

Students Who Report Chronic Sadness, 2006–08¹

This factsheet summarizes the characteristics of 7th and 9th graders who reported incapacitating sadness/hopelessness on the 2006–2008 *California Healthy Kids Survey* by responding “yes” to the item, “During the past 12 months, did you ever feel so sad or hopeless almost everyday for two weeks or more that you stopped doing some usual activities?”² Three in ten secondary students experienced this kind of chronic sadness (increasing from 28% in 7th grade to 33% in 11th). Percentages are consistently higher among females than males, with the gender difference almost doubling between 7th and 9th grades.

This survey question is an indicator of student mental health needs, and the possibility of severe depression. Depression affects approximately 4 out of 100 teenagers each year, and 20% of youth will experience a major depressive episode before graduating from high school. If not detected and treated early, the consequences of depression are serious, including increased risk for suicide — now the third leading cause of death among youth 15–24 years of age. This factsheet also shows that, compared to other 7th and 9th graders, these chronically sad youth are already at elevated risk of a wide range of educational, health, social, and emotional problems, including lower school attendance, performance, and connectedness, and greater likelihood of substance use and having been victimized at school. They also report lower levels of the developmental supports that have been shown to mitigate these problems in their schools and communities, a deficit that may contribute to their problems.

Academic Outcomes

Grades. In the 7th grade, 44% of sad/hopeless students

described their grades as B’s and C’s or below, compared to 34% of students who were not sad/hopeless. These students were also over 1.5 times more likely to report grades of C’s and D’s or below. In 9th grade, 51% of sad/hopeless students reported grades of B’s and C’s or below, compared to 39% of others. (The Factsheet table provides the percentages for mostly B’s or above.)

Truancy. Among 7th graders, 31% of sad/hopeless students missed school or had cut classes one or more times in the past 12 months, almost twice the percentage of other students. They were also three times more likely to have been truant at least once a month.

School Connectedness. About one sixth of the sad/hopeless students in both grades had *low* levels of school connectedness, almost twice the percentage of other students. Only 36% of sad/hopeless 7th graders and 31% of 9th graders had *high* levels of school connectedness. Rates among students who did not report feeling sad/hopeless were about 1.5 times higher.

Victimization, Harassment, and Safety

Sad/hopeless students reported much higher rates of verbal and physical victimization at school, and lower rates of perceived safety than their peers. For example, they were over twice as likely in 7th grade, and almost three times as likely in 9th to report they had been afraid of being beaten up at school two or more times during the past 12 months. About twice as many students in both grades who reported being sad/hopeless experienced harassment for bias-related reasons (i.e., race/ethnicity, gender, religion, sexual orientation, or disability).³ Reflecting this victimization, sad/hopeless students were over twice as likely to feel *unsafe* or *very unsafe* at school as their peers.

Substance Use

Substance use may both reflect and contribute to mental health issues. Some students may be self-medicating with drugs. In particular, the dual problem of substance use and depression may create challenges to learning. Percentages for alcohol and marijuana use in the past 30 days among the sad/hopeless were generally around twice those for other students. Among 7th graders, 22% of sad/hopeless students had consumed an alcoholic drink, and 9% had used marijuana, compared to 11% and 4%, respectively, of their peers who did not report feeling sad/hopeless.

This early onset of use among 7th graders is especially disconcerting, as research shows that the earlier use is initiated the more likely it is that a student will become heavily involved in substance use, as well as experience a wide variety of school, social, and personal problems. Reflecting this, sad/hopeless students were around twice as likely to report such heavy-use behaviors as being *drunk or high on drugs on school property* (three times the number in 7th grade); being *very drunk or sick after drinking alcohol, engaging in binge drinking, and being high* from using drugs at least one time. In 9th grade, they were also twice as likely to report that they: 1) usually liked *to get really drunk*; 2) *usually got very high on drugs*; and 3) experienced multiple problems related to their substance use. They were three times more likely to report that alcohol, marijuana, or other drugs caused them *problems with emotions, nerves, or mental health* (13% vs. 4% in 9th grade).⁴

School Developmental Supports

Given these results, youth who experience chronic sadness in their lives could benefit from increasing the level of three developmental supports (also called protective factors) that resilience research has shown contribute to positive school, social, and health outcomes — caring relationships with an adult, high expectations from adults, and opportunities for meaningful participation. The findings that sad/hopeless students were much less likely than their peers to have experienced high levels of these developmental supports in their schools may help explain why they had lower levels of school connected-

ness. In both grades, there were gaps between sad/hopeless students and their peers of 6–7 points for caring relationships and 8–9 points for high expectations. Reports on the community environment revealed gaps of 9–10 points for each indicator.

