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Increasing Anxiety Awareness in High School Students

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A Capstone Project for the Bachelor of Science in Human Development and Family Science

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Introduction

Many high school students may experience excessive anxiety. According to the National Institute of Health, nearly 1 in 3 of all adolescents ages 13 to 18 will experience an anxiety disorder. Persistent anxiety can lead to future health problems such as heart disease, respiratory disorders, and substance use disorders. If adolescents learn how to identify symptoms of anxiety and utilize effective coping mechanisms, they are likely to have positive academic outcomes, success in the workplace, and better quality of life. To address this, I have developed a one-day interactive lesson for junior and senior students at San Luis Obispo High School in San Luis Obispo, California.

Needs Statement

High school students are at risk for experiencing excessive anxiety. According to recent studies, adolescents are experiencing high levels of anxiety, depression, and other mental health problems that are correlated with the COVID-19 pandemic (Sobalvarro et al., 2023). Unaddressed anxiety can lead to a host of other problems. Untreated anxiety can lead to secondary disorders such as depression, suicidal thoughts or actions, and substance use disorders. Anxiety can also lead to issues with functioning in daily life like social and relationship problems, poor academic or workplace performance, and negative health outcomes (Miller et al., 2011). While discussions around mental health have become more prevalent in recent years, stigma around mental health can still discourage people from seeking help. One significant barrier preventing adolescents' from accessing help is their parents (Villatoro et al., 2022). The COVID-19 pandemic has had an impact on the rise of mental health problems in adolescents due to a decrease in social support, changes in family dynamics, and economic factors (Shoshani &

Kor, 2022). Lastly, the insufficient number of counselors in schools, as well as their ambiguous job descriptions, has limited students' access to mental health help in schools (Blake, 2020).

Mental health stigma can impact adolescents' likelihood of seeking professional help. Labeling, or recognizing a mental health problem in oneself or others, can create perceived barriers between people. This can lead to a 'me' versus 'them' mentality (Villatoro et al., 2020). High school students can be very aware of how others perceive them, or how they think others perceive them. This can create a desire to present a socially acceptable image to their peers. If mental health issues are not deemed socially acceptable, adolescents' may refrain from acknowledging their struggles with mental health. Stigma does not just come from peers but adults as well. Parents and other significant adults may pass on their negative views of discussing and seeking help for mental health problems. Parents may additionally have the power to prevent adolescents' from seeking help by denying access to professionals. However, research supports that greater mental health literacy may increase the chances of help-seeking behaviors.

Adolescents' with high mental health literacy tend to have positive attitudes about treatment, are able to distinguish types of mental health help, and are more receptive to seeking and receiving help (Villatoro et al., 2020). Stigma surrounding the topic of mental health can have negative consequences on adolescents' choice to access professional help but, education about mental health can increase the chances of adolescents seeking help.

The COVID-19 pandemic had a negative impact on the mental health of adolescents. Typical development appears to have been negatively influenced by the pandemic. The expected trajectory of social and emotional maturity was disrupted while adolescents' were forced into social isolation. There were significant increases in depression, anxiety, and suicidal ideation during the pandemic (Sobalvarro et al., 2023). The COVID-19 pandemic has been associated

with a multitude of stressors that directly impact adolescents. The pandemic led to an economic recession that affected the lives of many. Adolescents may have experienced family members losing their jobs and the financial strain that accompanies it. Students were forced to homeschool which decreased access to educational support and created social isolation. Having families spend an increased amount of time together while at home may have created familial tension. Combining several stressors for a prolonged period has led to an increase in the mental health problems of adolescents and a decrease in their motivation (Sobalvarro et al., 2023; Shoshani & Kor, 2022).

