# Changing the Narrative Together: Three Effective Strategies for Talking about Youth Mental Health



Since the beginning of the COVID-19 pandemic in 2020, youth mental health has become prominent in our public discourse. And for good reason: reports of depression, anxiety, and rates of self-harm and suicide among young people have surged over the past three years.

Unfortunately, the current narrative around this issue activates stereotypes of young people as vulnerable, making the issue seem insurmountable, and rarely offers solutions. It also over-emphasizes individuals' experiences and choices, rather than collective responsibility.

We need a new narrative that makes it clear that this is a *public* issue that we can address by designing better supports for young people, and that we all share responsibility in addressing this challenge.

## **Three Cultural Mindsets That Hinder Progress**

Three cultural mindsets are currently influencing perceptions about—and limiting action on— youth mental health.

*Individualism* is the belief that people are responsible for their own outcomes and achieve success and wellbeing exclusively through willpower, internal fortitude, and the ability to "beat the odds." This mindset obscures the role of our environments in shaping our mental health, and distracts from thinking about the resources and supports we need to address this issue.

We unintentionally cue individualistic thinking when we tell stories of individual perseverance, such as heroic tales of the special person who makes a difference against all odds. We reinforce this mindset by relying on words like "choice," "control," and "decisions" that suggest individual behaviors solely determine mental health outcomes. **Cultural mindsets** are deep, broadly shared patterns of thinking that shape how we understand the world and how we make decisions. Cultural mindsets are highly durable, and are tied to cultural and social practices and institutions with deep, historical roots.

*Fatalism* is the sense that it is impossible to solve youth mental health issues because the problem is too large and difficult to address. This mindset depresses our willingness to engage with the issue and saps support for solutions. While "crisis" framing may raise awareness of an issue, it does so at the expense of the sense that things can be done to improve the lives of young people.

We cue fatalistic thinking when we use a "crisis" frame and dire states that focus entirely on the problem without offering solutions or indicating that change is possible.

*Otherism* is the assumption that adolescents are a "them" to our "us" and that young people struggling with mental health issues are a particularly different group of outsiders. In addition to stigmatizing young people, othersim denies agency and excludes young people from being part of efforts to address this issue.

We inadvertently fall into the otherism trap when we use pronouns like they/them/their and talk about young people as vulnerable and unable to play a role in addressing mental health challenges.

## Three Effective Strategies for Communicating about Youth Mental Health

#### 1. Make context the center of your communications.

We can counterbalance people's tendency to focus on individual will, choice, and responsibility by putting the contexts and communities young people live within at the center of our communications, and by showing what happens when we change these contexts to be more supportive.



Talking about how the <u>environments young people</u> <u>live in</u> contribute to mental health challenges, and how systematic support through policies, programs, or funding can help ensure young people have what they need to thrive.

### 🗴 Avoid

Telling individual stories about how young people decided to "take control" of their mental health and overcame challenges through willpower.

#### 2. Balance urgency with efficacy by offering solutions.

We counterbalance fatalism by offering clear, concrete and collective solutions people can see themselves playing a part in.



Talking about health—not just illness—and creating  $\rightarrow$  a sense of efficacy by offering concrete solutions.

×	Avoid	

Cuing fatalistic thinking by relying on <u>crisis language</u> and focusing on problems without solutions.

#### 3. Emphasize common experiences and the collective "we."

To counter otherism, we need to build a sense of collectiveness—a "we" that can stand up to the tendency to see adolescents as "them." We do this by emphasizing common experiences, making it clear that young people have ideas and the power to solve problems, and using we/us/our pronouns instead of them/they/their.

<b>?</b>	Advance
----------	---------

Talking about our common experiences and collective responsibility, including <u>youth</u> <u>engagement in their communities</u>.



Othering language like they/them/those and referring to young people as "vulnerable" or "at risk."