Evidence-Based Programs & Measures Of Mental Health Literacy among Adolescents: A Narrative Research Review

Roxana Naemi
Sabrina Hawa
Chloe Walker

Follow this and additional works at: https://scholarscompass.vcu.edu/uresposters

© The Author(s)

Downloaded from
https://scholarscompass.vcu.edu/uresposters/298

This Book is brought to you for free and open access by the Undergraduate Research Opportunities Program at VCU Scholars Compass. It has been accepted for inclusion in Undergraduate Research Posters by an authorized administrator of VCU Scholars Compass. For more information, please contact libcompass@vcu.edu.
BACKGROUND & SIGNIFICANCE

Unrecognized and/or untreated mental disorders can lead to a variety of negative outcomes among youth (Mcluckie et al., 2014).

Higher education and younger age have been related to better mental health literacy and higher rates of recognition of common mental disorders (Wang et al., 2013).

Improving mental health knowledge (literacy) is one important component in facilitating help-seeking behaviors and early identification of mental health disorders that increases the possibility of positive outcomes (Kucher, 2011).

Reducing mental illness stigma and improving mental health literacy are national objectives that are necessary to enhance the health outcomes of adolescents and future generations of young adults (U.S. Department of Health and Human Services, 1999, 2000; President’s New Freedom Commission on Mental Health, 2003)

Efforts that focus on mental health literacy may prompt young people to recognize symptoms of mental health problems and seek early care or treatment (Olsson & Kennedy, 2008).

Overall, mental health literacy is an important mechanism as it aids individuals to better understand their own mental health and it enables them to act appropriately once knowing and understanding this information.

Thus, the current review was conducted to systematically examine existing programs and measures used to assess mental health literacy.

ABSTRACT

This current narrative review research aims to provide a review of programs and measures that assess the principles of mental health literacy among adolescents. Mental health literacy can be defined as the degree to which an individual processes and understands mental health information and is able to seek further treatment (Olsson & Kennedy, 2010) and varies based upon age (Farrera et al., 2008), sex differences and relationships with peers (Burns & Rupee, 2006), and attitudes towards mental health (Olsson & Kennedy, 2010). Using PsycINFO to find research to date, findings of the review indicated that for evidence-based programs using mental health literacy, adolescents had a better understanding of mental health literacy post-program, whereas when they were first interviewed through surveys and questionnaires. Additionally, the review indicated that more studies assessing psychometrics of existing measures used to assess mental health literacy among adolescents are warranted. Discussion will center on programs and methodological approaches used to examine mental health literacy among adolescents and the need for implementing more programs promoting mental health literacy within schools.

PROGRAMS ON MENTAL HEALTH LITERACY

“In Our Own Voice” (Pinta-Foltz et al., 2011) - program on mental health literacy with female adolescents aged 13-17 year olds

➢ Class-setting
➢ Narrative storytelling, discussions, video presentation
➢ Included 5 components
  ▪ Dark Days - first experience with symptoms of mental illness
  ▪ Acceptance - how the person has accepted the mental illness
  ▪ Treatment - what therapies and medications work for the person
  ▪ Coping - daily activities that help the person self-manage
  ▪ Successes, Hopes, and Dreams - how the person overcomes the challenges and progresses toward personal goals

➢ The Guide (Mcluckie et al., 2014) - program on mental health literacy among adolescents in ninth grade

➢ Health class setting
➢ Pre and post-tests were given prior to The Guide program; 28 items assessing general mental health knowledge, presented through T/F and “Do Not Know” format & 8 items examining attitudes related to mental illnesses
➢ The Guide included: six modules which were a mix of didactic instruction, group discussion, group activities, self-directed learning and video presentations
➢ Topics: understanding information, stigma & impact of mental illnesses; help-seeking & importance of positive mental health
➢ 10 - 12 hr of class time; 2 month follow up

➢ The Youth Education and Support (YES; Riebschleger et al., 2019) program on mental health literacy among adolescents in grades 5-8

➢ Classroom setting
➢ Included pre/post survey using the Knowledge of Mental Illness and Recovery Scale (KMIN, Riebschleger et al., 2019 see below)
➢ Program includes ten 50 min sessions; Topics included: risks/causes, specific mental health disorders (e.g., major depression, recovery)
➢ Activities included: Discussion, hands on active learning, customize individual coping plans with illustrations, team competition activities, movie clips, in class demonstrations, take-home education documents to share with parents.

