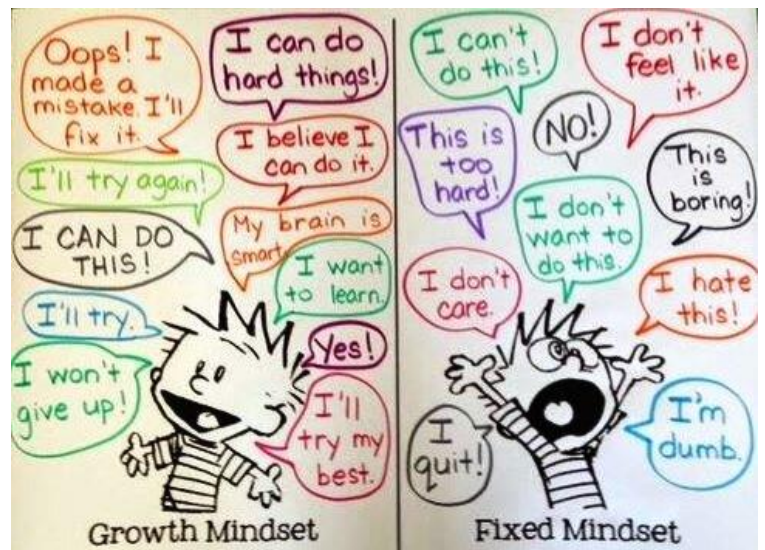


Addressing Negative Self-Talk

“I’m not good enough”, “I’m going to fail”, “everybody hates me”, are examples of negative self-talk. Negative self-talk is when someone expresses something (verbal or written) about themselves or their lives in a negative sense. It is not uncommon for kids and teens to say negative things about themselves or engage in self-critical behavior from time to time. This can be a normal part of development as youth learn to navigate making mistakes, develop their sense of identity and experience ups and downs in self-esteem. While some of this may be harmless or simply a way for kids to seek reassurance, negative self-talk can also become an unhealthy pattern of behavior that might be reflective of a bigger problem such as a learning disability, low self-esteem, anxiety or depression.

When a caring adult hears a child or teen say something like, “I’m so stupid” or “nobody likes me”, it may be tempting to respond with, “you’re one of the smartest kids I know” or “you have lots of friends”. This type of feedback may not be helpful for youth to hear if they don’t believe it for themselves. Experts in the field of child and adolescent development offer the following alternatives to help reframe negative self-talk:

- **Listen, validate and empathize-** offer a safe place for children/teens to share difficult feelings and concerns.
- **Provide an alternative way of viewing themselves-** help the child or teen think of some examples that disprove the negative expression they have made. For example, if they are claiming to be stupid, remind them of an obstacle they have overcome or any other accomplishment.
- **Explore the statement-** ask probing questions such as, “what’s happened that makes you feel that way?”. Remain curious and get more information from the young person about what thoughts and emotions may be behind the negative expression.
- **Normalize mistakes and failure-** kids may engage in negative self-talk when they are frustrated or discouraged over doing something wrong or not doing something well enough. It is important to let youth know that mistakes and failures are a normal part of life. Guide kids to learn and grow from these experiences by offering supportive, constructive feedback and recognition of their effort.
- **Model a growth mindset**



It is important to pay attention to negative self-talk because it can be a symptom of a larger issue that a child/teen may be experiencing. If the behavior is persistent and negatively impacting the

child's life, or if it is linked to concerning shifts in mood and behavior, professional support can help. Cognitive Behavioral Therapy (CBT) is an effective approach that can help youth identify and reframe negative thinking patterns, while helping them to build confidence and learn problem solving skills. Talk to your family doctor or seek out help from a mental health professional to get extra guidance.

References: American Academy of Child & Adolescent Psychiatry; American Academy of Pediatrics; Child Mind Institute; Psychology Today

LGBTQ+ Mental Health and Protective Factors

It is no secret that youth mental health concerns are at an all-time high. Last year, it was reported that 19.5% of youth had suffered from at least one major depressive episode in 2022, and 13.4% of kids had serious thoughts of suicide. Half of those children had made suicide plans, and, unfortunately, 1 in 25 youths had attempted suicide that year. From these statistics alone, it is apparent that children are struggling. When discussing this topic, one population that is often overlooked is the LGBTQ+ community.

