

Teen Mental Health

SWFLMUN 2026

PORT CHARLOTTE HIGH

AGENDA

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01

Background

GLOBAL

According to the World Health Organization, 1 in 5 adolescents worldwide experiences a mental health disorder.

Depression, anxiety, and behavioral disorders are among the leading causes of illness and disability in teens.

Suicide is one of the top causes of death for ages 15–19 globally.

Many countries lack access to trained professionals, especially in rural or low-income areas.

USA

The Centers for Disease Control and Prevention (CDC) reports increasing rates of:

- ★ Persistent sadness and hopelessness
- ★ Anxiety disorders
- ★ Self-harm
- ★ Suicidal ideation

Teen girls and LGBTQ+ youth report significantly higher levels of emotional distress.

Post-COVID isolation worsened many existing mental health trends.

SOUTH WEST FL

Florida faces particular challenges:

- ★ Rapid population growth → strained school systems and healthcare access.
- ★ Shortage of licensed child psychologists and psychiatrists.
- ★ Long wait times for appointments.
- ★ Unequal access between wealthier and lower-income communities.

In Southwest Florida, additional contributing factors may include:

- ★ High cost of living stress on families.
- ★ Hurricane-related trauma (natural disasters increase PTSD and anxiety).
- ★ Limited public transportation (barrier to accessing services).
- ★ Cultural stigma in certain communities around discussing mental health.

MAJOR CAUSES

Social Media & Technology

- Constant comparison culture.
- Cyberbullying.
- Sleep disruption.

Academic & Achievement Pressure

- Competitive college admissions.
- Over-scheduling.
- Fear of failure.

Family & Economic Stress

- Financial instability.
- Parental mental health struggles.
- Divorce or family conflict.

Trauma & Instability

- Pandemic disruption.
- Natural disasters (relevant to Florida).
- Community violence.

02

Past Solutions

School Based Programs

What They Are

- ★ Hiring counselors, social workers, and psychologists in schools.
- ★ Implementing *social-emotional learning (SEL)* curricula.
- ★ Creating wellness centers or mental health clubs.

What Worked

- ★ Early access: Students can get support without leaving campus.
- ★ SEL has been shown to *improve emotional regulation and peer relationships*.

Drawbacks

- ★ Understaffed and high student-to-counselor ratios.
- ★ Inconsistent implementation across districts.

Youth Crisis Hotlines & Text Services

Examples

- ★ Crisis Text Line – text support for emotional crisis.
- ★ National Suicide Prevention Lifeline – 24/7 hotline support.

What Worked

- ★ Immediate, anonymous help.
- ★ Attractive to teens who prefer texting over talking.

Limitations

- ★ Reactive rather than preventive.
- ★ Lack of follow-up or local support after initial contact.

Telehealth & Virtual Counseling

What It Includes

- ★ Video sessions with therapists.
- ★ Apps for mood tracking or CBT-based exercises.

What Worked

- ★ Removed transportation and geographic barriers.
- ★ Useful in rural areas and during the COVID-19 pandemic.

Challenges

- ★ Requires reliable internet/devices.
- ★ Less effective for severe conditions than in-person therapy.

Mental Health Awareness Campaigns

Typical Approaches

- ★ Classroom lessons on reducing stigma.
- ★ Public service announcements and school campaigns.
- ★ “Break the Silence” and “Awareness Week” events.

Strengths

- ★ Helps reduce stigma around talking about feelings.
- ★ Encourages teens to seek help.

Drawbacks

- ★ Often one-off events with no lasting impact.
- ★ Doesn't create long-term support structures.

Parental & Teacher Training Programs

Focus Areas

- ★ Training adults to spot warning signs (self-harm, depression).
- ★ Workshops on communication and supportive environments.

What Worked

- ★ Adults better equipped to notice problems early.
- ★ Lessens inappropriate punishment of mental-health-related behavior.

Challenges

- ★ Attendance and buy-in can be low.
- ★ Time and budget constraints limit reach.

Peer Support & Mentorship Programs

Examples

- ★ Peer counseling teams.
- ★ Buddy systems where older students mentor younger ones.

What Worked

- ★ Students often open up more to peers.
- ★ Creates a sense of belonging.

