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SURVEY

WestEd

How are Student Reported Health Behavior, School Developmental Supports, and School Safety Related to Sadness and Suicidal Thoughts?[1]

Indicators of student mental health are influenced by health-related behavior, school climate, and school safety.[2] Given the large amount of time students spend in school, schools are ideal environments to implement practices that address poor nutritional and sleep hygiene practices and provide support to prevent and address mental health problems. It is important for districts and schools to understand how these factors are related in order to implement comprehensive supports and provide an environment that meets each student's needs.

This factsheet summarizes how students' health-related behavior, access to school developmental supports, and school safety are related to frequent sadness, incapacitating sadness, and suicidal thoughts.[3] The analysis uses California Healthy Kids Survey (CHKS) data collected from 380,000 5th, 7th, and 11th grade students in 3,300 schools during 2018-19 academic year. This was the first year that 5th graders were asked about their perceived sadness on the elementary school survey and that 7th graders were asked if they had contemplated suicide on the middle school survey.

Key Takeaways

Far too many students experience troubling levels of sadness and suicidal thoughts.

- One-fifth of 5th graders report being sad most or all of the time.
- About one-third of 7th and 11th graders report incapacitating sadness and 15% report contemplating suicide.

Harassment, bullying, and school safety are the strongest predictors of sadness and suicide risk.

- 5th grade students who do not feel safe at school or who have been targeted by emotional and/or physical violence by their classmates are 3 times more likely to be frequently sad.
- Between 49%–60% of 7th and 11th graders who have been bullied report incapacitating sadness and 30% report contemplating suicide.

Both health-related behavior (getting enough sleep and eating breakfast) and school developmental supports are strongly related to sadness and suicide risk.

- Among 5th graders, caring relationships with adults and high expectations are more strongly related to frequent sadness than sleep hygiene and morning fasting.
- Developmental supports and health-related behavior are equally predictive of incapacitating sadness and contemplating suicide among 7th and 11th graders.

There is much that educators can do to address these risk factors for poor mental health.

Scope of the Problem

Among 5th graders surveyed in 2018-19, nearly one-in-five students (18%) reported that they felt sad most of the time or all of the time (see Tables A1 and A2 for a description of the measures). Females were more likely to report that they were frequently sad than males (21% vs. 15%). Nearly 30% of 7th graders reported incapacitating, chronic sadness and 15% reported that they had contemplated suicide in the past year. Eleventh graders reported the highest levels of sadness and suicide risk, with 37% reporting incapacitating sadness and 16%

reporting that they had contemplated suicide. Females in secondary schools had a far greater risk of incapacitating sadness and suicide ideation than males. Among 7th graders, 36% of females report chronic sadness and 19% report contemplating suicide. This compares to 21% and 10%, respectively, among males. Almost half (46%) of 11th grade females reported chronic sadness and 20% reported contemplating suicide, compared to 27% and 12% of males, respectively.

Frequent Sadness, Incapacitating Sadness, and Suicide Ideation
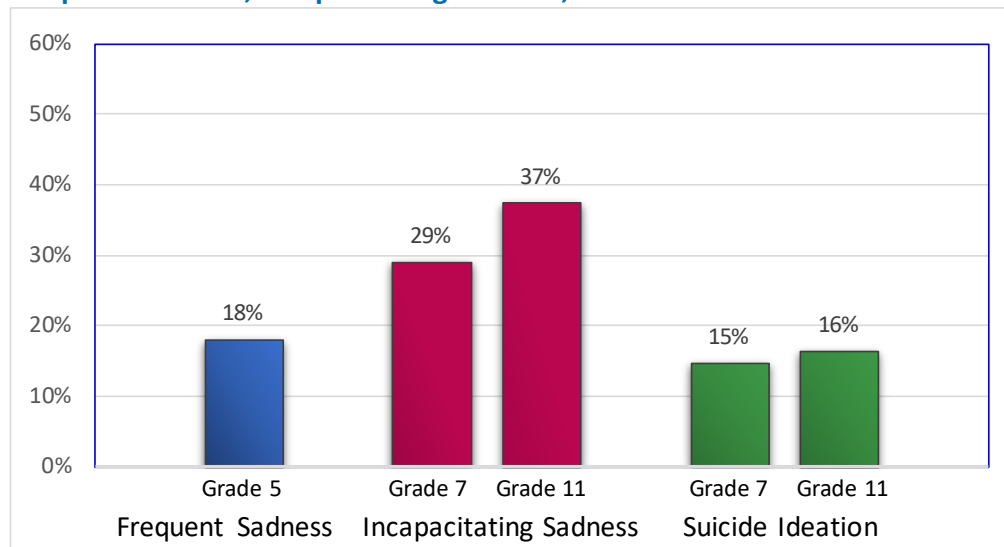
Source: California Healthy Kids Data, 2018-19.

