Non-systemic barriers to young people's use of mental health services

Advocacy Paper

Overview

Mental health issues in young people are common but undertreated. Mental health-related stigma and lack of knowledge about mental health services are commonly identified as barriers to young people seeking help from services. However, simple interventions can reduce stigma, increase knowledge and increase help-seeking intention. The Queensland Family and Child Commission (QFCC) advocates for a focus on reducing stigma and increasing knowledge of available supports and services to promote help-seeking behaviours by young people with mental health concerns.

Mental health issues

Incidence and importance

Mental health issues are common among young people. According to Australian Bureau of Statistics, in 2020 – 21, 40 per cent of people aged 16 – 24 years had experienced a mental disorder in the past 12 months (ABS 2022). Of the nearly 6,000 young people aged 13 – 18 years who took part in the Queensland Family and Child Commission's Growing Up in Queensland (GUiQ) survey in 2020, 33 per cent reported having an emotional or mental health condition (QFCC 2021).

27% of young people say mental health is the most important issue for people their age.

Young people identify mental health as a critical issue. Of the participants aged 13 – 18 years in the GUiQ 2020 survey, 27 per cent said mental health is the most important issue for young people, 13 per cent said adults need to take more action on youth mental health and 8 per cent said their mental health could stop them achieving their goals (QFCC 2021).

The most important issue for young people today is mental health, and not knowing what to do or who to talk to about their struggles. (GUiQ 2020 participant)

Use of mental health services

Use of mental health services is important. Evidence suggests professional mental health support can:

- reduce depressive symptoms (Oud et al. 2019) and anxiety (Telman et al. 2020), two of the most common mental health issues for young people in Australia (AIHW 2021)
- reduce self-harm and increase emotion regulation skills (Rosenbaum Asarnow et al. 2021)

Mental health services are effective but underused.

Queensland Family & Child Commission

Queensland Government

- reduce symptoms of post-traumatic stress disorder, depression and anxiety in young people with PTSD (Carrion et al. 2013)
- reduce suicide ideation (Robinson et al. 2018)

Of course, not all services are effective for all young people. For example, services differ in their ability to engage young people who have experienced many adverse childhood experiences, trauma and disrupted attachment (common among young people in the out-of-home care system) (McDermott 2021). In addition, services that can support for these young people may not be available in rural areas.

Many young people with mental health issues do not seek help from mental health services. The second Australian Child and Adolescent Survey of Mental Health and Wellbeing found 65 per cent of young people aged 12 – 17 years who had mental health disorders had used a service in the past 12 months (Lawrence et al. 2015). Mission Australia found only 42% of young people aged 15 – 19 years with mental health issues would seek support from mental health professionals (Brennan et al. 2021).

Barriers to use of mental health services

Young people encounter several barriers to seeking mental health support. Systemic barriers relate to characteristics of the health system, services and providers. Systemic barriers often mentioned by young people include waiting times and costs to access services (Salaheddin and Mason 2016; Havvik et al 2017). The significance of such barriers has been recognised by government. The Productivity Commission's report on mental health services notes the cost and wait times for services make access difficult and describes how these barriers can contribute to worsening mental health and suicide (Productivity Commission 2020).

The government is responding to systemic barriers through several initiatives. In recognition of the effect of cost on help-seeking, the Federal Government's Better Access initiative provides 10 Medicare-subsidised psychology appointments per year; at the height of the COVID-19 pandemic, the government doubled the number of subsidised appointments that could be accessed (Department of Health and Aged care 2023). In addition, the federal budget for 2022 – 23 funds expansion of the headspace network to address wait times experienced by young people seeking help (Australian Government 2022). Systemic barriers will likely remain the subject of many initiatives aimed at increasing young people's use of mental health services.

Other barriers relate to characteristics of the help-seeker (although systemic barriers likely interact with these non-systemic barriers). These include a preference for self-reliance, reluctance to express emotion and concerns about confidentiality (Gulliver et al. 2010). While noting there are complex interactions between various barriers and demographic factors, this paper addresses mental health-related stigma and lack of knowledge about mental health services – two commonly identified barriers to help-seeking. In this paper, help-seeking refers to seeking support from mental health professionals and services, rather than from friends and family.