The Need for Action

Three in ten California 7th and 9th graders have experienced episodes of chronic sadness or hopelessness, an emotional state, which is indicative of having unmet mental health needs. These youth are notably more likely than their peers to be experiencing a wide variety of inter-related problems that will interfere with their successful development in school and life. At school, they are doing less well academically, are more likely to be truant and victimized, and less likely to feel connected and safe. These findings are consistent with prior research showing that adolescents experiencing symptoms of depression also experience poor academic outcomes.⁵ They support the importance of addressing the mental health needs of students as part of efforts to improve academic achievement and reduce dropout rates. They also show that these students are less likely to have in-school experiences of the protective developmental supports that are associated with resilience and positive academic, social, and health outcomes, even within populations at high risk.

Comprehensive school programs are needed that address risk factors such as bullying, intervene to reduce substance use, and provide supports for positive development and well-being (including more caring adult relationships, positive school climates, and other protective factors). Research also indicates that these kinds of programs can help improve school connectedness, which is itself associated with better mental and physical health. These efforts need to begin early to break the long-term, self-reinforcing, adverse affects of the early onset of substance use and mental health issues. Schools with a high prevalence of students experiencing this health and learning risk factor should examine the sufficiency of mental health services for addressing the multiple needs of these students and how they can better support them to succeed in school and life.

Summary of Key Characteristics of Secondary Students Experiencing Incapacitating Sadness or Hopelessness* Compared to Other Students.

	7 th Grade		9 th Grade	
	Sad/Hopeless (%)	Not (%)	Sad/Hopeless (%)	Not (%)
Grades mostly B's or above ^a	56	66	49	61
Truant one or more times ^a	31	17	49	31
School connectedness—Low	17	9	18	10
Harassed—bias—related ^{a, b}	47	25	42	21
Feared beating at school, 2 or more times ^a	20	9	14	5
Feel unsafe/very unsafe at school	16	7	13	6
Alcohol use, past 30 days	22	11	36	22
• Three or more days	8	4	17	9
Marijuana use, past 30 days	9	4	16	9
• Three or more days	5	2	9	5
School Developmental Supports—High				
• Total supports	28	37	23	31
• Caring adult relationships	30	37	26	32
• High expectations	48	57	40	48
• Meaningful participation	12	16	11	14

Source: Full results on all questions are available in the 2006–08 statewide report, School mental health: Characteristics of secondary students who report chronic sadness, which can be downloaded from the CHKS website (<https://chks.wested.org/about/smhp>).

* For at least 2 weeks during the previous 12 months, felt so sad or hopeless that they stopped doing usual activities.

^a In the 12 months before the survey.

^b Because of their race/ethnicity, religion, gender, sexual orientation, disability.

About the Data: The data used in this analysis were provided by approximately 254,000 students in 7th grade and 240,000 in 9th grade from 3,000 secondary schools in 800 school districts. Data were weighted to be representative of all students in each grade, statewide.

Endnotes

1 Suggested citation: Greg Austin, Jonathan Nakamoto, & Jerry Bailey. (2010). *Students who report chronic sadness, 2006–08*. CHKS Factsheet #11. Los Alamitos: WestEd. This factsheet can be downloaded from the CHKS website (http://chks.wested.org/using_results/publications).

2 Complete results of the survey for the total population, and the sad/hopeless subgroup, can be downloaded from <http://chks.wested.org>.

3 Group differences were slightly smaller for any harassment, because students who did not experience incapacitating sadness had higher rates of harassment for other reasons. Nevertheless, youth who experienced any harassment at school were about twice as likely to report incapacitating sadness/hopelessness as are youth who are not harassed (c.f. CHKS Factsheet No. 10).

4 See also: Austin, G., Skager, R., Bailey, J., & Bates, S. (2007). *Heavy alcohol and drug use among high school students, 2003–04. Results of the 10th Biennial California Student Survey*. Sacramento, CA: Office of the Attorney General. Available at <http://www.wested.org/cs/we/view/pj/572>. Similar to these findings, they report that the percentage of 9th and 11th graders reporting incapacitating sadness/hopelessness increases as the level of drug use and drinking increases. It was experienced by over half of high-risk drug users and binge drinkers in 9th grade, about twice the rate of nonusers.

5 Juvonen, J., Nishina, A., & Graham, S. (2000). Peer harassment, psychological adjustment, and school functioning in early adolescence. *Journal of Educational Psychology*, 92(2), 349–359.

This document was funded by the Mental Health Services Act (MHSA) in partnership with the California Department of Education (CDE) and the California Department of Mental Health. It was developed under contract with CDE by WestEd.