



**Understanding the Mental
Health Needs and
Concerns of Youth and
their Parents: An
Exploratory Investigation**
Major Themes and Findings

July 2016

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About the Center

The Stanford Center for Youth Mental Health and Wellbeing is committed to spearheading a new national vision for adolescent and young adult wellness and mental health support. The staff and faculty within the Department of Psychiatry and Behavioral Sciences are laying the groundwork for the creation of a national initiative for youth through their expertise in early mental health support, development of self-regulation tools, school mental health, and suicide prevention. By creating an innovative health system, and a new culture of health for the adolescent and young adult population, Stanford hopes to create a model for the country in how to better support our young people to navigate the transition to adulthood and realize their full potential as adults. *For more information, contact 650-725-3772, follow @stanfordyouthmh or <http://med.stanford.edu/psychiatry/special-initiatives/youthwellbeing.html>*

Methodology

- 6 Focus Groups each conducted by 2 co-facilitators
- 62 participants
- \$40 amazon gift card incentive

Purpose

To understand perceptions of attitudes and barriers and the types of mental health resources and interventions that youth aged 14-19 and parents of youth aged 14-19 in Santa Clara or San Mateo Counties want and/or value, with special emphasis on Asian American families.

Analysis

Manually coded by emergent theme and tags of barriers and opportunities. Pre-identified themes were: *stigma, accessibility, culture, pressure/stress, community, school, family, and technology*. Facilitator observations were also incorporated. Two rounds of coding were conducted. Then data was combined across groups and questions were posed back to the data by theme.

3 Youth Focus Groups

- 1 San Mateo County group
- 1 Santa Clara County group
- 1 Santa Clara County group Asian American youth only

3 Parent Focus Groups

- 1 San Mateo County group
- 1 Santa Clara County group
- 1 Santa Clara County group Asian American parents only

Focus Group Questions

- (1) What are your perceptions about mental health and well-being among local youth?
- (2) How big of an issue is stigma around mental health in your community?
- (3) How accessible is mental health support at school or in the community?
- (4) How do you think the issues of stigma and access are influenced by cultural factors?
- (5) What resources would you consider using if you or someone you knew had mental health needs?
- (6) What resources, supports or interventions would you like to see for youth and families in your community?
- (7) What do you think about the use of social media or technology to support youth mental health needs?
- (8) What tools would help you better communicate with your parents/family members about mental health related issues?



Youth on Pressure and Stress

- Teenagers identified pressure coming from many different places, including themselves, peers, parents, school and the culture of the community. They described pressure from being in a community filled with tech company executives and Stanford professors.
- Students compare themselves to their peers and share test scores and grades, including posting this information broadly on social media. Teens describe **feeling competitive with their peers**; some saying that they are competing directly with peers to get accepted to college.
- One student described the role of competition in a friend's theory about the suicides at a local high school *"it's just a big competition and sometimes you just eliminate yourself from the competition because you feel like if you're not like them you're not going to go anywhere."*
- Teenagers identify **valuing outcome over hard work**, and value being defined by grades, *"people talk about grades so much because that's where your value seems to come from."*
- Students feel **success has been narrowly defined**, not only by going to college, but which colleges are acceptable and what fields are acceptable to study ("STEM driven path to success").
- Students identified future needs to balance goal orientation with enjoyment; one student suggested, *"teaching people how to be **more balanced**."* To broaden the narrow definition of success, teens discussed **accepting various post-high school trajectories**. One student asked for more contact with people *"who aren't that super-duper successful and who actually live like happy fulfilling lives."*

"A multi-faceted pressure where it comes from yourself because a lot of people have that drive to do well; and it comes from your peers because you look around and to do well that means to do better than your peers who are doing so well; and then it also comes from your parents where they are doing so well so you want to do well—it's just like so many people are so successful in this area and doing so well in the individual fields that they're in that you feel the pressure to match up or even do better."
- Youth Participant



Parents on Pressure/Stress

Parents talked a lot about the high-achieving Silicon Valley culture and pressure from the following sources on teens to go to elite colleges:

- Peers:
 - Parents observed their teens' friends pressure them to take more competitive classes and plan fewer social engagements.
 - Parents describe their teens' peers putting up false fronts, pretending the work is easy and they are not stressed. They also observe that when students attend elite colleges but don't succeed and return home, this is not discussed.
- Parents and family:
 - Parents feel pressure and some put it on their teens; one parent shared her own internal reaction upon learning her teen got B's and C's one semester, "*there goes Stanford and Harvard, Ivy League, good-bye!*"
 - Teens are compared to family members who attend elite colleges.
- Colleges:
 - There is a sense that colleges are so competitive that even perfect transcripts do not guarantee admission, which creates even more pressure to stand out or be unique in some way.
- Narrow definition of success:
 - One parent compares it to "*a game where it's you do this, this, this, there's this checklist and then you'll get into Stanford and that's your measure of success.*" There is limited discussion about non-university post-high school tracks; going to junior college or not going to college are not discussed or perceived as acceptable.
 - Given the "*high powered environment*" and cost of living in the area, parents model "working all the time" to maintain their lifestyle.

"There's not a lot of room in this culture in particular ...in this microcosm of Silicon Valley... to say, you know it's okay to screw up as you are figuring it out"
- Parent Participant



Youth on Mental Health Stigma

- Adolescents feel there is stigma against mental illness, and associate it with words like “**asylum**” and “**crazy.**”
- Students worry they will be looked down on, “**misunderstood,**” or “**seen as different**” if others are aware they have a mental illness. Some shared observations of students with mental illnesses being marginalized or socially excluded.
- Some attributed this to a lack of knowledge about what it means to have a mental illness, and that people don’t understand the effects that depression or another mental illness can have on students’ academic and social functioning.
- Stigma is associated with mental illness not being acknowledged and “*not really talked about.*”
- Students shared that feeling stressed, overloaded and depressed are the **new normal** -- “*so many other people are stressed or have like other symptoms of depression it’s normal now to feel that way.*” This is closely related to a described barrier to seeking treatment, which is “*getting yourself to realize that you need help.*”
- There is some fear that discussing mental illness will be labeled as attention seeking, one student shared being called a “**drama queen**” by a friend.
- When asked how to address the issue of stigma, teens suggest addressing the lack of knowledge through educational programs and normalizing seeking help.
- Some students emphasized the presence of groups on campus to address stigma, greater acceptance of mental health struggles, and changing attitudes towards asking for help.

“I was walking into the counselor’s office and I got really nervous because there were people there and I was thinking what if they think that I’m going in for like emotional reasons. I know it was ridiculous but I still got nervous even though I could just, if my friends ever saw me and they asked I would be like ‘I’m just talking about colleges’.”
- Youth Participant



Parents on Mental Health Stigma

- “*Don’t tell my friends*”- Parents discussed that teens fear **being labeled** or associated with having mental illness, and worry about how others will ‘look at them.’
- Parents perceived teens were ashamed to admit they were struggling with anxiety, depression or suicidal ideation, which are **seen as weaknesses** and need to be concealed. One parent expressed feeling personal shame when her daughter sought mental health care.
- Parents observed teens minimizing their own needs by comparing themselves to peers, “*I’m not the one who really needs this service*”.
- Parents observed stigma against seeking help. Parents observed an attitude from teens that friends who see therapists “**have major problems**” or are “**mentally ill,**” but their teens don’t consider themselves in this type of need. One parent discussed their high school addressing this by normalizing help seeking behavior at freshman orientation.
- Parents worry about **long-term confidentiality**, and how seeking mental health treatment may in some way impact future job prospects.
- Some parents perceived society in general being ‘**unforgiving**’ of mental health issues and that other parents are also reluctant to disclose issues, which models secrecy instead of openness in managing these struggles. At the same time, some observed a growing willingness to discuss mental health, which they associated with reducing stigma.
- With regards to addressing stigma, parents suggested bringing awareness and “*talking about it*”. Several parents suggested changing the word for mental illness, and reframing treatment in a positive way, such as ‘**promote wellness or take time for yourself**’ instead of ‘**suicide prevention.**’

“You don’t want to broadcast a lot of things because if you have any mental issues when you were younger and employers find out about it then that may make you ineligible for getting certain jobs so it’s a particularly unforgiving society in terms of someone ever having had mental health issues and then being able to get back into the mainstream.”