Health-Related Behavior

Sleep. Among 5th graders, students whose usual bedtime on school nights was before 10pm were less likely to report that they were frequently sad than other students (16% vs. 25%). Secondary students who typically slept 8 hours or more on school nights were significantly less likely to report incapacitating sadness than students who slept less than 8 hours (21% vs. 41% in grade 7 and 25% vs. 41% in grade 11). And suicide ideation was twice as high among secondary students who slept less

than 8 hours on school nights (23% vs. 10% in grade 7 and 18% vs. 10% in grade 11).

Breakfast. Fifth graders who skipped breakfast on the morning that the survey was administered were more likely to report that they were frequently sad than their counterparts who ate breakfast (26% vs. 16%). Incapacitating sadness was almost twice as high among 7th graders who skipped breakfast (43% vs. 22%). Among 11th graders, 45% of breakfast skippers reported that they had experienced

incapacitating sadness, compared to 32% of those who ate breakfast on the day of the survey. The same patterns were evident for suicide ideation—23% and 21% of 7th and 11th graders, respectively, who skipped breakfast reported that they had seriously considered suicide compared to 10% and 13% of 7th and 11th graders who ate breakfast.
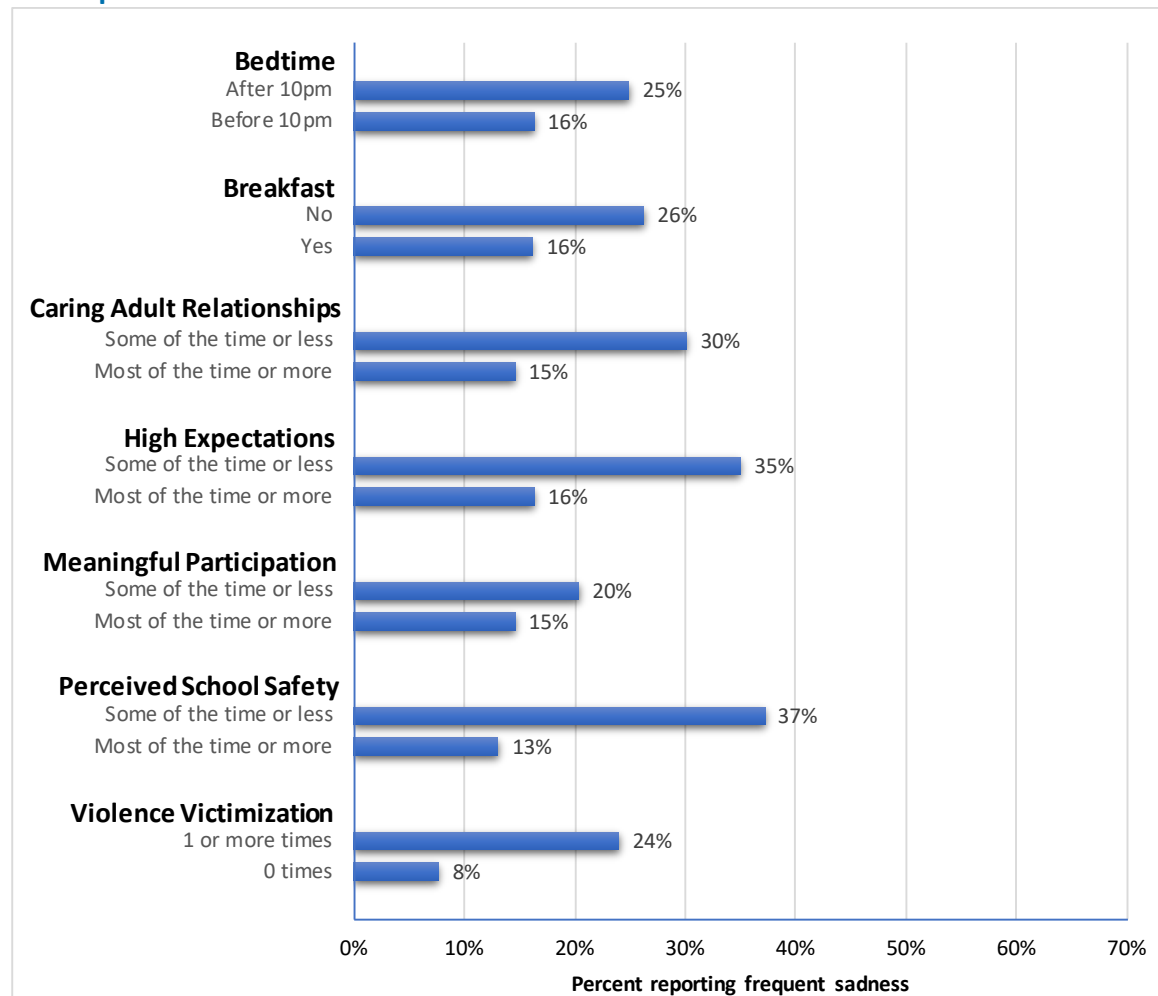
School Developmental Supports

