

SUPPORT GIRLS' MENTAL HEALTH

Girls Inc. is committed to advancing the rights and opportunities of girls and young women, with a particular focus on the needs of girls from underserved communities, girls of color, and LGBTQ+ girls. Informed by the voices of girls and working alongside them, we advocate for policies and practices that combat systemic racism, sexism, and other social and economic barriers to girls' success.

ABOUT THE ISSUE

Mental Health is as Important as Physical Health

Mental health is important at every stage of life and is critical for a girl's success in school. Unfortunately, 1 in 5 teens reports suffering from a mental illness, and many do not feel comfortable asking for help because of societal stigma; others simply may not have access to quality, affordable care.¹ **Girls Inc. affiliates report that natural disasters, COVID-19, economic instability, racial injustice, social unrest, immigration raids, and increases in hate crimes and discrimination have contributed to trauma and mental health concerns for girls.**

The COVID-19 pandemic has exacerbated mental health issues, particularly among youth. **Over the course of the pandemic, nearly 40% of the people who have used mental health screening resources identified themselves as ages 11-17.**² From February 21 to March 20, 2021, emergency room visits involving suspected suicide attempts were 50.6% higher among girls aged 12-17 years old than during the same period in 2019.³

Not addressing mental health issues can have dangerous consequences for girls. Suicide is the second leading cause of death for youth between the ages of 10-24,⁴ and the rate of girls committing suicide has tripled in the past 15 years.⁵

Mental Health Disproportionately Affects Marginalized Communities

Mental illness disproportionately impacts girls, people of color, people from low-income communities, and LGBTQ+ people. According to the 2019 Youth Risk Behavioral Surveillance System, girls were more likely than boys to seriously consider attempting suicide,⁶ and Black and Hispanic girls were more likely than their white counterparts to feel sad or hopeless.⁷

Additionally, **those who identified in the survey as lesbian, gay, or bisexual were more likely than their straight-identifying counterparts to feel sad or hopeless and seriously consider attempting suicide.**⁸ Individuals who experience poverty in childhood also have an increased risk for adverse health and developmental outcomes throughout life, including negative cognitive and behavioral outcomes and higher rates of depressive and anxiety disorders.⁹ Youth of color are more likely to experience adversity in childhood, and face disparities in access to diagnosis and treatment.¹⁰

Racism and the Effects of Trauma

Trauma is an experience of an actual, perceived or threatened negative event or series of events that cause emotional pain and overwhelm an individual's ability to cope.¹¹ **Black, Indigenous, and People of Color (BIPOC) children are particularly at-risk for trauma.** In the United States, 61% of Black children and 51% of Hispanic children have experienced at least one adverse childhood experience (ACE), compared to 40% of white children.¹² Children from low-income families and minority backgrounds—whether based on race, socio-economic standing, or sexual orientation—are in particular need of support in the fight against ACEs.¹³

Racism can also take a toll on mental health, particularly for children and adolescents. In the United States, BIPOC people are most vulnerable to racial trauma, or race-based traumatic stress as the result of living within a racist system or experiencing racism. For example, viewing videos of police brutality against Black people can cause traumatic stress reactions in the people who view them - especially in Black people.¹⁴

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2. MHA's 2021 Policy Institute - Addressing Youth Mental Health Needs in Schools (Mental Health America YouTube, 2021). <https://www.youtube.com/watch?v=1Yr7ZUtmvgk>.

3. Centers for Disease Control and Prevention. (2021). "Emergency Department Visits for Suspected Suicide Attempts Among Persons Aged 12-25 Years Before and During the COVID-19 Pandemic - United States, January 2019-May 2021." Retrieved from https://www.cdc.gov/mmwr/volumes/70/wr/mm7024e1.htm?s_cid=mm7024e1_w.

4. Suicide (National Institute of Mental Health, 2021). <https://www.nimh.nih.gov/health/statistics/suicide>.

5. Suicide Rates Climb In U.S., Especially Among Adolescent Girls (National Public Radio, 2016). <http://www.npr.org/sections/health-shots/2016/04/22/474888854/suicide-rates-climb-in-u-s-especially-among-adolescent-girls>.