- Parent Participant



Youth and Mental Health Support Accessibility

- Students identified difficulty in all steps of accessing help, from identifying when help is needed to where it is located. One student described, *“I don’t exactly have enough information about when, what is considered like a situation where you should probably look for help or what sort of place you even look.”*
- There is a perception that accessing professional services is **“a big step”** and more serious than approaching peers or teachers.
- Teenagers emphasized **the importance of confidentiality** in seeking mental health services. One student described, *“when they talk to counselors they feel like it’s not confidential at all and so a lot of kids don’t feel comfortable with that.”* The need for confidentiality relates to concerns about stigma, and one’s reputation if seen walking into a counseling office on campus.
- Concern was expressed that accessing suicide hotlines or other services might lead to notifying parents or hospital admissions.
- Students discussed the hesitation to open up to adults they did not know well, and not wanting to repeat their disclosure to multiple people. In describing what could be helpful, youth identified the importance of **time availability and a consistent relationship**.
- Youth described concern about the need for **parents to consent for services**.
- The difficulty in identifying when and how to access help also affects students who are supporting a friend. One student shared about an *“unspoken trust between the two of you where you are the confidant and it’s difficult to know when you should be contacting someone else or when should you be contacting a professional.”*
- Concern expressed about the **quality of school-based counseling services**.

“We have counselors that we can go talk to and of course there’s resources like Star Vista and the Suicide Hotline ... but I don’t think—well friends have told me they’d rather not talk to those counselors at school because if someone sees you walking into the support, like into that, they’re going to automatically assume the worst things and reputation is everything.”
-Student Participant



Youth and School: Accessibility and Description of School-Based Services

Resources youth identify in their schools:

- The school newspaper did a series on individuals struggling with mental health issues.
- One student discussed that their school is building a wellness center on campus, but expressed concerns about the level of visibility on-campus given current stigma.

Barriers to accessing support at school:

- Some students feel there is a mismatch between services that are publicized as available and those that students actually desire or would use.
- **Students don't know where to go** to access services, one student identified having a crisis counselor available on campus that was always busy and could not be easily accessed.
- Some students have tried to access school counseling services and found them **not helpful or limited by need for parental consent**.
- **Presence of peers creates a lack of confidentiality** in accessing support (in counseling offices, classrooms, etc.).
- Some express confusion about the multiple roles guidance counselors fill, and would not want to use their time for personal support during high volume periods such as college application season.
- **"Don't know me:"** students feel like the guidance counselors at school don't know them, are not visible on campus, and wouldn't feel comfortable approaching them with emotional issues.
- Feels like **"talking to a stranger"**: students have little or no existing relationship with staff or teachers to feel comfortable talking about more personal issues.

Resources Named:

- No Limits
- Star Vista (San Mateo)
- Sources of Strength
- Adolescent Counseling Services (Palo Alto)
- Reach Out Care Now
- Challenge Day
- Gator Groups



What resources are youth interested in using:

- Education about types of mental illnesses and common symptoms, and **normalization** of struggling and needing support.
- Students suggested developing **programs centered around peers:**
 - Peers with lived experience, connecting students in need with others who have been through similar experiences in the past.
 - Trained mentorship programs, so students are trained by psychologists to be first responders to their peers.
 - Groups connecting students in need with students or teachers with lived experience.
 - Teens feel it is helpful to have “**some sort of Community,**” characterized by a stable relationship over the course of high school with a trusted teacher, advisor or peer group.
- Students suggested community based resources, such as day retreats or camps centered around mental illness, and Big Brother/Sister programs connecting high school students to recent graduates or college students.
- For on-site counselors, youth preferred **consistency** (“*one person rather than a cycle of interns*”) and more availability in general. Teens highlighted the importance of having a counselor that was a “*good fit*”, with similar personal attributes or interests as themselves.
- Students suggested mandating a limited number of initial counseling sessions, which might overcome confidentiality concerns and reduce stigma.
- Expressed interest in **anonymous online resources**, where their identity and the person they are speaking to is confidential.
- Teens differ on whether they would feel most comfortable seeking help from a peer, teacher or counselor at school if needed.

“...it might be easier to talk about (with) a peer who has gone through the same issues because they know how you feel and they probably won't tell your parents or faculty, because they were in your same position.”

- Youth Participant

Cultural Differences Among Asian Youth and Parents

Interpersonal

- According to some Asian parents, they do not know how to praise or recognize their teenager's efforts, as this was not modeled for them by their parents.
- Some Asian parents discussed that they do not feel prepared for or actively avoid serious discussions with their teens about sexuality, relationships, drugs and alcohol, and mental health issues.
- Some teenagers said they don't feel comfortable talking to their parents; they **fear making their parents worry**, feel guilty, or blame themselves for their child struggling.