According to research done by UCLA, in 2020, 9.54% of youth in America (roughly 2 million) identified as LGBTQ. However, due to their identity, they are often subject to greater mental health burdens than their peers who do not identify themselves as LGBTQ+. These students often experience higher rates of bullying, both in-school and electronically, being threatened or injured with a weapon, and domestic violence. And these risk factors are not confined to their school. 20% of LGBTQ+ students reported physical abuse from an adult in their own home, while cisgender, heterosexual students report a 10% rate of abuse.

Due to these larger stressors, mental health of LGBTQ+ youth suffer to an even greater degree than that of the general youth population. The CDC reports that in 2021, 69% of LGBTQ+ youth experienced persistent feelings of despair and hopelessness, being nearly double the overall rate in young people. Additionally, 73% report symptoms of anxiety. Finally, LGBTQ+ youths have quadrupled rates of attempted suicide, as compared to cisgender, heterosexual youths.

Because of the greater mental health concerns, it's important to build up protective factors to bolster their security. Some examples of protective factors are:

- **Social Support** – Research has shown that mental health among LGBTQ+ individuals is drastically improved by social and familial support. Acknowledging and accepting their identity has been shown to reduce the rate of suicidal ideation and attempting by 66%, as compared to those who are not supported. Other forms of community support, such as online communities and faith communities, also have the capacity to support LGBTQ+ youth.
- **Safe Environments** – LGBTQ+ youth that can trust their environments tend to have better outcomes than those who cannot. Schools that have active anti-bullying systems in place, particularly those that lay out protections for LGBTQ+ students, report improvements in mental health. Furthermore, schools with GSA (Gay-Straight Alliance/Gender and Sexualities Alliance) programs lowered distress inside this population. These protective factors are found to be associated with a 56% decrease in suicidal behavior.
- **Coping Skills** – Many LGBTQ+ youth are unable to speak to friends or family about frustrations they experience due to feeling unsafe in coming out to those around them. Because of this, supporting LGBTQ+ students can often take form in teaching all students proper coping mechanisms. Students having methods of confidentially venting their frustration to a neutral and trustworthy party, such as a school counselor or social worker, can assist them in receiving proper support and lead them to better outcomes than those without support. If a LGBTQ+ student confides in someone regarding their orientation, it

was likely done selectively. Because of this, it's important to respect their autonomy and only discuss their orientation with them.

- Recognition – While it may be simple, acknowledging LGBTQ+ students' existence and ensuring that they feel seen and heard inside their school is vital.

Ultimately, protecting the mental health of youth is one of the most vital responsibilities of the generations before them. It is essential that schools continue to implement safeguards and take actions that protect all students, especially vulnerable groups and individuals.

For more information on LGBTQ+ mental health and protective factors, please visit the following resources:

<https://scipnebraska.com/resources/resources/sexual-abuse-prevention-and-lgbtq-resources.html>

<https://www.cdc.gov/lgbthealth/youth.htm>

<https://www.samhsa.gov/newsroom/press-announcements/20231113/hhs-samhsa-release-2022-nsduh-data#:~:text=Over%201%20in%208%20adolescents,suicide%20in%20the%20past%20year.>

<https://www.cdc.gov/healthyyouth/disparities/protective-factors-for-lgbtq-youth.htm>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8583439/>

<https://www.thetrevorproject.org/research-briefs/fostering-the-mental-health-of-lgbtq-youth/>

INHALANT ABUSE

The Foundation for a Drug-Free World reports that “**20% of American adolescents** – 1 out of every 5 – will experiment with inhalants by the eighth grade.”

What is Inhalant Abuse? Inhalant abuse, more commonly called huffing, is a type of substance abuse that involves breathing in (inhaling) fumes from household products for the purpose of “getting high”. Sniffing, bagging and/or chroming are also slang terms used in reference to the inhaling of chemicals to get high.

According to the National Institute on Drug Abuse (NIDA), there are four general categories of inhalants:

- **Volatile solvents** – Liquids that vaporize at room temperature.
 - These include paint thinners and removers, nail polish remover, cleaning fluids, glues, correction fluids and felt-tip marker fluids.
- **Aerosols** – Sprays that contain propellants and solvents.
 - Such as spray paints, deodorant and hair sprays.
- **Gases** – Medical anesthetics and liquid petroleum gases
 - Included in this category are ether, chloroform, halothane and nitrous oxide (“laughing gas”) and then gases found in butane lighters, propane tanks and whipped cream dispensers.
- **Nitrites** – Includes amyl nitrite, butyl nitrite and cyclohexyl nitrite, often called poppers.
 - Poppers are often packaged in small bottles like the energy shot products and sold as air fresheners, liquid incense, room deodorizers, cosmetics solvents, nail polish removers.

