

UNDERSTANDING STRESS: HELPING STUDENTS AFFECTED BY THE ECONOMIC CRISIS Information for Educators

Introduction

Stress is our perceptions and interpretations of the way our body responds to demands placed upon us by the environment. Stress responses can be both positive and negative. For example, if a student needs a 90% on a test to bring his grade up to passing, stress could motivate him to study diligently or it could lead him to a downward spiral of anxiety or a depressed mood. Likewise, children and adolescents may respond both positively and negatively to stressful situations that are occurring in their families. That is, when a student's family is experiencing financial stress, he or she may be motivated to help more around the house with family chores, watch siblings, or simply show their parent(s) how much they love them. In some cases, he or she may also decide to find a job after school or on the weekends to help support the family's needs (i.e., food, gas, basic supplies). However, for other students, stress may manifest itself in more negative ways, including a drop in grades, substance use and/or abuse, internalizing behaviors (i.e., anxiety, depression, self-blame), and/or externalizing behaviors (i.e., physical aggression, verbal aggression, bullying). Students' reactions to stress may not always be clearly positive or negative, and many students may show a mixed response. For example, while a student may help more around the house, she may also be coping with the stress by using substances or bullying peers at school. Since children and adolescents, as well as adults, respond so differently to stress, stress can be difficult to identify and can easily be misinterpreted.

Symptoms of Stress

Symptoms of stress can be summarized in four broad domains: cognitive, emotional, behavioral, and physiological. As school staff observe students who may be experiencing negative stress, they should frame their reflections and observations within the four domains. Below are some symptoms within each domain that both children and adolescents often experience when they are struggling with negative stress. Certainly, these symptoms are expressed differently depending on the developmental level of the child. Young children may express their emotional and behavioral problems with difficulty toilet training, making transitions, or separating from their primary caregiver. Older children may have trouble with friendships, tests and grades, and coping with embarrassment. Adolescents tend to show a low self-esteem, extreme relationships, risk-taking behavior (e.g., drugs, sexual activity), and involvement in too many or too few activities.

How School Staff Can Recognize Stress in Children and Adolescents:	
Cognitive	Cognitively, students may become more restless and/or off-task, and they may have difficulty making decisions. A decrease in academic performance may be seen as well. Students may also engage in negative thinking (e.g., "I'm just no good at these things").
Emotional:	Emotionally, children may experience increased fears/anxiety, changes in level of sensitivity (more or less), and increased aggression, greed, anger, or irritability.
Behavioral:	Behaviorally, children may become more aggressive or more withdrawn. Some students may regress in their behaviors (e.g., wanting to sleep with parents). Also, changes in sleeping and eating patterns may occur.
Physiological:	Physiologically, children may complain of or experience more physical symptoms (i.e., upset stomachs, headaches, exhaustion).

Children and adolescents are stressed for a variety of reasons, and new factors that are introduced into their lives daily vary their levels of stress. One key is for individuals involved in students' lives to be knowledgeable about symptoms so that they might recognize adverse reactions to stress. Some children are far more aware and open about their levels of stress and openly talk to adults about their problems and concerns; for other children, adults will need to be aware of the emotional and/or behavioral changes being exhibited. A more difficult question for school staff to answer involves determining when stress reaches a level of clinical concern.

Critical levels of stress can manifest into a variety of clinical concerns. Stress can lead to depression, anxiety, and other social–emotional disorders. When there is a question regarding clinical concerns, students should be referred to the school-based problem solving or student services team. The school psychologist or other qualified member of the team can evaluate the student and provide or recommend intervention if necessary. Parents should always be part of this problem solving process. If the team decides that an evaluation or further school-based intervention is not necessary, the student should be monitored for changes. Specific behavior and method of data collection should be selected to monitor the student's progress.

Suggestions

It is important that school districts have procedures for working with children and adolescents with varying degrees of stress. School-wide education on coping with stress is typically effective for approximately 80% to 90% of the school population. More intensive services might be needed for 5% to 10% of the school population (i.e., group therapy or behavioral consultation with a teacher) and intensive services for 1% to 5% of the population. School districts should consider structuring intervention services to support stress-related needs in the population; a lesson(s) regarding managing stress is a great addition to the health curriculum. For more information on this topic, administrators and teachers should explore school-based mental health services. The school psychologist is an excellent resource for information on signs of stress and developing a school-wide, targeted, or intensive intervention program.

Quick Tips for School Staff:

For students experiencing high levels of situational stress:

- Watch for cognitive, emotional, behavioral, and physiological signs of stress.
- Watch for changes in behavior (e.g., eating, sleeping, routine).
- Watch for students who are withdrawn (e.g., removed from activities, friends).
- Communicate with the family about observations and concerns at school.
- Build on students' strengths and resilience (e.g., connection with at least one adult, connection to school, involvement in prosocial activities).
- Provide students the opportunity to share what is happening in their lives (e.g., class discussions, art projects, essays).
- Consider preventative steps (i.e., school-based mental health services to build coping skills, problem solving skills, and relaxation skills) before children and adolescents reach a more critical level of stress.
- When students' levels of stress are more critical, ensure that they are getting necessary services within the school district through the help the school psychologist or through an outside agency.
- Tap your school psychologist to discuss concerns and strategies for helping students.

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