

### *Our Why*

An estimated 50% of adolescents in the US have struggled with a mental health disorder at some point in their lives. While 10% of adolescents have been diagnosed with a mental health disorder, 70% of those struggling are not able to receive appropriate interventions. It is apparent to us through this knowledge and personal experiences the severity of the current mental health epidemic among our age group. In order to assess the specific needs of those in our school, we conducted a student survey with guidance from our mental health consultant.

This 20-question survey brought much to our attention, the most troubling being the following: 70% percent of students described their mental health as poor or somewhat poor, the majority of the remaining 30% saying average. Over 75% feel that their mental health affects their ability to get work done, and the same number said it also negatively impacts their relationships. 60% of students feel uncomfortable asking for help for their mental struggles, and 75% have never seen a therapist despite feeling like one might be helpful. We also found that an overwhelming number of students are not taking care of themselves by not sleeping and eating enough, overworking themselves, and getting caught in emotionally damaging situations. Using this data, we concluded that our area of focus would be educating students on how to identify a problem in themselves and others, while providing them with simple yet effective solutions to incorporate into their daily lives or use in a time of crisis.

### *Protective Factors*

Our campaign focused mostly on protective factors, as opposed to risk. After meeting with our mental health consultant and conducting our student survey, we developed a list of certain protective factors to address and emphasize throughout our month of posting. Those included positive physical activity and nutrition, engagement with the community, supportive and uplifting relationships, maintaining a safe and comfortable environment, and self care and love. All of our posts highlighted at least one of these protective factors, in hopes of repairing the overall mental, physical, and social well-being of our student body.

### *Be There Training*

Before starting our campaign, all five of our members completed the Be There Certificate training course. Our main takeaway was the five Golden Rules in addressing mental health, which we incorporated throughout our campaign.

The first golden rule is “say what you see”. We learned the need to say what we see - just the facts - instead of making assumptions. This is exactly what we did in our campaign, by sharing

potentially useful information after detailed research. We also taught students how to identify when they are caught in a situation that may be harmful to their mental health, and in a way, “say what *they* see”. The second golden rule is “show you care”. We learned the impact of our presence and words. One of our initial goals for the project was reassuring someone who might be feeling alone that they are known and cared for. Through our diverse and user-friendly range of content, we emphasized creating a safe space for our audience to find help and comfort. The third golden rule is “hear them out”, which taught us to listen to each others’ ideas as well as feedback from those around us. Many of our posts included daily challenges that asked our audience to assess themselves and hear us and themselves out to make small decisions that can greatly impact their mental health. As we alternated posting days, each of our five members heard each other out by contributing some of our own perspectives in our posts. The fourth golden rule is “know your role”. We are not qualified to take on the role of a certified mental health professional, and can not diagnose or treat any disorder. However, as students who can relate to our target audience, we were able to start the conversation, break stigma, and spread awareness. We hoped to provide a different type of support than the adult help our school is used to hearing about, and instead provide our community with the student’s perspective. The fifth and final rule mentioned is “connect to help”, in other words, finding the best means of support for yourself or someone you know who is struggling. We knew that while many people needed help, not everyone knew about or could access resources. So, we found resources that our community could easily access, such as free support systems, as well as simple but effective tasks everyone can do to improve their overall mental well-being.

### *Mental Health Consultation*

The mental health professional we worked with in order to effectively complete our project was Susie Kroll, a national speaker, educator, and local crisis response counselor. During our consultation, we discussed a variety of topics and gained many useful pieces of information. She highlighted the need to find the best means of connecting with our likely uninterested teen audience, and advised us to emphasize the fact that all of our resources and tips could be used for yourself as well as a loved one who may be struggling. We’ve found that people are more likely to care if you attach the well-being of someone other than themselves to the issue. We talked about how our social media campaign should provide options for people who may not have access to traditional mental health resources, like therapy. Susie suggested we get creative with our resources and tips, and informed us of some specific ones to consider. One of the final topics of discussion in our consultation was the vitality of human connection in obtaining good mental health. We promoted this in numerous of our posts, by encouraging school involvement and social interaction.

Throughout this process, we utilized a variety of methods to ensure quality management. In order to maintain accuracy, our research was conducted using a variety of sources. By analyzing

the business feature on Instagram, we could effectively monitor what our audience engaged with and what they did not, and use this information to alter and cater our future posts to our audience. We also used many google workspace applications to assist us in our teamwork. Google Forms was used to survey member availability for meetings, we had a shared Google Calendar to keep track of tasks, and we had multiple shared Google Documents where we could collaborate on research, ideas for posts, and get feedback from each other. In order to best engage with our audience, we incorporated a variety of interactive pieces into our campaign. We included multiple anonymous activities: a New Year's Resolution form, a check-in form, and a school-wide art contest.

In regards to internal improvements, we are working on advancing systems already in place. For example, we have a suicide prevention training program at the high school level, that students are nominated to participate in and then share their knowledge with the health classes. We would like to add this program to the middle schools as well, we are going to open up the opportunity of this training to all students, and we're continuing to discuss adding more things that address issues other than just suicide prevention. For mental health training, we brought up how an overwhelming number of students feel triggered by how they are talked to and treated by teachers, and discussed the possibility of providing them with more training.

Overall, our efforts to raise awareness to mental health in our local community were even more impactful than we could've ever imagined. By acquiring the attention of local policymakers we have been able to work with the school district to make necessary improvements to mental health initiatives in all of our districts' schools, not just our own. We've also strengthened our school community and created safe spaces to learn about mental health and share their own experiences, enabling us to **be aware** of the prominent mental health issues in our community, and **be there** for ourselves and those around us.

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