Children’s Mental Health Month
May 2021

Join us this year by wearing a green ribbon!

Wearing a green ribbon during these observances helps bring awareness to the needs of children with emotional, behavioral, mental and/or substance use disorders and their families across South Carolina.

Why Green?
To Combat Stigma!

In the 1800’s, the color green was used to brand people who were labeled “insane”. The children’s mental health community decided to continue using the color green, but with a completely different focus.

Green signifies new life, new growth, and new beginnings.

Therefore, we wear green ribbons to raise public awareness to better the lives of children with serious emotional disorders, and to show our support of these children and their families.

Please contact the Federation of Families of South Carolina for help.

803-772-5210/toll-free: 866-779-0402
info@fedfamsc.org
www.fedfamsc.org
www.facebook.com/FederationSC
www.facebook.com/YouthMoveSC
# Table of Contents

I. Children’s Mental Health Facts  
II. Substance Use Facts  
III. Seeking Help  
IV. Anti-Stigma  
V. Organizing an Effective Awareness Campaign  
VI. Suggested Activities  
VII. Important Resource Links  
VIII. Suggested Books for Children’s Mental Health  
IX. Schools & Children’s Mental Health  
X. SMS Text Campaign  
XI. The Value of Early Identification & Intervention
I. Children’s Mental Health Facts

Did you know?

* It has been estimated that almost 21% of U.S. children, ages 9-17, have a diagnosable mental health or addictive disorder associated with at least minimum impairment.

* Despite the prevalence of mental health disorders in the nation’s children, 79% of children, aged 6-17, with mental health disorders, do not receive mental health care. Uninsured children have a higher rate of unmet needs than children with public or private insurance.

* Suicide is the second leading cause of death of youth aged 10 to 24 in the nation.

* Anxiety disorders are the most common mental disorders among children.

* With early detection and appropriate treatment, chances are excellent that most children with mental health needs can recover and lead healthy lives.

* The treatment success rate for children’s mental health disorders is 80%. Children are best served by early intervention, which can prevent them from being placed in more costly forms of treatment later on.

* 74% of students who drop out of school and who are categorized as seriously emotionally disturbed are arrested within 5 years of dropping out.

* Untreated mental illness may also increase a child’s risk of coming into contact with the juvenile justice system- 66% of boys and almost 75% of girls in juvenile detention have at least one mental health disorder, according to one study.

Sources: Bazelon Center for Mental Health Law, National Institute of Mental Health and the Substance Abuse and Mental Health Services Administration

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II. Substance Use and Mental Health

Substance use and mental illnesses can often be co-occurring disorders. Similar to the obstacles of discussing mental health, many youths and parents do not seek the help and support that is needed due to a fear of being stigmatized as well as misconceptions about substance use. Therefore, it is imperative to their health that adults create awareness around drug and alcohol use.

Engaging children and youth in discussions will normalize the curiosity of substance use and debunk the myths surrounding various drugs and their effects. Below are some tips and ideas to consider when preparing for a discussion.

It should come as no surprise why children and youth are curious about drugs and alcohol. They are bombarded with messages about drugs in songs and movies.

*A 2008 study from the National Institute on Drug Abuse (NIDA) reports the following statistics in popular music:

1 in 3
songs said something about drug, alcohol, or tobacco use.

3 in 4
rap songs said something about drug, alcohol, or tobacco use.

*Of the top 100 movies over a 9-year period, more than:

7 in 10
movies showed characters smoking.

1 in 3
movies showed people getting drunk.

Please email info@fedfamsc.org for more resources to help facilitate discussions on substance use you can share with your children and youth.
III. Seeking Help

When to Seek Help

Parents and family members are usually the first to notice if a child has problems with emotions or behavior. Your observations, along with those of teachers and other caregivers, may lead you to seek help for your child. If you suspect a problem or have questions, consult your pediatrician or contact a mental health professional.

The following signs may indicate the need for professional assistance or evaluation:

- decline in school performance
- poor grades despite strong efforts
- regular worry or anxiety
- repeated refusal to go to school or take part in normal children's activities
- rapidly changing mood swings
- sleeping too much or too little
- feelings of worthlessness
- recurring thoughts of suicide or death
- persistent nightmares
- persistent disobedience or aggression
- frequent temper tantrums
- depression, sadness or irritability
- hyperactivity or fidgeting

Fear & Anxiety

It’s okay for children to feel afraid sometimes. Everyone is afraid of something at some point in their life. Fear and anxiety grow out of experiences that we do not understand. If your children have fears that will not go away and affect his or her behavior, the first step is to find out what is frightening them. Be loving, patient and reassuring, not critical. Remember that the fear may be very real to the child.