Limitations

- ★ Needs proper training and supervision to avoid harm.
- ★ Peer leaders can burn out without support.

03

Our Solution

Environmental / Nature-Based Solutions:

Increasing Access to Parks & Green Spaces

The Plan:

- ★ Being in parks improves public mental health
- ★ Urban Green Spaces (UGSs) linked to:
 - ☆ Reduced stress
 - ☆ Increased perceived restoration
- ★ Sensory features like:
 - ☆ "Refuge"
 - ☆ "Space"
 - ☆ "Prospect"
 - Associated with lower stress
- ★ Making nature accessible:
 - ☆ School green spaces
 - ☆ Neighborhood green areas
 - ☆ Outdoor spaces near home

How to implement:

- ★ Conduct city-level audits to identify neighborhoods with low green space.
- ★ Convert vacant lots into community parks.
- ★ Partner with local governments for small-scale "pocket parks."
- ★ Add trees, shaded benches, walking paths, and sensory elements (refuge, space, prospect).
- ★ Offer after-school outdoor programs in existing parks.

Who would lead it:

- ★ City councils
- ★ School districts
- ★ Parks & Recreation departments
- ★ Community nonprofits

Funding options:

- ★ Municipal budgets
- ★ Federal environmental grants
- ★ Public-private partnerships

Environmental / Nature-Based Solutions:

Sunlight Exposure & Vitamin D

The Plan:

- ★ Sunlight exposure improves mental health
- ★ Vitamin D production linked to lower depressive symptoms
- ★ Low vitamin D levels associated with depression
- ★ More clinical research needed before recommending supplements

How to implement:

- ★ Schedule outdoor recess or class time daily.
- ★ Encourage outdoor lunch periods.
- ★ Design school buildings with more natural lighting.
- ★ Promote outdoor extracurricular activities.

At-home strategies:

- ★ Encourage families to spend 30–60 minutes outside daily.
- ★ Community awareness campaigns about sunlight and mental health.

Important note:

While low vitamin D levels are associated with depression, more research is needed before recommending supplements as treatment.

Environmental / Nature-Based Solutions:

Increasing Physical Activity

The Plan:

- ★ Physical movement improves mental health
- ★ Outdoor activity strengthens benefits of sunlight and nature
- ★ Green spaces promote:
 - ☆ Mental reinvigoration
 - ☆ Physical activity

How to implement:

- ★ Require daily physical education in schools.
- ★ Add walking clubs, outdoor sports leagues, or movement breaks in classrooms.
- ★ Create safe walking/biking paths in neighborhoods.
- ★ Offer free or reduced-cost community fitness programs.

Environmental / Nature-Based Solutions:

Reducing Screen / Internet Time

The Plan:

- ★ Excess screen time:
 - ☆ Reduces physical activity
 - ☆ Reduces sunlight exposure
 - ☆ Damages public mental health

How to implement:

- ★ Set school phone-free policies during instructional hours.
- ★ Teach digital wellness in health classes.
- ★ Encourage “screen-free” school events.
- ★ Provide appealing offline alternatives (clubs, sports, arts).

At home:

- ★ Family media plans (scheduled device-free hours).
- ★ Parent education on screen time effects.

School Based Solutions:

Making Nature Accessible in Schools

The Plan:

- ★ Schools are in a strong position to:
 - ☆ Provide greens paces
 - ☆ Encourage outdoor time
 - ☆ Integrate nature into daily routines

How to implement:

- ★ Develop school gardens.
- ★ Hold certain classes outdoors.
- ★ Create green courtyards or relaxation spaces.
- ★ Add “mental reset” outdoor zones for overwhelmed students

School Based Solutions:

School Mental Health Services

The Plan:

- ★ Only 15% of students (12-17) received mental health services in school (2019)
- ★ Suggested improvements:
 - ☆ Monthly therapist check-ins
 - ☆ Safe spaces to talk
 - ☆ Early intervention

How to implement:

- ★ Hire more school counselors, psychologists, and social workers.
- ★ Require monthly or quarterly mental wellness check-ins.
- ★ Create anonymous reporting systems for students seeking help.
- ★ Train teachers in early warning signs.