MEASURES/SURVEYS ON MENTAL HEALTH LITERACY

“Friends in Need” questionnaire (Burns & Rapee, 2006)

➢ Validated with 15-17 yr old adolescents
➢ Five brief vignettes of what young people going through a range of life difficulties and their responses to the difficulties.
➢ Answer questions about how worried they were about each young person in the vignettes; what they “think is the matter”, what they thought were the strongest hints to indicate that the young person was experiencing emotional difficulties, how long they thought it would take for each person to feel better, and who they thought the young person needed help from to cope with their problems.
➢ Avoided giving participants multiple-choice answers to questions. Encouraged to respond with own words

➢ Knowledge of Mental Illness and Recovery scale (KMIN, Riebschleger et al., 2019)

➢ Validated with 10-16 aged adolescents
➢ 36 questions. Eighteen are set in a true and false format. Eighteen use a four-item multiple choice response set.

➢ Mental Health Literacy Scale (see Campos et al., 2016)  

➢ Validated with diverse group of 11-17 aged adolescents
➢ 33 items that looked at knowledge/stereotypes, first-aid skills, and self-help strategies; rated on a 5-point Likert type scale

➢ Mental Health Knowledge Questionnaire (MHKQ) and the Case Assessment Questionnaire (CAQ; Wang et al., 2013)

➢ Assessed mental health literacy via self reports
➢ Residents aged 15 or above selected from all 19 districts in Shanghai
➢ MHKQ - 20 items; Awareness of promotion activities, Beliefs, Normalization of problems, Mental health & wellbeing, Incorrect Beliefs about cause of mental disorders; Responses - Yes/No
➢ CAQ - presented 5 cases and 9 question per case on knowledge and attitudes of mental illnesses

DISCUSSION

Lack of mental health literacy is a major factor in adolescents development and can negatively impact their mental health and their coping mannerisms.

The majority of existing methods for implementing mental health literacy were conducted in classrooms by teachers.

Previous research on mental health literacy programs indicated that there were preliminary positive effects on adolescent mental health outcomes (Skre et al., 2013). Therefore, given these positive outcomes, more work is needed that further understand the effects of these programs.

The majority of participants that received measures were students in primary and secondary school, ages 12-17+. Measures included self report-questionnaires provided by their teachers and through school based programs. Among 69 mental health literacy measures that evaluated general knowledge about mental health, knowledge on specific disorders, only 14 measures were validated. These 14 measures evaluated 6 measures of general mental health knowledge (Wei et al., 2015). Of these 14 measures that examined mental health knowledge, the current work concluded that only 3 measures of general mental health knowledge were valid for our study.

As previously noted many of the programs were focused in schools and were given to adolescents by teachers. It may also benefit the parents of the students to have knowledge of mental health literacy. It may be important that adolescents can always go to them to talk about what is going on and to help the parent understand how to help their child. Future work could assess parent-report of their own mental health literacy to examine links among youth.

Overall, it seems that among youth studies have found that greater mental health literacy is linked to more favorable attitudes toward people with mental health disorders and to a greater willingness to provide help to someone with a mental disorder. Additionally, educational programs aimed at increasing mental health literacy among adolescents reduces negative beliefs and attitudes towards people with mental disorders (Evans-Lacko et al., 2010; Jorm, 2012). Which highlights the importance of focusing on mental health literacy during adolescence.

IMPLICATIONS

Within the current review, programs and measures have been identified that can benefit mental health literacy amongst adolescents as these programs and measures help improve and also allow more insight and knowledge about their mental health.

This review provides important information on what already exists in order to better plan future programs and questionnaires that benefit adolescents, so that the field can avoid repeating existing efforts.