Signs of Fear

- Nervous mannerisms, shyness, withdrawal and aggressive behavior may be signs of childhood fears.
- A change in normal eating and sleeping patterns may also signal an unhealthy fear. Children who “play sick” or feel anxious regularly may have some problems that need attention.
- Fear of school can occur following a stressful event such as moving to a new neighborhood, changing schools, or after a bad incident at school.
- Children may not want to go to school after a period of being at home because of an illness.

Where to Seek Help

Information and referrals regarding the types of services that are available for children may be obtained from:

- Your local County Mental Health Center
- Your child’s pediatrician or school counselor
IV. Anti-Stigma: Do You Know The Facts?

Stigma is not just the use of the wrong word or action. Stigma is about disrespect. It is the use of negative labels to identify a child living with mental health needs. Stigma is a barrier and discourages families from getting the help they need due to the fear of being discriminated against.

Did you know that stigma:
• Results in inadequate insurance coverage for mental health services?
• Results in fear, mistrust, and violence against families and children living with mental health needs?
• Results in families and friends turning their backs on people with mental health needs?
• Keeps people from getting needed mental health services and that people would rather tell employers they have committed a petty crime and were in jail, than admit to being in a psychiatric hospital?

Anti-Stigma Dos and Don’ts:
Dos:
• Do use respectful language that puts the child first, such as:
  - Child with emotional, behavioral, or social needs
  - Child who has schizophrenia
  - Child with special mental health needs
  - Child who has bipolar disorder

• Do emphasize abilities and strengths, not limitations.
• Do tell someone if they express a stigmatizing attitude.

Don’ts:
• Don’t portray successful children with disabilities as superhuman.
• Don’t use generic labels such as retarded, or the mentally ill.
• Don’t use terms like crazy, lunatic, mani-depressive, slow functioning, or normal.

Important To Remember:
• Every child’s mental health is important. Many children have severe health problems.
• These problems are real, painful, and can be severe.
• Mental health problems can be recognized and successfully treated.
• By working together, caring families and communities can help.

Information on this sheet adopted from a publication of National Mental Health Services Knowledge Exchange Network www.mentalhealth.org
V. Ten Tips for Organizing an Effective Awareness Campaign

1. **Gather** a group of great people to make up your team. Include people who have shown dedication to the issue of children's mental health, as well as people with lots of contacts and energy.

2. **Schedule** regular meetings and set goals early.

3. **Determine** what your message will be and to whom you will be sending the message. We suggest everyone on your mailing list, local schools, county departments, community centers, hospitals, and pediatricians.

4. **Brainstorm** your ideas—ask the “Magic Wand Questions” (What would you see happening if you had a magic wand and no obstacles?) No ideas are bad ideas.

5. **Prioritize** as a group. Set goals and then discuss what steps (objectives) you need to take to accomplish those goals.

6. **Become task-centered.** Break down the objectives and decide if an individual can manage it or if a team approach is needed. Then, assign the tasks.

7. **Create a timeline** and if you have email capabilities, set up a distribution list to keep everyone updated on the progress.

8. **Spread the word.** Send a press release or call members of the media (TV and newspaper reporters and editors).

9. **Support** each other by keeping in touch with participants. Encourage them to stay on target with the timeline. If someone is having trouble with a task, offer help.

10. **Participate in your Children's Mental Health Week activity,** and celebrate it at a follow up meeting. Discuss how things went and what to improve on next year. Do not forget to set the date for your next meeting to begin the process for next year. Each year it gets easier!

