

Britain: Teenagers driven to depression and suicide by exam pressures

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In the past month there have been a number of reports of how the pressure of school exams is having a terrible impact on the mental well-being of teenagers, with GPs prescribing anti-depressants such as Prozac and Seroxat to help young people deal with stress.

The most tragic cases have led to suicide, such as the case of 15-year-old Tina Dziki who died from a suspected overdose of anti-malarial drugs in May. She was found collapsed in the grounds of Dunraven School, one of South London's best state schools. She was due to take her GCSEs and a fast track GCSE in math, but left a note expressing worries about her forthcoming exams.

But this is only the tip of the iceberg. Exams only serve to bring to a head feelings of depression, hopelessness and fear of failure that have become endemic amongst school age children, thanks in large part to the results-driven agenda that the Labour government insists upon.

Figures from the government's drug watchdog, MHRA, show that in 1995 46,000 anti-depressant prescriptions were given to teenagers between 16 and 18 in full-time education. By last year this had risen to 140,000. There has also been a rise of almost 50 percent in the prescription of so-called "happy drugs" such as Prozac and Seroxat to under 16s. This has risen from 76,000 in 1996 to 110,000. This figure could be higher because prescriptions from private doctors and those given to hospital patients are not included.

Whilst the figures point to a one in five prevalence of mental illness among under 18s, the Department of Health (DoH) has admitted that it has no idea how many children are actually taking psychiatric drugs. Nor does it collect statistics on exam-related suicides.

In the seven years that the government of Prime Minister Tony Blair has been in office, there has been an increased emphasis in education on attaining ever-more impossible targets. The expectations that schools will produce a year on year increase in test and exam results, which are then used to produce league tables, puts an enormous strain on social relations within schools and among the pupils themselves. The fear of failure and letting people down, whether it be

yourself, your family, friends or the school, is widespread at a time when there has never been such a premium placed on achieving high grades in order to enter university.

The case of Tina Dziki is not unusual, in that a growing number of bright youngsters are pressured to take exams earlier within the state school system. In the last few years there have been a number of teenage suicides where exam pressure has played a part.

Amy Burgess from West Mersea, Essex, jumped from the top of a multi-story car park the day she was due to take her GCSE's. An open verdict was recorded into her death.

Sixth former David Tebby from South Wales also killed himself by jumping from a multi-story car park because of anxiety about A-levels.

Tim Russell, 16, killed himself with his father's shotgun because he had failed his physics paper.

Shaun Begley, 16, hanged himself from a tree because he believed he would not pass his math GCSE.

The Children's charity, Childline, has recently collated figures that reveal a 50 percent increase in calls concerning exam pressure in the past year, up from 600 to 900. Thousands more are asking for a leaflet about beating exam stress or used the charity's website to help them. The charity say lots of children ring them because they are worried that poor exam results mean they are letting their parents down, or they won't be able to do what they want in the future. Adrian Brown of Childline said, "Fear of failure and pressure to succeed can be immense. They don't want to let parents, teachers and themselves down."

Linda Blair, a clinical psychologist at Bath University, also believes that exam stress is on the increase. She says that children feel pressure from teachers who are themselves under more pressure to achieve impressive results because of the introduction of league tables. The sheer number of exams that children are expected to sit also exacerbates stress levels—this generation is the most tested in history.

Further evidence of the emphasis being placed on the ethos of testing in the school system was revealed in the first official survey of revision time being spent in Year 6 in the

run up to key stage 2 tests for 11-year-olds. The survey found that in the run up to the spring assessments in Year 6, 75 percent of schools now spend a tenth of all teaching time practicing for English tests alone. Some start the cramming as early as the second half of the autumn term. Time that should be given over to non-tested subjects like history and design technology is being cut back to accommodate the drilling.

Even official figures show that half of the school week is spent on English and math in key stage 2. The Qualifications and Curriculum Authority (QCA), which carried out the survey, told the *Times Educational Supplement*, “Teachers... told us they were spending too much time on (test preparation) as a result of feeling the pressure to improve results in order for the school to appear to be doing well in the published league tables.”

The report quoted a number of head teachers concerned that breadth and balance of the curriculum were suffering as a result. The QCA explained that this would put pupils at a disadvantage if they arrive in secondary school having not spent sufficient time on the full range of subjects in the second part of Year 6.

However, Mary Bousted, the general secretary of the Association of Teachers and Lecturers, said, “It’s naïve of the QCA and the government to say to schools, ‘Do not invest inordinate amounts of time practicing for these tests’. League tables and funding and status depend on schools performance. Until that changes, schools will continue to devote this amount of time to preparation.”

The City Academy, Bristol is one of several schools offering payments to students in order to improve results. Year 10 students receive £10 for every predicted grade achieved, £5 for any grade above the predicted grade and £150 for getting five A*’s to C GCSEs. The school also offers £500 to every student who goes on to university.

It is clear that exam pressures among children and young people are greater than ever before. And if you factor in family breakdown and the economic stresses on families and young people, then it is little wonder that mental ill health is on the increase among children. Mental ill health among adolescents now stands at one in five and figures from Accident & Emergency wards alone show that more than five hundred 15-19 year olds attempt suicide every year.

Another worrying trend is the continued prescription of drugs such as Prozac and Seroxat. In the past year most anti-depressants have been banned for the under 18s, with the exception of Prozac. But the Seroxat Users Group claim that Seroxat is still being prescribed even though its prescription is banned. A number of young people have committed suicide whilst using this drug. In the US GlaxoSmithKline, which manufactures Seroxat, is facing charges that it

suppressed information that Seroxat can cause suicidal behavior among teenagers.

New data, received within the last two weeks, has been evaluated and considered by the Committee on Safety of Medicines, (CSM) and its Expert Working Group on selective serotonin reuptake inhibitors (SSRIs). It shows that there is an increase in the rate of self-harm and potentially suicidal behaviour in this age group when Seroxat is used for depressive illness.

The Royal College of Psychiatrists’ advice on Seroxat and recent advice from the CSM is that Seroxat should not be used in children and adolescents under the age of 18 for the treatment of depressive illnesses.

Other recent research suggests that Seroxat has no benefit and actually increases the rate of suicidal thoughts and behavior in this age group. However, due to the nature of the drug it should not be withdrawn immediately, as this can also increase a tendency to suicidal thoughts. A gradual withdrawal is advised.

In spite of the government’s claim that more therapeutic treatment is on offer to children and adolescents, the reality is that whilst there may be an increase in these interventions they lag far behind the increase in child and adolescent mental illness. This constant effort to catch up has also meant that other school professionals such as school counselors, learning mentors and school nurses who are not trained psychiatrists, are dealing with child and adolescent mental health. Whilst this can play a part in easing the pressure on both the child and the Child and Adolescent Mental Health Service (CAMHS), referrals for more experienced intervention can take up to twelve months.

This state of affairs makes it even more likely that GPs resort to prescribing anti-depressants to school age children.



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