6. Girlhood Interrupted: The Erasure of Black Girls' Childhood (Georgetown Law Center on Poverty and Inequality, 2017). <https://www.law.georgetown.edu/poverty-inequality-center/wp-content/uploads/sites/HighSchoolYRBS/CenterforDiseaseControlandPrevention,2019>. <https://nccd.cdc.gov/Youthonline/App/Results.aspx?T=C&SID=H&QID=H26&LID=XX&YID=2019&YID2=SY&SID=&EYID=&HT=QQ&LCT=LL&COL=R&ROW1=N&ROW2=N&TST=false&C1=&C2=&SC=DEFAULT&SO=ASC&VA=CI&C=S=Y&DP=1&QP=G&FG=G1&FA=A1&FR=R1&FS=S1&FSC=P1&FSI=I1>

7. Ibid, see 2. Additionally, Blacks and African Americans are less likely than white people to die from suicide at all ages. However, Black and African American teenagers are more likely to attempt suicide than white teenagers (9.8 % vs. 6.1 %). Black and African American communities and mental health (Mental Health America, n.d.) <https://www.mhanational.org/issues/black-and-african-american-communities-and-mental-health>.

8. Ibid, see 2.

9. Addressing Poverty and Mental Illness (Psychiatric Times, 2018). <https://www.psychiatrictimes.com/view/addressing-poverty-and-mental-illness>

10. Leary, K. Ph.D. (2020). Mental Health and Communities of Color. Georgetown Law Center on Poverty and Inequality, Initiative on Gender Justice & Opportunity. <https://genderjusticeandopportunity.georgetown.edu/wp-content/uploads/2020/06/Mental-Health-and-Communities-of-Color.pdf>

11. Trauma and Violence (Substance Abuse and Mental Health Services Administration, 2019). <https://www.samhsa.gov/trauma-violence>

12. Jamieson, K. (2019, December 4). Aces and minorities. Center for Child Counseling. <https://www.centerforchildcounseling.org/aces-and-minorities/>.

13. Ibid.

14. Racial trauma (Mental Health America, n.d.). <https://www.mhanational.org/racial-trauma>.

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Of Latinx youth who immigrate to the U.S., two-thirds report experiencing one traumatic event, while many Native American children are vicariously traumatized by the high rates of societal homicide, suicide, and unintentional injury experienced in their communities.¹⁵

Girls who experience trauma are at an even greater risk of being diagnosed with a mental health condition. Girls who reported that they had been hurt or injured on purpose by a family member were overwhelmingly likely to report symptoms associated with post-traumatic stress disorder (92%), depression (96%), or generalized anxiety disorder (98%).¹⁶ Often the coping behaviors in response to trauma can be misunderstood; these behaviors may be punished in school settings, causing girls to be pushed out of school.¹⁷ Girls who have experienced trauma are also at an increased risk of involvement with the juvenile justice system.¹⁸

LGBTQ+ Youth

In a 2017 survey, 83% of LGBTQ+ girls reported experiencing symptoms of post-traumatic stress disorder (PTSD) such as feeling very upset when something reminded them of a stressful experience from the past and/or having repeated disturbing memories, thoughts, or images of stressful experiences from the past.¹⁹ LGBTQ+ individuals also report significantly higher rates of childhood emotional abuse (47.9% vs. 29.6%) and exposure to domestic violence (24.1% vs. 15.4%) than their heterosexual counterparts.²⁰

Role of the Media

Girls face limiting and unrealistic representations of female bodies in the media which can adversely affect their self-perception, self-worth, and their mental health. Over the last 50 years, there has been a rise in the incidence of anorexia among young women ages 15-24.²¹ These numbers have increased exponentially throughout the COVID-19 pandemic. In 2020, the National Health Service reported a 46% increase in eating disorder referrals for youth under 18 and a 173% rise in eating disorder helpline calls.²² Eating disorders are complex and have a number of social, psychological, and biological causes. Social media is one component of this, as it works to perpetuate the 'thin ideal', especially for young girls. Reports show that 69% of American elementary school girls who read magazines say pictures of women in magazines "influence their concept of the ideal body shape," and 47% say the pictures make them want to lose weight.²³

A 2019 study found that frequent social media use disproportionately affects teen girls' mental health more negatively than that of teen boys.²⁴ In girls, frequent social media use seemed to harm their health when it led to either online harassment (or cyberbullying) and/or inadequate sleep and exercise.²⁵ According to the study, online harassment and lack of sleep accounted for 60% of the connection between social media and psychological distress.