Stigma

Stigma is a negative perception of someone based on a characteristic viewed as undesirable. Stigma involves an "us" versus "them" view, whereby all individuals with the characteristic are viewed as similar to each other and different from the rest of society. Members of stigmatised groups are stereotyped and often experience discrimination (Link and Phelan 2021).

Several forms of mental health-related stigma influence help-seeking for mental health issues. Research suggests people are less likely to seek help if they:

- hold stigmatised views of people with mental illness (Shnyder et al. 2013)
- believe others hold stigmatising views of people with mental illness (Barney et al. 2006)
- experience internalised stigma, such as shame, regarding their mental health issues (Clement et al. 2014)
- hold stigmatised views of people who seek treatment for mental health issues (Clement et al. 2014)

The most important issue for young people today is mental health and the stigma around it, as many young people are too afraid to speak out. (GUiQ 2020 participant)

Perception of stigma is common among young people in Australia. One study found approximately 21 per cent of young people aged 12 – 17 years believe mental illness is not accepted by society, and 55 per cent of young adults aged 18 – 25 years share this belief (Coates et al. 2019).

There is still a lot of stigma and shame surrounding the individuals who struggle with their mental health. (GUiQ 2020 participant)

Stigma may be an especially significant barrier for specific cohorts of young people, based on cultural beliefs, prior experience and community factors. First Nations Australians have told researchers about the shame associated with mental illness. They have described being escorted to hospital by police officers when experiencing mental health concerns (Heard et al. 2022), an experience that likely exacerbates shame. For First Nations Australians, stigma can also relate to the belief that mental illness is a consequence of cultural transgression (Vicary and Westerman 2004). Stigma also appears to be especially worrying for young people in rural communities. Young people have said the social visibility in rural communities intensifies their experience of stigma and discourages them from seeking help (Aisbett et al. 2007).

Interventions to reduce stigma

The quality of research regarding stigma-reduction interventions is still developing (Morgan et al. 2021). However, research suggests various interventions have the potential to reduce young people's stigma towards people with mental illness and people who seek treatment. These outcomes are important, given the previously described finding that these forms of stigma are associated with decreased help-seeking. Outcomes of stigma-reduction interventions have also included increased help-seeking intentions.

Successful interventions have focused on:

- providing information about mental health (Thompson et al. 2021)
- encouraging young people to talk about mental health (Lindow et al. 2020)
- increasing empathy for people experiencing mental illness (Dillinger 2021)
- identifying relatable and admired public figures with mental illness (Dillinger 2021)
- reducing the "us" versus "them" dichotomous view towards people with mental illness (Dillinger 2021)
- educating participants about stigma and its consequences (Gaiha et al. 2021)

A variety of resources and activities were used in the stigma-reduction interventions referred to above. These include posters, advertising on social media and in movie theatres, interactive lectures and youth-led role plays. Research suggests contact between participants and a person with a lived experience of mental illness is a particularly helpful component of stigma-reduction interventions. For example, workshops might be particularly effective if led by a person with lived experience of mental illness (Morgan et al. 2021).

Lack of knowledge

Lack of knowledge about mental health services and how to navigate the health care system is a common barrier to young people seeking help (Radez et al. 2021). Of the young people aged 13 – 18 years who took part in GUiQ 2020, only half said they know there are services in the community and online that can support them when they are stressed (QFCC 2021).

I think leaders should take more action on advising teenagers about mental health and what services are available to them. (GUiQ 2020 participant)

I was entirely unaware there were mental health facilities for children that were free to attend until I asked my school psychologist. (GUiQ 2020 participant)

Even for young people who are aware of available services, the mental health care system can be difficult to navigate. Participants in GUiQ 2020 described confusion about the process of seeking help, confidentiality and parental consent. They also described the mental health system as intimidating (QFCC 2021).