Stigma

- Some parents and youth discuss stigma within Asian culture that prohibits mental illness from being discussed within families and communities.
- Some Asian teenagers feel their parents **"don't believe in" mental illness**, and react to it as an excuse for not achieving or have the expectation that teens can make themselves better.
- Some teenagers relate this stigma to differences in the expression of symptoms of depression, and parents may notice them feeling tired or distracted but not depressed or sad.

"Traditionally for Asian parents... they don't really believe in mental health. They think it's just something that you can deal with yourself or something that you made up in your mind like an excuse for not being able to thrive in school or something."

- Youth
Participant

Generation Gap and Different Cultural Values

"I came from China...I think we struggle because we use our experience to judge them and we just run into conflict. The value system and everything family, kids, it's totally different."

- Parent Participant

- Some Asian teens and their parents shared the view that parents immigrating from another country continue to use their experiences to judge their children while recognizing their experiences, values, and culture differ from those their children are exposed to. As one teen describes, “*their experience means that your experience is invalidated.*”
- Some teens describe desired American values as being individualistic, outgoing, and creative, and desired Asian values as being collectivism and reservation.

“Asian American Standards” as Defined by Some Youth

- Hard work
- Education
- Money
- Success
- Pressure to “be the best”
- Pressure to live up to parents’ accomplishments or to utilize resources provided to them that their parents did not have; parents want “*children to excel and to take full advantage of the American dream.*”

“Asian Ethics” as Defined by Some Parents

- Work ethic
- Study hard, get good grades, and go to college
- Make lots of money
- Get married and have children

San Mateo vs. Santa Clara County: Accessibility and Needs

Santa Clara County – Some Improvement:

- Shared feeling that schools are improving, perceive more resources to be available in Palo Alto schools. School has tried to reduce academic stress by changing grading and school schedule.

“ I don’t think the kids know enough about the resources that are there... some of them don’t even know where the school counselor’s office is or that they can access them in times of crisis”

– Parent Participant

Santa Clara County - Many Needs Remain:

- Frustration over lack of community services:
 - “We were looking for a young adult support group in this area and there isn’t one”
 - “There’s zero hospitals in Santa Clara County that will treat your child.”
- Specific suggestions included:
 - Free offsite counseling, nearby but not on campus. (Teens said they would not feel comfortable approaching guidance counselors at school with concerns -“I would never do that.”)
 - Access to peers with lived experience
 - Teen health center for mental and physical health needs, designed with teen input about what they want

San Mateo County – Examples of Services

- At one high school they have one mental health person who oversees 90 peer helpers and those 90 peer helpers go into the ninth grade classes and lecture about suicide prevention, depression, anxiety, body image and more.
- “I run a club at my school for mental health...dedicated to mental health and it’s to create a safe environment for adolescents to open up to each other”
- Multiple students shared that they and their friends had a trusted adult on campus that they would feel comfortable approaching if needed.

San Mateo County – Concerns About Access, Quality & Awareness

- Both parents and teens expressed concern about the quality of on-site school mental health counselors or how helpful they were when accessed.



- Students and parents appreciate there is a breadth of resources available but express concern about student awareness and how easily accessible they are.
- One teen described the School Safety Advocate at school as “always busy” and hard to reach.
- Need for more funding, and perception San Mateo County is not supporting mental health.

"It is the school culture that is pushing us towards more, towards these mental issues that we do struggle with but then the thing is they're not helping to reciprocate that push by having that safety net for us. They're just pushing us, throwing us out of the nest basically just hoping that maybe we can fly but it's just like we can't, not yet anyways."

-Youth Participant

Summary

Both parents and young people in Santa Clara and San Mateo Counties are concerned about mental health and see a need for more education and supportive resources. Mental health stigma is seen as a significant barrier to discussing mental health and accessing services. Students experience intense school, parental, and peer pressure to achieve success academically and personally. In some local Asian families, cultural expectations and generational stigma are barriers to youth feeling comfortable talking with parents about mental health and seeking help.

There are varying degrees of awareness about available mental health resources. Community mental health resources are perceived as being sparse, expensive, and difficult to access. School mental health resources are perceived as insufficient overall. Students hesitate to access school counseling due to issues of access, trust, and stigma. Talking to friends/peers is perceived as a very helpful resource for mental health support, but can be complicated by feelings of academic competition. Students also report feeling overburdened and unsure of how to respond to friends in need.

These findings underscore the tremendous need for coordinated, accessible, confidential, reliable, and youth-friendly mental health outreach and services in San Mateo and Santa Clara Counties and how including the voices of local youth and parents is vital to making programs and services relevant and meaningful.