Role of Schools

Schools could play an important role in connecting girls with the services they need, especially if school staff members are trained to recognize the signs of trauma or other mental health concerns. Unfortunately, many girls of color get disciplined for behavior that may be the result of unaddressed trauma or mental health issues, but is not recognized as such. Additionally, there is a critical shortage of school counselors and many high school counselors report being overburdened by huge caseloads, especially at schools where a majority of children are first-generation and low-income students. The American School Counselor Association recommends a student-to-counselor ratio of 250:1, but only two states meet that recommendation (New Hampshire and Vermont).²⁶ In far too many schools, security officers outnumber school counselors.²⁷ In fact, in 2019, 14 million students attended schools with police but no counselor, nurse, psychologist, or social worker.²⁸

15. Ibid.

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17. Ibid, see 8.

18. Epstein, R., & González, T. (2017). Gender & Trauma—Somatic Interventions for Girls in Juvenile Justice: Implications for Policy and Practice.

19. Let Her Learn: Stopping School Pushout for LGBTQ Girls (National Women's Law Center, 2017). https://nwl.org/wp-content/uploads/2017/04/Final_nwlc_Gates_LGBTQ.pdf.

20. A Systematic Review of Family Victimization Experiences among Sexual Minority Youth (US National Library of Medicine, 2019). <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6408293/>

21. Ibid, see 11.

22. Chaminda Jayanetti (2021) NHS sees surge in referrals for eating disorders among under-18s during Covid. The Observer. <https://www.theguardian.com/society/2021/feb/20/covid-eating-disorder-referrals-rise-under-18s>

23. Get the Facts on Eating Disorders (National Eating Disorders Association). <https://www.nationaleatingdisorders.org/what-are-eating-disorders>

24. Kelly, Y., Zilanawala, A., Booker, C., & Sacker, A. (2018). Social media use and Adolescent mental health: Findings from the UK Millennium cohort study. *EClinicalMedicine*, 6, 59–68. <https://doi.org/10.1016/j.eclinm.2018.12.005>

25. Ibid, see 16.

26. Student-to-School-Counselor Ratio 2019-2020 (American School Counselor Association, 2020). <https://www.schoolcounselor.org/getmedia/cd689f6a-252a-4e0a-ac8b-39b9b66d700d/ratios-19-20.pdf>

27. 2013-2014 Civil Rights Data Collection: a First Look (U.S. Department of Education, Office for Civil Rights, 2016). <https://www2.ed.gov/about/offices/list/ocr/docs/2013-14-first-look.pdf>. Visit our fact sheet on Girls and School Discipline and Policing to learn more about the disproportionate discipline of girls of color and girls with intersectional identities.

28. Cops and No Counselors: How the Lack of School Mental Health Staff is Harming Students (ACLU, 2019). https://www.aclu.org/sites/default/files/field_document/030419-acluschooldisciplinereport.pdf

WHY IT MATTERS

Mental health has a huge impact on girls and young women and their ability to lead healthy, fulfilling, and meaningful lives. Even though mental health issues are treatable, girls may not receive the services they need if their schools do not have the necessary resources and their teachers do not know how to identify students who need help. **Girls with unaddressed mental health problems may get punished or withdraw from classes or activities and lose access to critical development opportunities.** Mental illness can also be isolating given the stigma that still surrounds seeking treatment or even admitting one suffers from mental health issues.

WHAT POLICYMAKERS CAN DO

- Improve access to and quality of mental health and wellness support for children in underserved and underrepresented communities, including by:
 - **Increasing funding for school-based mental health professionals and services**, including screening, treatment, and outreach programs;
 - Listening to students to ensure that resources in schools are tailored to their specific needs;
 - Increasing funding for evidence-based suicide and eating disorder awareness and prevention programs respectively, as well as mandate that schools train students in suicide and eating disorder awareness and prevention;
 - Ensure **access to more inclusive mental health and wellness education** as well as linguistically accessible and culturally competent services for BIPOC youth and parents; and
 - Strengthen laws, policies, and funding for programs that **promote trauma-informed practices**, training, and healing-centered engagement for infants, children, youth, and families who have experienced or may experience trauma.
- Ensure access to telehealth services, even after the COVID-19 pandemic.