Many students with authentic, caring relationships with adults at school, who are given responsibility and trusted, and who are held to high standards and expectations may be buffered from developing depressive symptoms.[4] These school supports—caring relationships, high expectation messages, and opportunities for participation and contribution—can provide youth with a sense of security that can facilitate healthy development and protect them from subsequently developing mental health problems.[5]

EXHIBIT 2.

How Health-Related Behavior, School Developmental Supports, and School Safety are Related to Frequent Sadness – Grade 5

Bedtime
- After 10pm: 25%
- Before 10pm: 16%

Breakfast
- No: 26%
- Yes: 16%

Caring Adult Relationships
- Some of the time or less: 30%
- Most of the time or more: 15%

High Expectations
- Some of the time or less: 35%
- Most of the time or more: 16%

Meaningful Participation
- Some of the time or less: 20%
- Most of the time or more: 15%

Perceived School Safety
- Some of the time or less: 37%
- Most of the time or more: 13%

Violence Victimization
- 1 or more times: 24%
- 0 times: 8%

Percent reporting frequent sadness

Source: California Healthy Kids Data, 2018-19.

EXHIBIT 3.

How Health-Related Behavior, School Developmental Supports, and School Safety are Related to Incapacitating Sadness – Grade 7

Sleep
< 8 Hours — 41%
8 Hours or more — 21%

Breakfast
No — 43%
Yes — 22%

Caring Adult Relationships
A little true or less — 41%
Pretty much true or more — 22%

High Expectations
A little true or less — 44%
Pretty much true or more — 25%

Meaningful Participation
A little true or less — 32%
Pretty much true or more — 19%

Perceived School Safety
Not safe — 45%
Safe or very safe — 19%

Harassment Victimization
1 or more times — 49%
0 times — 18%

Percent reporting incapacitating sadness/hopelessness (12 months)