There are not enough counselors in schools to adequately support students' needs. School counselors have a greater number of students than they can realistically provide support to. For example, San Luis Obispo High School has four counselors and 1,636 students. Therefore, each counselor has over 400 students to attend to. Students report feeling like they are “just another face in the crowd” when it comes to their school counselor. Others report a lack of trust in their counselors ability to meet their needs. Counselors are often expected to provide broad help to their students in a “one size fits all” approach. Most high school counselors are seen more as academic counselors than a resource for mental health support. Counselors are expected to make class schedules, assist with college applications, provide academic support, and give mental health support (Blake, 2020). Because high school counselors are expected to perform multiple jobs and cover a large population of students, they are unable to provide the mental health support that the students need.

High school students are experiencing a significant increase in anxiety and other mental health problems that have been impacted by the COVID-19 pandemic and barriers in their access to professional help. Given the concern with increasing rates of mental health, stigma negatively

affecting help-seeking behaviors, and school counselors' diminished ability to provide support, I have developed a one-day lesson on increasing awareness of anxiety and coping techniques for junior and senior students at San Luis Obispo High School in San Luis Obispo, California.

Theory

The theory being used for this t is Erikson's eight stages of psychosocial development, focusing on the adolescent stage as it would apply to the participants. Erikson's theory suggests that there are eight stages of conflict that people go through during their life. Each stage has a conflict of psychosocial development that Erikson believed that people have to develop internally in relation to society's demands. He asserted that people went through these stages at a specific time in their lives and in a particular order. The theory believes that how a stage is or is not resolved affects overall development and the likelihood that the next stage will be resolved. Each stage is associated with a virtue; hope, will, purpose, competence, fidelity, love, care, and wisdom. The adolescent stage of this theory takes place roughly between the ages of twelve and nineteen and is called identity versus role confusion. During this period, adolescents are deciding what their likes and dislikes are, making potential educational and career goals, and developing their political beliefs. The virtue associated with this stage is fidelity and places a focus on the importance of social connections on an individual's developing sense of self.

The fifth stage of the theory will apply because the participants are high school students that fall into the developmental period and age range of Erikson's identity versus role confusion stage. As part of forming their identities, they may struggle and start to have mental health problems. The content of my project may be beneficial for them. In addition, to support adolescents' sense of fidelity and desire to make decisions for themselves the second part of the

presentation will be discussion based. This will allow the students to participate in guiding the conversation and explore content they consider relevant to their own lives.

Consideration of Diversity

The presentation will be given to a single class of American Sign Language students at San Luis Obispo High School in San Luis Obispo, California. Because this is an elective course and not a required general education class, the diversity of the participants may not be representative of the school's entire student body. The student population racial demographics breakdown is as follows; 58.1% White, 30.3% Hispanic, 5.8% Asian, 4.5% two or more races, 0.7% African American, 0.3% Pacific Islander, 0.2% Native American, and 0.2% not specified. The presentation will be given verbally in English which means it may not be suitable for certain demographics such as the Deaf and hard of hearing or non-English speakers who may be in the class.

The lesson will be designed for high school students and would not be appropriate for much younger or much older people. Older participants would be able to understand the lessons content but would possibly benefit from a presentation with more in-depth information. A younger audience would need a much more simplified delivery of the content, which would likely be too simple for an adolescent audience. My presentation will be about general anxiety and will not go into depth about specific anxiety disorders. Given that a limited time is available for this presentation, going too in depth about specific anxiety disorders could make the content too dense for participants just being introduced to this topic and limit opportunities for discussion.

Learning Outcomes

Upon completion of the project, participants will be able to...

1. Identify one negative outcome of anxiety
2. Identify two coping techniques for anxiety.
3. Indicate one positive outcome of using effective coping mechanisms.