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VI. Suggested Activities

Structured Educational Activities:

• Children’s & Teen’s Perspectives- discussions through drawings and stories
• Workshops for parents, caregivers, and providers
• Regional or local educational conferences
• Special topic forums or roundtable discussions in the community
• Mental Health Fairs, with depression and anxiety screenings
• Special topic high school assembly with speaker
• Video presentations with discussion
• School announcements by students

Informational Activities:

• Green ribbon awareness- word of mouth is key!
• Childhood depression and anxiety screenings held at community centers, clinics, hospitals, malls, etc.
• Information fairs
• Seedling Project- present each Legislative representative with a packet of information on children’s mental health issues and a tree seedling as a reminder that we rely on them to help our children grow up healthy.
• Organization or support program open house.
• Public Service Announcements (PSAs) or Press Release (sample attached)
• Modify the Official Proclamation to use in your community (sample attached)
• Write up an Op-Ed or letter to the Editor for your local newspaper
• Brown bag lunch series on various learning disabilities, mental health diagnoses, community services, medication, education, etc.

Artistic Expression/Recreational Activities with a CMH Theme:

• Essay and poster contests for children and youth
• Puppet shows emphasizing sensitivity to disabilities
• Teen or group art murals
• Family concert
• “Express Yourself Tees” t-shirts created by children/teens
• Movie night... pick a movie that will bring sensitivity and understanding to a disability and follow with discussion
• Open mic poetry session for teens and/or parents
• Teen improvisational or theatre group show
• Book reading contest- ask local/school library to display their collection of books on disabilities
• “Be a Mentor Day” or “Be a Buddy Day”...encourage the internal assets of caring and helping individuals with disabilities through this activity.
VII. Important Resource Links

**Federation of Families of South Carolina** is a non-profit, family-run organization that strives to establish a unified voice for children and youth with emotional, behavioral, and social challenges. Our mission is to ensure that every family has access to needed information, support, and services.

For Information and Referral, please call Federation of Families of South Carolina at: Toll free (866) 779-0402 or, in Columbia (803) 772-5210 or visit www.fedfamsc.org for important links and resources.

**A Family Guide to Keeping Youth Mentally Healthy and Drug Free** - a public education website developed by the Substance Abuse and Mental Health Services Administration (SAMHSA) to communicate to parents and other caring adults about how they can help promote their child’s mental health and reduce his or her risk for becoming involved with alcohol, tobacco, and illegal drugs. [https://www.family.samhsa.gov](https://www.family.samhsa.gov).

**Online Depression Screening Website:** The mission of this website is to educate people about clinical depression, offer a confidential way for people to get screened for symptoms of the illness, and guide people toward appropriate professional help if necessary. It is also a great site for those concerned over anonymity of themselves or their child. [www.depression-screening.org](http://www.depression-screening.org).

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VIII. Suggested Books for Children’s Mental Health Issues

ADD/ADHD:
Galvin, Matthew- Otto Learns About His Medicine
Gehret, Jeanne- Eagle Eyes
Moss, Deborah- Shelley, The Hyperactive Turtle
Roberts, B.A.- That’s What Kids Are For: Phoebe Flower’s Adventures

Adoption:
Kasza, Keiko- A Mother for Choco
Keller, Molly- Horace
Shemin, Craig- Families are Forever

Anger:
Bang, Molly- When Sophie Gets Angry... Really, Really Angry
Hebert, Bryna- Anger Mountain

Anxiety-Divorce:
Abercrombie, Barbara- Charlie Anderson
Hoffman, Mary- Boundless Grace
Lansky, Vicki- It’s Not Your Fault, Koko Bear

Anxiety-New Environments:
Henkes, Kevin- Wemberly Worried

Anxiety-Separation:
Honeycutt, Natalie- Whistle Home
Suggested Books for Children’s Mental Health Issues
(Continued)

Bi-Polar:
Anglada, Tracy- Brandon and the BiPolar Bear
Lewandowski, Lisa- Darcy Daisy and the Firefly Festival

Bullying:
Bottner, Barbara- Bootsie Barker Bites
Dewey, Ariana- Last Laugh
Henkes, Kevin- Chrysanthemum
Meddaugh, Susan- Martha Walks the Dog
Nickle, John- Ant Bully

Isolation:
Ada, Alma Flor- The Malachite Palace
Jeffers, Oliver- Lost and Found
Norac, Carl- Tell Me a Story
Yashima, Taro- Crow Boy

Obsessive Compulsive:
Hix, Kim- No One is Perfect and Your are a Great Kid
Moritz, E. Katia- Blink, Blink, Clop, Clop: Why Do We Do Things We Can Not Stop

Trauma:
Holmes, Margaret- A Terrible Thing Happened
IX. Schools & Children's Mental Health