Source: California Healthy Kids Data, 2018-19.
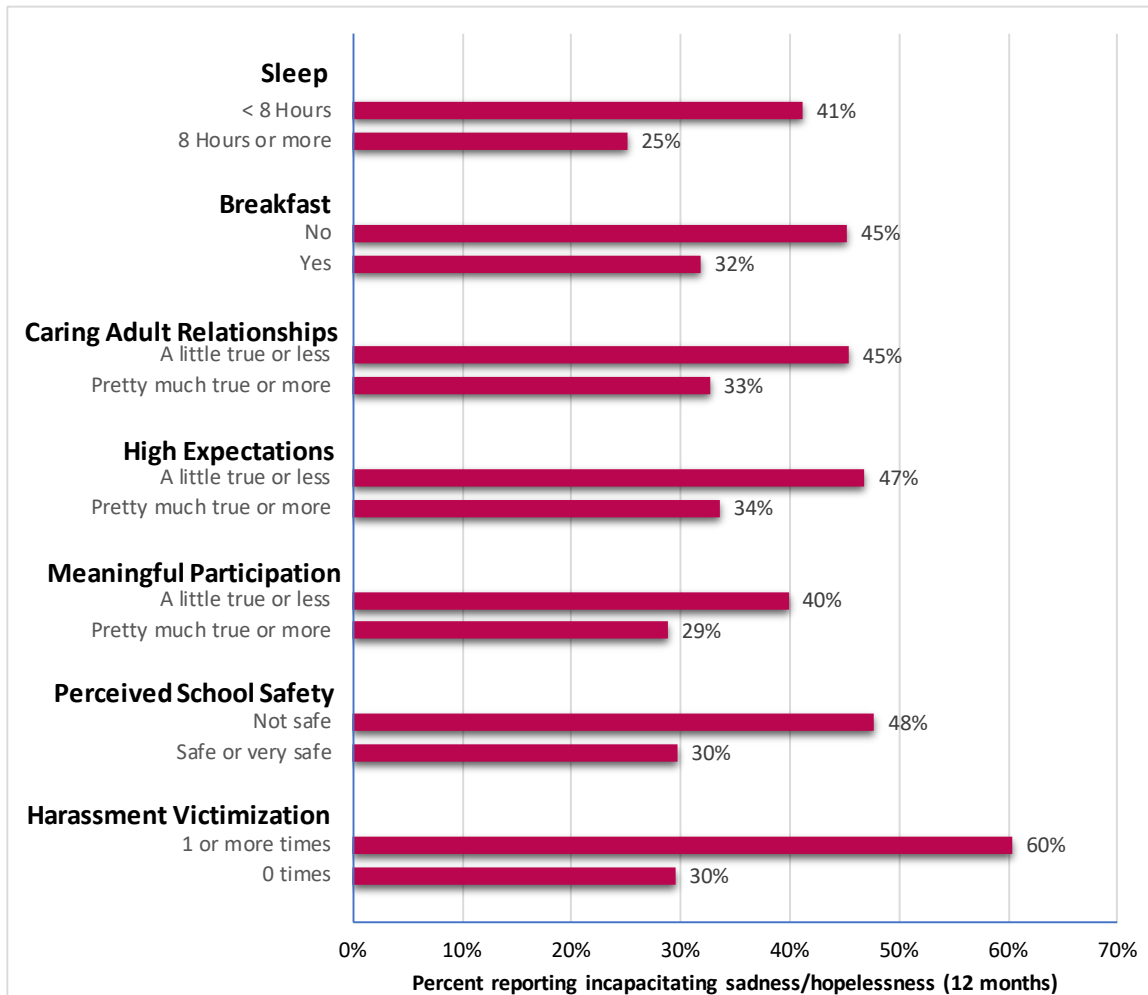
Caring Relationships with Adults at School. Students are substantially less likely to report mental health problems if they experience high levels of caring adult relationships in school, particularly in elementary and middle school. Fifth graders who report that there are often adults who care about them at school are half as likely to report that they are frequently sad (15% vs. 30%). Likewise, 7th graders with high levels of caring relationships are about half as likely as other 7th graders to report incapacitating sadness (22% vs. 41%) and to contemplate suicide (10% vs. 22%). Similar patterns are evident for 11th graders.

High Expectations at School. Like Caring Adult Relationships, students who report that they frequently experience high expectations and support from adults at school are substantially less likely to report frequent sadness (5th grade: 16% vs. 35%), incapacitating sadness (7th grade: 25% vs. 44%; 11th grade: 34% vs. 47%), and suicide ideation (7th grade: 12% vs. 25%; 11th grade: 14% vs. 23%).

EXHIBIT 4.