I would like to know [how to get] mental health support without having to tell parents or carers. (GUiQ 2020 participant)

All of our systems for mental health are daunting and they are unapproachable. (GUiQ 2020)

Unfortunately, those who most need support may be least able to navigate the mental health care system. For example, people with high levels of psychological distress are less likely to experience the health system as easy to navigate compared with people with lower levels of distress (ABS 2019). Young refugees may also be especially disadvantaged by lack of knowledge about mental health support. Research indicates young refugees may be more likely than the general youth population to experience mental health issues (Bronstein and Montgomery 2010) but are often unaware of available services (Posselt et al. 2017).

Interventions to increase knowledge

Relatively simple interventions and resources have been successful in increasing young people's knowledge about mental health services. Young adults have told researchers they have learnt about mental health services through posters at university, pamphlets in community settings, and advertisements on websites and products (e.g., cereal boxes) (Stunden et al. 2020).

Young people who took part in GUiQ 2020 said they want to receive mental health education in school (QFCC 2021). Research suggests mental health education in schools has positive impacts on mental health (Wells et al. 2003), including increased knowledge of sources of mental health support (Skre et al. 2013).

Implications

The reviewed research identifies several factors for consideration during development of interventions aimed at encouraging young people to seek help for mental health issues.

Various types of stigma affect help-seeking
Young people are less likely to seek help if they hold stigmatised views towards others with mental illness, towards their own mental health and towards help-seeking; and if they believe others hold stigmatised views regarding mental illness. Addressing several types of mental health-related stigma may be more effective than focusing on one type of stigma.

Young people need information about service availability and access
Many young people are not aware of local services. Young people want information about the process of help-seeking, confidentiality and parental consent.

Some cohorts are particularly unlikely to seek help
Some cohorts of people have a greater incidence of mental health issues but a lower likelihood of seeking help compared to other people. Targeted interventions may be needed to encourage help-seeking among at-risk cohorts. Culture is an important consideration.

Simple resources and interventions can be effective
Interventions to reduce mental health-related stigma and increase knowledge of mental health services need not be complex. For example, social media advertising and interactive lectures can produce positive outcomes.

Schools may be appropriate settings for interventions
School-based interventions can be effective in supporting young people to seek help for mental health issues. In addition, young people have expressed a desire for mental health education to be delivered in schools.

Conclusion

Mental health concerns are common in young people. Professional support can be helpful, but many young people do not seek help. Barriers to help-seeking include mental health-related stigma and lack of knowledge regarding the mental health care system. However, simple interventions can address these barriers. The QFCC advocates for inclusion of stigma and knowledge as targets in interventions aimed at increasing help-seeking for mental health concerns in young people.

References

ABS (Australian Bureau of Statistics) (2022) *National Study of Mental Health and Wellbeing. Summary statistics on key mental health issues including the prevalence of mental disorders and the use of services*, ABS website, accessed 10 November 2022.

ABS (2019) *National Health Survey: health literacy*, ABS website, accessed 10 November 2022.

AIHW (Australian Institute of Health and Wellbeing) (2021) *Australia's youth: mental illness*, AIHW website, accessed 10 November 2022.

Aisbett DL, Boyd CP, Francis KJ, Newnham, K and Newnham K (2007) 'Understanding barriers to mental health service utilization for adolescents in rural Australia', *Rural and Remote Health,* 7(1), https://doi.org/10.22605/RRH624.

Australian Government (2022) *Paying for what's important*, Budget website, accessed 26 October 2022.

Barney LJ, Griffiths K, Jorm A and Christensen H (2006) 'Stigma about depression and its impact on help-seeking intentions', *Australian and New Zealand Journal of Psychiatry,* 40(1):51-54, https://doi.org/10.1111/j.1440-1614.2006.01741.x.

Brennan N, Beames JR, Kos, A, Reily N, Connell C, Hall S, Yip D, Hudson J, O'Dea B, Di Nicola K and Christie R (2021) *Psychological distress in young people in Australia fifth biennial youth mental health report: 2012 – 2020*, Mission Australia, accessed 10 November 2022.

Bronstein I and Montgomery P (2010) 'Psychological distress in refugee children: a systematic review', *Clinical Child and Family Psychology Review,* 14(1):44-56, https://doi.org/10.1007/s10567-010-0081-0.