Why Do Youth Abuse Inhalants?

There are many reasons why youth inhalants appeal to youth.

- Readily Available and Easily Accessible
- Low Cost
- Escape Reality
- Mental Health
- Curiosity
- Peer Pressure etc.

What Youth Use to Huff

Inhalant paraphernalia used in huffing and/or inhalant abuse includes any item used to inhale chemicals to produce a high.

The following items are often used:

- Plastic Bags or Paper Bags
- Bandanas or Scarves

- Other Clothing
- Cotton Balls or Cotton Swabs
- Cloth Diapers or towels
- Soda Cans
- Balloons
- Cardboard boxes
- Aerosol cans

Inhalant Abuse is Deadly

Inhalant abuse has been trending down and was at an all-time low and holding steady for the last two or three years, yet youth inhalant abuse is still arguably the most damaging substance of abuse because it can cause immediate, irreversible brain damage and/or death. Huffing can cause severe brain damage or death to occur in a multitude of ways:

- Suffocation: This occurs when a youth's face is covered by the plastic bag and they are unconscious or too intoxicated to get it off
- Choking: When a youth passes out and vomits, choking on their vomit while unconscious
- Lack of oxygen: When a small enclosed space is filled with fumes that take up oxygen space or when lungs are filled with fumes rather than oxygen
- Explosion of combustible substances
- Cardiac arrest caused by caustic fumes
- Allergies to the chemicals
- Accidents under the influence

Warning Signs of Inhalant Abuse in Teens:

Some of the signs and symptoms of youth inhalant abuse are:

- Strong chemical odors in the youth's room, clothes, skin, or on their breath
- Finding empty aerosol cans, solvent containers, or inhalant paraphernalia in garbage and/or bedroom
- Chemical or paint stains on clothes, hands, or face
- Redness, rashes, or sores around the mouth or nose
- Bloodshot eyes or runny nose
- Difficulty speaking and/or slurred speech
- Vomiting, nausea, lack of appetite, weight loss
- Confused behavior, dizziness, or a dazed look

What are the Short-Term and Long-Term Effects of Inhalant Abuse?

While death is the most alarming side effect of inhalant abuse, there are also other short-term and long-term effects of inhalant abuse.

- Short-term effects include:
 - Slurred or incoherent speech
 - Impaired balance and coordination

- Hallucinations/Delusions
- Confusion/Impaired judgment
- Aggression/Hostility
- Loss of consciousness
- Long-term effects include:
 - Long-lasting Disorientation/Confusion
 - Depression
 - Memory loss
 - Lowered IQ
 - Cognitive loss
 - Hearing problems
 - Blood disorders
 - Coma

What Parents/Caregivers Can Do to Prevent Inhalant Abuse:

- The first step in preventing inhalant abuse in youth is to learn about it and educate yourself. The more aware parents are, the better prepared they will be to prevent and/or intervene.
- Secondly, parents should also talk to their kids about the dangers of inhalant use, making it clear that these substances are poisonous and can and have caused serious brain damage and death in youth.
- Furthermore, parents can limit access at home to commonly huffed products by locking up products in a cabinet, closet and/or supply room.

If you are concerned that your child is using/abusing inhalants, seek help. Click on the link below from Nebraska Department of Health & Human Services (NDHHS) for more information about finding substance use help in Nebraska.

<https://www.findhelp.org/nebraska-department-of-health-%26-human-services--omaha-ne-youth-mobile-crisis-response-%28ymcr%29/5655256296587264?postal=68101>

For additional information about youth Inhalant abuse. you can go to <https://nida.nih.gov/>, <https://www.samhsa.gov/find-help/national-helpline> or <https://scipnebraska.com/>.

Sites used in this article:

https://www.samhsa.gov/data/sites/default/files/report_3095/ShortReport-3095.html

<https://www.teensavers.com/post/the-dangers-of-huffing-what-every-parent-should-know-about-inhalants>

<https://nida.nih.gov/research-topics/inhalants>