How Health-Related Behavior, School Developmental Supports, and School Safety are Related to Incapacitating Sadness – Grade 11
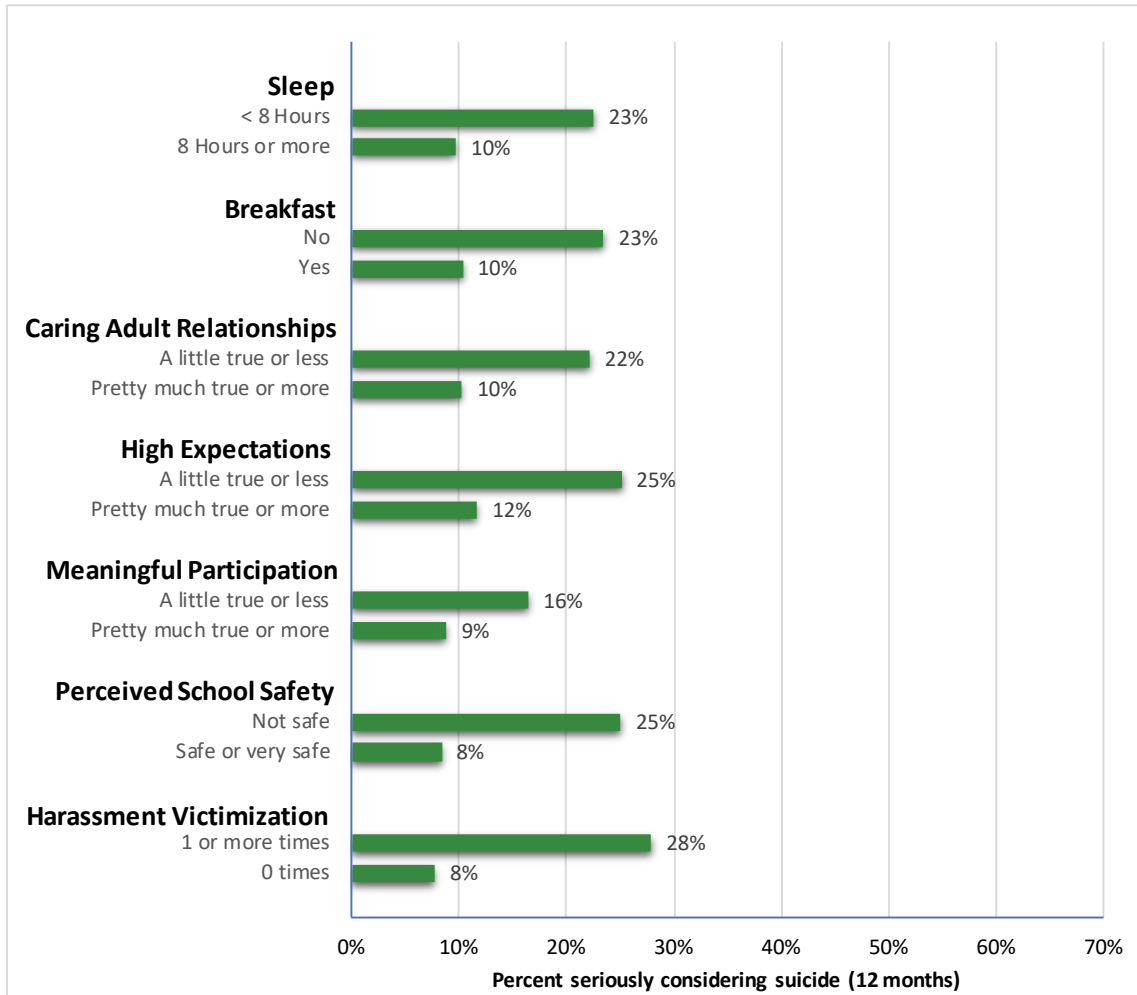
Sleep
- < 8 Hours — 41%
- 8 Hours or more — 25%

Breakfast
- No — 45%
- Yes — 32%

Caring Adult Relationships
- A little true or less — 45%
- Pretty much true or more — 33%

High Expectations
- A little true or less — 47%
- Pretty much true or more — 34%

Meaningful Participation
- A little true or less — 40%
- Pretty much true or more — 29%

Perceived School Safety
- Not safe — 48%
- Safe or very safe — 30%

Harassment Victimization
- 1 or more times — 60%
- 0 times — 30%

Percent reporting incapacitating sadness/hopelessness (12 months)

Source: California Healthy Kids Data, 2018-19.