Method

I created a one-day interactive lesson on anxiety and coping techniques for 27 eleventh and twelfth grade students at San Luis Obispo High School in San Luis Obispo, California. First, I introduced myself and my reason for being there. I informed the students that I would be giving a slide presentation and then transitioning into an open discussion format and encouraged them to consider topics of interest to bring up during the discussion portion. I gave a 25 minute presentation about anxiety, stress, and coping techniques. See Appendix B. The presentation began with a 1 minute video introducing the concept of anxiety (<https://www.youtube.com/watch?v=J8MKgS--u3E>). I then defined the differences between eustress and distress. Next, I explained some health consequences of prolonged stress. I defined coping techniques and explained the difference between positive and negative techniques. I then explained positive outcomes of utilizing effective coping techniques.

After the 25 minute presentation, I transitioned into a discussion with the students that lasted around a half hour. I began by asking them about their coping strategies, both positive and negative. Some examples include; talking to friends and family, crying, exercise, baking, and avoidant behaviors. The students' actively and enthusiastically participated in the discussion. The conversation also covered several related topics such as; sources of stress, reframing thoughts, and structural changes they believed could reduce anxiety. Some sources of stress discussed were school, the future, and family. Students also expressed a desire for more life skills to be taught in school, less academic pressure, more counselors in schools, and more empathy

from adults. An exit survey was handed out towards the end of the class period that was used to assess whether or not the learning outcomes were met. See Appendix A.

Results

Learning outcome 1 was that participants would identify one negative outcome of anxiety. The data used to determine whether this outcome was met came from the exit survey given to the participants. I analyzed the data by reading the students' responses and determining if their answers satisfied the learning outcome. Out of 27 students, 26 were able to provide at least one answer that fulfilled the learning objective criteria. The one student who did not meet this learning outcome only provided a one word answer that was deemed too vague to satisfy the objective. The participants were able to achieve a 96.29% success rate. Therefore, I believe that this learning outcome was met.

Learning outcome 2 was that participants would identify two coping techniques discussed during the presentation. The data was analyzed through participants' responses on the exit survey. 26 participants out of 27 were able to provide satisfactory answers. The student who did not meet this outcome was able to provide one satisfactory answer but the second response was deemed too vague to meet the criteria. Overall, the participants had a 96.29% success rate. Therefore, I believe that this learning outcome was met.

Learning outcome 3 was that participants would indicate one positive outcome of utilizing positive coping techniques. Data was collected through an exit survey and participants' responses were used to determine if the learning outcome was met. Of the 27 participants, 25 were able to provide an answer that satisfied the learning objective. The students unable to meet this objective provided answers that were inconsistent with the presentation and not specific

enough. The results came out to a 92.59% success rate. Therefore, I believe that the learning outcome was met.

Discussion

All three learning outcomes were met with a success rate over 90%. Because of these results, I believe that this project was successful. The students were actively involved in the group discussion and made several references to the slides. The participants appeared comfortable with talking about anxiety and sharing their own coping strategies. I felt that the students' responded well to me. The teacher I worked with reinforced this thought by telling me that the students' liked me. Several students stayed back during the passing period to talk with me. When I asked for any feedback from the students regarding the presentation many students simply gave me a thumbs up and one said she appreciated my confidence. Another student appreciated the presentation topic and having an adult openly acknowledge that adolescents experience stress. Feeling heard and validated appeared to be an important factor for the students involved.

I believe that the results of this project were consistent with the literature. The students expressed concern over access to their counselors and feeling that the counselors did not have enough time for their students. The participants shared a desire for more counselors or even a separation between academic and mental health counselors within the school. I witnessed the effects the COVID-19 pandemic had on the students, many participants expressed a lack of motivation and experienced high levels of stress and anxiety. Based on my participants alone, peer stigma was less of a problem. The students openly discussed their struggles with mental health. However, adult stigma seemed to be of greater concern for the students. Several students shared stories of parents, teachers, and other notable adults telling them that high school students

do not have any reason to be stressed. Some expressed the feeling that adults have gaslighted them into questioning their own experiences with anxiety. Many of the participants expressed gratitude in my willingness to listen to their experiences and validate their feelings of stress and anxiety.