Carrion VG, Kletter H, Weems CF, Berry, RR and Rettger JP (2013) 'Cue-centered treatment for youth exposed to interpersonal violence: a randomized controlled trial', *Journal of Traumatic Stress,* 26(6):54-62, https://doi.org/10.1002/jts.21870.

Clement S, Schauman O, Graham T, Maggioni F, Evans-Lacko S, Bezborodovs N, Morgan C, Rusch N, Brown JSL and Thornicroft G (2014) 'What is the impact of mental health-related stigma on help-seeking? A systematic review of quantitative and qualitative studies', *Psychological Medicine,* 45(1), http://dx.doi.org/10.1017/S0033291714000129.

Coates D, Saleeba C and Howe D (2019) 'Mental health attitudes and beliefs in a community sample on the Central Coast in Australia: barriers to help seeking,' *Community Mental Health Journal,* 55(3):476-486, https://doi.org/10.1007/s10597-018-0270-8.

Department of Health and Aged Care (2023) *Better Access initiative, Australian Government Department of Health and Aged Care website,* accessed 10 January 2022.

Dillinger RL (2021) 'Addressing the stigma surrounding serious mental illness in adolescents: a brief intervention', *Psychiatric Quarterly,* 91, https://doi.org/10.1007/s11126-020-09787-6.

Gaiha SM, Salisbury TT, Usmani S, Koschorke M, Raman U and Petticrew M (2021) 'Effectiveness of arts interventions to reduce mental-health-related stigma among youth: a systematic review and meta-analysis', *BMC Psychiatry,* 21, https://doi.org/10.1186/s12888-021-03350-8.

Gulliver A, Griffiths KM and Christensen H (2010) 'Perceived barriers and facilitators to mental health help-seeking in young people: a systematic review', *BMC Psychiatry,* 10, https://doi.org/10.1186/1471-244X-10-113.

Haavik L, Joa I, Hatloy K and Stain HJ (2017). 'Help seeking for mental health problems in an adolescent population: the effect of gender', *Journal of Mental Health,* 28(5):1-8, https://10.1080/09638237.2017.1340630.

Heard TR, McGill K, Skehan J and Rose B (2022) 'The ripple effect, silence and powerlessness: hidden barriers to discussing suicide in Australian Aboriginal communities', *BMC Psychology,* 10(23), https://doi.org/10.1186/s40359-022-00724-9.

Lawrence D, Johnson S, Hafekost J, Boterhoven De Haan K. Sawyer M, Ainley J and Zubrick SR (2015) *The mental health of children and adolescents. Report on the second Australian Child and Adolescent Survey of Mental Health and Wellbeing*, Department of Health and Aged Care, accessed 10 November 2022.

Lindow JC, Hughes JL, South C, Minhajuddin A, Gutierrez L, Bannister E, Trivedi MH and Byerly MJ (2020) 'The Youth Aware of Mental Health (YAM) intervention: impact on help-seeking, mental health knowledge, and stigma in US adolescents', *Journal of Adolescent Health,* 67(1):101-107, https://doi.org/10.1016/j.jadohealth.2020.01.006.

Link BG and Phelan JC (2001) 'Conceptualizing stigma', *Annual Review of Sociology,* 27:363-385, https://doi.org/10.1146/annurev.soc.27.1.363.

McDermott B (2021) 'Highly vulnerable infants, children and young people: a joint child protection mental health response to prevent suicide', report to the Queensland Family and Child Commission, accessed 27 January 2023.

Morgan AJ, Wright J, Reavely NJ (2021) 'Review of Australian initiatives to reduce stigma towards people with complex mental illness: What exists and what works?', *International Journal of Mental Health Systems,* 15, https://doi.org/10.1186/s13033-020-00423-1.

Posselt M, McDonald K, Procter N, de Crespigny C and Galletly C (2017) 'Improving the provision of services to young people from refugee backgrounds with comorbid mental health and substance use problems: addressing the barriers', *BMC Public Health,* 17(1), https://doi.org/10.1186/s12889-017-4186-y.