Opportunities for Meaningful Participation at School. Students who report higher levels of opportunities for meaningful participation are less likely to report frequent sadness (5th grade: 15% vs. 20%), incapacitating sadness (7th grade: 19% vs. 32%; 11th grade: 29% vs. 40%), and suicide ideation (7th grade: 9% vs. 16%; 11th grade: 12% vs. 18%), but this school developmental support is less strongly related to these mental health indicators than caring adult relationships and high expectations.
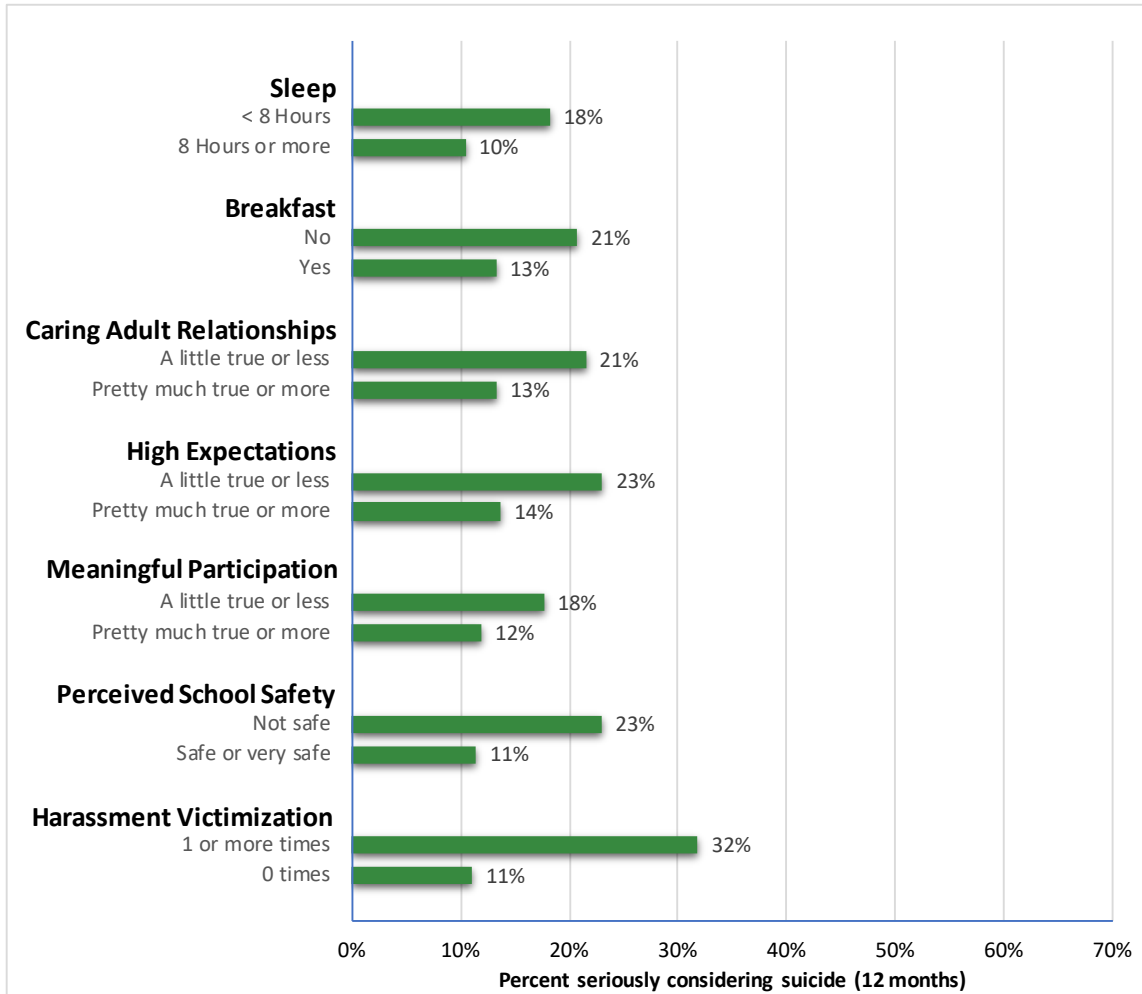
EXHIBIT 5.

How Health-Related Behavior, School Developmental Supports, and School Safety are Related to Suicide Ideation – Grade 7

Sleep
- < 8 Hours — 23%
- 8 Hours or more — 10%

Breakfast
- No — 23%
- Yes — 10%

Caring Adult Relationships
- A little true or less — 22%
- Pretty much true or more — 10%

High Expectations
- A little true or less — 25%
- Pretty much true or more — 12%

Meaningful Participation
- A little true or less — 16%
- Pretty much true or more — 9%

Perceived School Safety
- Not safe — 25%
- Safe or very safe — 8%

Harassment Victimization
- 1 or more times — 28%
- 0 times — 8%

Percent seriously considering suicide (12 months)

0% 10% 20% 30% 40% 50% 60% 70%

Source: California Healthy Kids Data, 2018-19.

EXHIBIT 6.