One way to increase diversity in the participants would be to present to a larger group of students. More participants would increase the likelihood of greater diversity. Presenting in a school that has a different demographic makeup would also address diversity. Translating the presentation into different languages would increase inclusivity for non-English speaking students. Due to the overall success of the learning objectives and positive feedback from participants', I believe that my presentation was inclusive of all students involved.

If I had to do it over again, I would be more prepared with alternate activities. The class I worked with was talkative and enjoyed the discussion portion of the presentation. However, I am aware that not everyone or every group would be interested in participating in a large group this way. Due to communication with the teacher, I was aware that I would be able to work with a talkative group. Being prepared with alternative activities, such as journaling or games they could access on phones, would be beneficial in order to better adapt to the audience. Another thing I would do differently is give a pre-presentation survey in order to be aware of topics the participants are interested in beforehand. This would also give the participants more time to think of questions. Nonetheless, I feel that the students enjoyed the presentation and have a better understanding of anxiety and coping techniques.

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Appendix A

Exit Survey Used to Determine if the Learning Outcomes Were Met

1. Please identify one negative outcome of anxiety:
2. Please identify two coping techniques discussed today:
3. Please indicate one positive outcome of using effective coping techniques:

Appendix

Slide Presentation on Anxiety and Coping Techniques

Anxiety and Coping Techniques

Kiley Arellano





Eustress

(Short-term stress)

A positive form of stress having a beneficial effect on health, motivation, performance, and emotional well-being.



Distress

(Long-term stress)

A negative form of stress that can have harmful effects on health, motivation, performance, and emotional well-being.



What are Coping Techniques?

Someone's behaviors, thoughts, and emotions in response to stress.





Appendix C

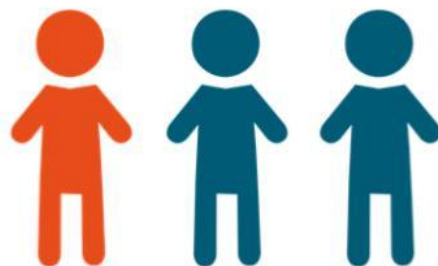
Presentation from Capstone Festival

Anxiety and Coping Techniques

— Kiley Arellano —

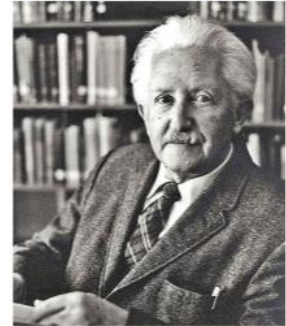
Needs Statement

According to the National Institute of Health, 1 in 3 of all adolescents ages 13 to 18 will experience an anxiety disorder.



Erik Erikson's Stages of Development Theory:

- Stage 5: Identity versus Role Confusion
- Decision making
- Social Relationships



Learning Outcomes

Upon completion of this project, participants will be able to...

1. Identify one negative outcome of anxiety.
 2. Identify two coping techniques discussed.
 3. Indicate one positive outcome of effective coping techniques.
-

Method

- San Luis Obispo High School in San Luis Obispo, CA
- 27 Juniors and Seniors
- 1 Day Presentation
- 25 Minute Lecture
- Open Discussion



Results

LO 1: Identify One Negative Outcome of Anxiety



- 26 out of 27 students successfully answered.

4. Please identify one negative outcome of anxiety:

too many —
-heart problems
-hair loss
-weight gain/loss

LO 2: Identify Two Coping Techniques



- 26 out of 27 students successfully answered.

5. Please identify two coping techniques discussed today:

1) Meditation ✓
2) exercise ✓

LO 3: Indicate One Positive Outcome

- 25 out of 27 students successfully answered.



3. Please indicate one positive outcome of using effective coping techniques:

- Better control of emotions

Discussion

What Worked?

- Group Discussion
- Listening



What Would I Do Different?

- Pre-Survey
- Alternate Activity Options



Thank You

Questions?