Funding sources:

- ★ Federal mental health grants
- ★ State education funding
- ★ Partnerships with local hospitals

School Based Solutions:

Eating Disorder Help

The Plan:

- ★ Early identification of:
 - ☆ Anorexia nervosa
 - ☆ Bulimia nervosa
- ★ Post-recovery:
 - ☆ Continued mental health treatment
- ★ Education for parents and teachers on warning signs

How to implement:

- ★ Annual health screenings.
- ★ Parent education nights about warning signs.
- ★ On-campus referrals to specialists.
- ★ Reintegration support after recovery

Therapeutic and Clinical Intervention:

Music Therapy

The Plan:

- ★ Potential to:
 - ☆ Boost self-esteem
 - ☆ Increase social engagement
 - ☆ Reduce isolation
 - ☆ Decrease depression and anxiety
- ★ Applicable in:
 - ☆ Inpatient settings
 - ☆ Outpatient settings
- ★ Research still ongoing

How to implement:

- ★ Partner with certified music therapists.
- ★ Offer weekly music therapy groups.
- ★ Integrate music programs into mental health services.
- ★ Use music rooms as safe creative spaces.

Therapeutic and Clinical Intervention:

Professional Mental Health Treatment

The Plan:

- ★ Specialized therapists
- ★ Regular mental health check-ins
- ★ Focus on:
 - ☆ Depression
 - ☆ Self-esteem
 - ☆ Stress
 - ☆ Eating disorder

How to implement:

- ★ Telehealth counseling options for rural students.
- ★ Insurance coverage expansion for adolescent mental health.
- ★ Sliding-scale therapy options through community clinics.

Policy and Economic Solutions:

Environmental Protection

The Plan:

- ★ Reduce ecosystem overuse
- ★ Prevent environmental degradation
- ★ Address climate change impacts on mental health

How to implement:

- ★ Reduce air pollution through stricter emissions standards.
- ★ Invest in renewable energy infrastructure.
- ★ Incentivize urban tree-planting programs.
- ★ Conduct economic impact studies linking environmental damage to mental health costs.

Policy and Economic Solutions:

Economic Analysis & Resource Allocation

The Plan:

- ★ Identify areas with:
 - ☆ High pollution
 - ☆ Low green space
 - ☆ High mental health service costs
- ★ Allocate funding based on need
- ★ Barrier:
 - ☆ Large countries hesitant to shift toward eco-friendly policies

How to implement:

- ★ Collect data on mental health service usage by region.
- ★ Identify high-risk communities (low green space, high pollution).
- ★ Redirect funding toward prevention in those areas.
- ★ Require impact reporting for accountability.

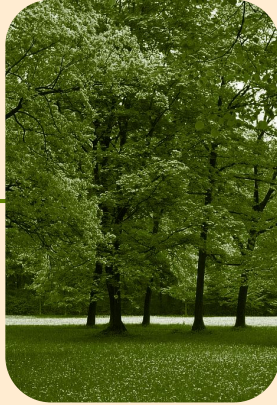
ROLLOUT PLAN

This can be implemented at a district or city level



Step 1: Awareness & Data Collection

- ★ Survey student mental health
- ★ Map green space access
- ★ Identify service gaps



Step 2: Low-Cost Changes

- ★ Outdoor class time
- ★ Phone-free policies
- ★ Peer support groups



Step 3: Structural Investment

- ★ Hire counselors
- ★ Build green spaces
- ★ Expand therapy access



Step 4: Long-Term Policy Reform

- ★ Environmental legislation
- ★ Sustainable urban planning
- ★ Permanent school mental health funding

FUNDING

While there are already currently many active, working, resources available for teen mental health, the implementation of this plan will still take time to integrate into schools and daily lives. This solution plans to initiate a resolution through addressing multiple outlets impacting mental health, meaning that the resource allocation will need to derive from various methods and grants.

FUNDING

- School-Based Mental Health Services Grant Program
- Preschool Development Infant and Early Childhood Mental Health Grant to provide mental health sub-grants.
- Mental Health Assistance Program
- Get Out Get Active Grant
- SAMHSA Grant
- Wellcome Trust
- Climate and Health Funders Coalition

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