How Health-Related Behavior, School Developmental Supports, and School Safety are Related to Suicide Ideation – Grade 11

Sleep
- < 8 Hours — 18%
- 8 Hours or more — 10%

Breakfast
- No — 21%
- Yes — 13%

Caring Adult Relationships
- A little true or less — 21%
- Pretty much true or more — 13%

High Expectations
- A little true or less — 23%
- Pretty much true or more — 14%

Meaningful Participation
- A little true or less — 18%
- Pretty much true or more — 12%

Perceived School Safety
- Not safe — 23%
- Safe or very safe — 11%

Harassment Victimization
- 1 or more times — 32%
- 0 times — 11%

Percent seriously considering suicide (12 months)

Source: California Healthy Kids Data, 2018-19.

School Safety

Victimization and Safety Perceptions.
Students exposed to physical violence and harassment/bullying were more likely to report poorer mental health outcomes across all the grades examined. Fifth graders were three times more likely to report being frequently sad (24% vs. 8%), 7th and 11th graders were more likely to report incapacitating sadness (7th grade: 49% vs. 18%, 11th grade: 60% vs. 30%) and contemplating suicide (7th grade: 28% vs.

8%, 11th grade: 32% vs. 11%). For 5th, 7th, and 11th graders, students who felt unsafe at school were much more likely than students who felt safe to be frequently sad (5th grade: 37% vs. 13%) and chronically sad (7th grade: 45% vs. 19%, 11th grade: 48% vs. 30%). Approximately 25% of secondary students who believed that their school was unsafe contemplated suicide compared to about 10% of secondary students who felt safe at school.

Implications

Far too many students report that they are frequently sad, that they experience incapacitating sadness, and that they have contemplated suicide. Educators and school personnel are in an ideal position to address risk factors associated with the development of mental health problems and to connect students to evidence-based therapeutic interventions in the community when appropriate. For example, school staff can provide information to parents and students about the importance of sleep hygiene, the recommended amount of sleep students need, and strategies to improve sleep-related behaviors.[6] Similarly, schools can provide information about how nutrition and skipping breakfast influences mental and physical health. Schools can also implement policies to increase participation in school breakfast programs, such as making breakfast available after the start of the school day via grab 'n' go kiosks or other venues.[7] And to ensure that students are safe, school staff and youth can be trained to intervene when they observe violence, bullying, harassment, and discrimination. School safety is enhanced when schools are both free of harassment, bullying, and violence and rich in positive, supportive relationships and interesting opportunities for engagement.[8] And finally, when adults at school provide youth with three fundamental developmental supports—caring relationships, high expectations, and opportunities for meaningful participation in the classroom and school community—youth are more likely to acquire a sense of psychological safety and to feel connected to schools, which can help foster resiliency to protect youth from developing mental health problems.[5]

Endnotes

[1] Suggested citation: Hanson, T., & Austin, G. (2020). *How are student reported health behavior, school developmental supports, and school safety related to sadness and suicidal thoughts?* San Francisco, CA: WestEd.

[2] Aldridge, J. M., & McChesney, K. (2018). The relationships between school climate and adolescent mental health and wellbeing: A systematic literature review. *International Journal of Educational Research*, *88*, 121-145.

La Salle, T. L., George, H. P., McCoach, D. B., Polk, T., & Evanovich, L. L. (2018). An examination of school climate, victimization, and mental health problems among middle school students self-identifying with emotional and behavioral disorders. *Behavioral disorders*, *43*(3), 383-392.

Pfledderer, C. D., Burns, R. D., & Brusseau, T. A. (2019). School environment, physical activity, and sleep as predictors of suicidal ideation in adolescents: evidence from a national survey. *Journal of adolescence*, *74*, 83-90.

[3] Factsheets 11 and 12 (see calschls.org/resources/factsheets/) used CHKS data to show how students who reported chronic sadness and contemplated suicide were at an elevated risk of a variety of educational, health, social, and emotional problems. This Factsheet builds upon those analyses to show how students' health-related behavior, school developmental supports, and school safety may influence students' mental health, providing information about school-related precursors to mental health that can be addressed by school staff.

[4] Wang, M., Brinkworth, M., & Eccles, J. (2013). Moderating effects of teacher-student relationships in adolescent trajectories of emotional and behavioral adjustment. *Developmental Psychology, 49*(4), 690-705.