The mission of public schools is to educate all students. Mental health is essential to learning and to the social and emotional development of children. (President Bush's New Freedom Commission on Mental Health Report, 2003)

The critical role of schools in the mental health and well-being of children has been recognized at the highest levels of government:

*What we need is a network that looks out for our children if children are recognized as having mental health problems... Schools, churches, scouting can all play a role in ensuring that children get the help they need.*

David Satcher, M.D., Former U.S. Surgeon General, ACMHA Conference 2007

*Schools are where children spend most of their day... Schools are in a key position to identify mental health problems early and to provide a link to appropriate services.*


Schools are in a key position to identify mental health concerns early and to openly communicate those concerns to families. Strong mental health programs and open communication with families promise to reduce the pain and isolation all too often experienced by youth with undiagnosed and untreated mental and emotional disorders.

Research shows that we do a poor job of identifying children and adolescents with mental health treatment needs. **Here are the facts:**

1. 10% of children and adolescents in the United States suffer from serious emotional and mental disorders that cause significant functional impairment in their day-to-day lives at home, in school and with peers (Mental Health: A Report of the Surgeon General, 1999).

2. In any given year, only 20% of children and adolescents with mental disorders are identified and receive mental health services (Mental Health: A Report of the Surgeon General, 1999).

3. Treatment of many serious emotional and mental disorders is effective. Psychotherapy, behavioral interventions, medication, and other interventions have been demonstrated to be effective for many childhood disorders.

4. Untreated, these disorders can have devastating consequences, including the loss of critical developmental years, extremely poor academic performance, increased school drop-out and failure, involvement with law enforcement and the justice system, and the ultimate failure-suicide.

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www.facebook.com/YouthMoveSC
We LOVE our family and youth members and partners all across the state and we want to be close to your hearts and fingertips. Subscribe to our new text messaging service to stay up to date with everything concerning children's behavioral health.

With the help of this community awareness campaign, you will receive links to helpful resources; meeting and training reminders; and all the details on our upcoming annual Children's Mental Health Awareness Week.

Show us some LOVE and text Heart to 888.995.3372 to sign up today!

Stay tuned for more exciting updates and new keywords to help you stay connected!
XI. The Value of Early Identification and Intervention

1. Mental health is central to the health and well-being of children. Those living with emotional, and mental disorders must be identified early and linked with effective services and supports to avoid losing critical developmental years that will simply never be recaptured.

2. Parents play a critical role in the identification and treatment of childhood emotional and mental disorders. They must drive decisions related to the identification and treatment of mental disorders to help achieve the best outcomes of their children.

3. Schools are in key position to identify mental health concerns early and to openly communicate concerns with parents. Schools that have an early identification process in place and open communication with families can help to reduce the pain and suffering all too often experienced by youth with undiagnosed and untreated mental and emotional disorders.

4. Treatment decisions must always be made by the parents of the child, in close consultation with a treating physician, and not with any pressure from the school system. Federal law prohibits schools from requiring a child to be placed on medication as a condition for attending school. It simply should never happen in any school in America.

Nothing should infringe upon one of the basic tenets in education- the vital need for open communication between parents and schools about the health and well-being of children.

Bills that prohibit school personnel from openly discussing mental health related concerns with families perpetuate stigma by singling out and targeting mental illnesses in children. Surely, legislation would not be proposed that would prohibit schools from openly talking with families about issues related to other health conditions, like asthma or severe allergies.

As national organizations that work every day with families impacted by mental disorders, we stand with national leaders calling for schools to play a more significant role in helping students with mental health treatment needs. Too many of these students in our nation are falling through the cracks, all too often with tragic results.

For more information about children’s mental health and Children’s Mental Health Awareness Week, please visit www.fedfamsc.org and www.childrensmentalhealthawarenessweek.org.
Thank you for helping the Federation of Families of South Carolina to “provide leadership in the area of children’s mental health through education, awareness, support, and advocacy for families of children and youth with emotional, behavioral, mental and/or substance use disorders”.

We value your efforts and truly appreciate all that you do to help us carry out our mission. If you need any assistance on planning your own community event for Children’s Mental Health Awareness Week, please let us know.

Thank you!

Federation of Families of South Carolina
A Voice for Children’s Mental Health in SC