Oud M, de Winter L, Vermeulen-Smit E, Bodden D, Nauta M, Stone L, van den Heuvel M, Al Taher R, de Graaf I, Kendall, T, Engels R and Stikkelbroek Y (2019) 'Effectiveness of CBT for children and adolescents with depression: a systematic review and meta-regression analysis', *European Psychiatry,* 57:33-45, https://doi.org/10.1016/j.eurpsy.2018.12.008.

Productivity Commission (2020) 'Mental health', *Productivity Commission Inquiry Report no. 95*, Productivity Commission, Australian Government.

QFCC (Queensland Family and Child Commission) (2021) *Voices of hope: Growing up in Queensland 2020,* The State of Queensland.

Radez J, Reardon T, Creswell, C, Lawrence PJ, Evdoka-Burton G and Waite P (2021) 'Why do children and adolescents (not) seek and access professional help for their mental health problems? A systematic review of quantitative and qualitative studies', *European Child and Adolescent Psychiatry,* 30:183-211, https://doi.org/10.1007/s00787-019-01469-4.

Robinson J, Bailey E, Witt K, Stefanac N, Milner A, Currier D, Pirkis J, Condron P and Hetrick S (2018) 'What works in youth suicide prevention? A systematic review and meta-analysis', *eClinical Medicine,* 4-5:52-91, https://doi.org/10.1016/j.eclinm.2018.10.004.

Rosenbaum Asarnow J, Berk MS, Bedics J, Adrian M, Gallop R, Cohen J, Korslund K, Hughes J, Avina C, Linehan MM and McCauley E (2021) 'Dialectical behavior therapy for suicidal self-harming youth: emotion regulation, mechanisms, and mediators', *Journal of the American Academy of Child and Adolescent Psychiatry,* 60(9):1105-1115, https://doi.org/10.1016/j.jaac.2021.01.016.

Salaheddin K and Mason B (2016) 'Identifying barriers to mental health help-seeking among young adults in the UK: a cross-sectional survey', *British Journal of General Practice,* 66(651):e686-e692, https://doi.org/10.3399/bjgp16X687313.

Shnyder N, Panczak R, Groth N and Schultze-Lutter F (2017) 'Association between mental health-related stigma and active help-seeking: systematic review and meta-analysis', *The British Journal of Psychology,* 210(4):261-268, https://doi.org/10.1192/bjp.bp.116.189464.

Skre I, Friborg O, Breivik C, Johnsen LI, Arnesen Y and Wang CEA (2013) 'A school intervention for mental health literacy in adolescents: effects of a non-randomized cluster controlled trial', *BMC Public Health,* 13, https://doi.org/10.1186/1471-2458-13-873.

Stunden C, Zasada J, VanHeerwaarden N, Hollenberg E, Abi-Jaoudé A, Chaim G, Cleverley K, Johnson A, Levinson A, Lo B, Robb J, Shi J, Voineskos A and Wiljer D (2020) 'Help-seeking behaviors of transition-aged youth for mental health concerns: qualitative study', *Journal of Medical Internet Research,* 22(10), https://doi.org/10.2196/18514.

Telman LGE, Van Steensel FJA, Verveen AJC, Bogels SM and Maric M (2020) 'Modular CBT for youth social anxiety disorder: a case series examining initial effectiveness', *Evidence-Based Practice in Child and Adolescent Mental Health,* 5(1), https://doi.org/10.1080/23794925.2020.1727791.

Thompson A, Hollis S, Herman KC, Reinke WM, Hawley K and Magee S (2021) 'Evaluation of a social media campaign on youth mental health stigma and help-seeking', *School Psychology Review,* 50(1):36-41, https://doi.org/10.1080/2372966X.2020.1838873.

Vicary D and Westerman T (2004) ''That's just the way he is': some implications of Aboriginal mental health beliefs', *Australian e-Journal for the Advancement of Mental Health,* 3(3), https://doi.org/10.5172/jamh.3.3.103.

Wells J, Barlow J and Brown S (2003) 'A systematic review of universal approaches to mental health promotion in schools', *Health Education,* 103(4):197-220. https://doi.org/10.1108/09654280310485546.