[5] Benard, B. (2004). *Resiliency: What have we learned.* San Francisco: WestEd

[6] Kidwell, K.M., Hankey, M., Flores, D.M., Van Dyk, T.R., Lundahl, A., & Nelson, T.D. (2015). *Sleep and school: Strategy brief.* Retrieved from k12engagement.unl.edu/strategy-briefs/Sleep%20and%20School%2012-30-15_0.pdf

[7] Mosehauer, K. (2013). *The future of school breakfast: An analysis of evidence-based practices to improve school breakfast participation in Washington State.* Seattle, WA: Washington Appleseed. Retrieved from files.eric.ed.gov/fulltext/ED563849.pdf

[8] Hong, J.S., & Eamon, M. (2011). Student's perceptions of unsafe schools: An ecological systems analysis. *Journal of Child and Family Studies*, 21(3):1-11.

List of Selected Measures for Elementary School Students

Construct	CHKS Survey Measure and Operationalization
Mental Health	
Frequent Sadness	(One item)
	Do you feel sad?
	% of students responding "*yes, most of the time*" or "*yes, all of the time*"
Health-Related Behavior	
Sleep	(One item)
	What time do you usually go to bed on nights before you go to school?
	% of students reporting before 10pm
Morning Fasting	(One item)
	Did you eat breakfast this morning?
	% of students responding "*yes*"
School Developmental Supports	
Caring Adult Relationships (at school)	(Three-item scale)
	Do the teachers and other grown-ups at school…care about you? …listen when you have something to say? …make an effort to get to know you?
	% of students responding "*yes, most of the time*" or "*yes, all of the time*" on more than half of the items on the scale
High Expectations (at school)	(Three-item scale)
	Do the teachers and other grown-ups at school…tell you when you do a good job? …believe that you can do a good job? …want you to do your best?
	% of students responding "*yes, most of the time*" or "*yes, all of the time*" on more than half of the items on the scale
Opportunities for Meaningful Participation	(Four-item scale)
	Are you given a chance to help decide school activities or rules? Do you get to do interesting activities at school? Do the teachers and other grown-ups at school…ask you about your ideas? …give you a chance to solve school problems?
	% of students responding "*yes, most of the time*" or "*yes, all of the time*" on more than half of the items on the scale
Safety	
Perceived School Safety	(One item)
	Do you feel safe at school?
	% of students responding "*yes, most of the time*" or "*yes, all of the time*"
Violence Victimization	(Three-item scale)
	Do other kids…hit or push you at school when they are not just playing around? …at school spread mean rumors or lies about you? …at school call you bad names or make mean jokes about you?
	% of students responding "*yes, most of the time*" or "*yes, all of the time*" to more than half of the items on the scale

List of Selected Measures for Secondary School Students

Construct	CHKS Survey Measure and Operationalization
Mental Health	
Incapacitating Sadness	(One item) Did you ever feel so sad or hopeless almost every day for two weeks or more that you stopped doing some usual activities? (past 12 months) % of students responding "*yes*"
Suicide Ideation	(One item) Did you ever seriously consider attempting suicide? (past 12 months) % of students responding "*yes*"
Health-Related Behavior	
Sleep	(One item) On an average school night, how many hours of sleep do you get? % of students reporting 8 hours or more
Morning Fasting	(One item) Did you eat breakfast today? % of students responding "*yes*"
School Developmental Supports	
Caring Adult Relationships (at school)	(Three-item scale) At my school, there is a teacher or some other adult…who really cares about me; …who notices I'm not there; …who listens to me when I have something to say. % of students responding "*pretty much true*" or "*very much true*" on more than half of the items on the scale
High Expectations (at school)	(Three-item scale) At my school, there is a teacher or some other adult…who tells me when I do a good job; …who always wants me to do my best; …who believes that I will be a success. % of students responding "*pretty much true*" or "*very much true*" on more than half of the items on the scale
Opportunities for Meaningful Participation	(Four-item scale) At school…I do interesting activities; …I help decide things like class activities; …I do things that make a difference. % of students responding "*pretty much true*" or "*very much true*" on more than half of the items on the scale
Safety	
Perceived School Safety	(One item) How safe do you feel when you are at school? % of students responding "*very safe*" or "*safe*"
Harassment or bullying	(One item) How many times on school property were you harassed or bullied for any of the following reasons? Your race, ethnicity, or national origin; Your religion; Your gender; Because you are gay, lesbian, or bisexual or someone thought you were; A physical or mental disability; You are an immigrant or someone thought you were; Any other reason. % of students responding "*1 time,*" "*2 to 3 times,*" or "*4 or more times*" on any of the items