



Mott Poll Report

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Teens Talking with Teens about Mental Health

When teens feel anxious or depressed, or have other problems, they may be more comfortable talking with a peer rather than adults. Some schools select teens to be peer support leaders, and train them in how to be good listeners, encourage teens to seek help, and alert an adult if signs of suicide or other serious problems are identified. The C.S. Mott Children's Hospital National Poll on Children's Health asked a national sample of parents of teens 13-18 about their views on programs like peer support leaders.

Most parents (72%) think having peer support leaders at school would encourage more teens to talk with someone about their mental health problems. Three-quarters of parents (76%) think peer support leaders would better understand the challenges facing teens, compared to teachers or counselors in the school.

If their own teen was struggling with a mental health problem, 38% of parents say it's likely that their teen would talk with a peer support leader if this option were available; 41% of parents say it's possible their teen would talk with a peer support leader, and 21% say it is unlikely. Parents express concerns about whether the peer leader would keep their teen's information confidential (62%), if the peer leader would know when and how to inform adults about a problem (57%), if the peer leader would be able to tell if their teen needs immediate crisis help (53%), and if teens can be trained to provide this kind of support (47%).

One-third of parents (33%) definitely favor having a peer support leaders program through their teen's school, while 46% say they probably would support such a program, and 14% are unsure. Only 7% do not favor having a peer leaders program at their teen's school. One-quarter of parents (28%) say their teen's school already has some type of peer support program; these parents are twice as likely to favor having a peer leaders program.

Most parents (64%) would allow their teen to be trained as a peer support leader, and say the benefits include understanding the challenges of others (66%), developing leadership skills (65%), and helping the school community (63%). Parents express concerns that their teen may feel responsible if something bad happened (57%), whether there would be sufficient training (45%), and whether their teen is mature enough to serve as a peer support leader (31%).

Benefits of peer support leader programs in schools

76% of parents agree:

Peer support leaders would have a better understanding of the challenges facing teens, compared to teachers or counselors

72% of parents agree:

Having peer support leaders would encourage more teens to talk with someone about their mental health concerns



Report Highlights

1 in 3 parents definitely support having a mental health program like peer support leaders at their teen's school.

2 in 3 parents would allow their teen to be trained as a peer support leader.

Parent concerns about peer support leaders include confidentiality, training, and identifying crisis situations.

Data Source & Methods

This report presents findings from a nationally representative household survey conducted exclusively by Ipsos Public Affairs, LLC (Ipsos) for C.S. Mott Children's Hospital. The survey was administered in August 2020 to a randomly selected, stratified group of adults who were parents of at least one child age 0-18 years living in their household (n=2,027). Adults were selected from Ipsos's web-enabled KnowledgePanel® that closely resembles the U.S. population. The sample was subsequently weighted to reflect population figures from the Census Bureau. The survey completion rate was 60% among panel members contacted to participate. This report is based on responses from 1,000 parents with at least one child age 13-18 who attended school during the 2020-21 school year. The margin of error for results presented in this report is ±2 to 3 percentage points.

A publication from C.S. Mott Children's Hospital, the University of Michigan Department of Pediatrics, and the University of Michigan Susan B. Meister Child Health Evaluation and Research (CHEAR) Center.

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C.S. Mott Children's Hospital National Poll on Children's Health

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Implications

Adolescence can be rife with mental health issues. An estimated 1 in 5 teens meets criteria for a mental health disorder such as depression or anxiety; suicide is the second leading cause of death among teens. Teens who do not have a diagnosed condition can still have occasional problems with emotions, peer and family relationships, anxiety about school, or substance use.

Many teens would benefit from talking about their problems, but adults are not always their preferred option. Some teens may worry that their parents will overreact to their struggles or that parents would not understand what they are going through. Teachers and school counselors may have limited time to talk with students amid their other responsibilities. Teens may not know how to set up a confidential appointment with a mental health provider, and many areas have a shortage of mental health professionals who have experience working with adolescents.

Some schools have instituted peer mental health programs to make sure that teens have an avenue to talk about their problems. In these programs, students are trained to be good listeners and to identify warning signs of suicide or other serious problems; they serve as peer support leaders or peer mentors, with oversight from teachers, counselors or mental health professionals. Peer support leaders are available to talk with their fellow students, on a walk-in basis at a designated place at school or by referral from school staff. Peer support leaders listen, suggest problem solving strategies, share information about resources, and, when appropriate, encourage their fellow students to seek help.

This Mott Poll demonstrates that most parents agree with the rationale for peer support programs. Three in four parents believed having a school-based option like peer support leaders would encourage more teens to talk with someone about their problems, and that peers would likely have a better understanding of the challenges facing teens, compared to teachers or counselors.

One-third of parents indicated they would definitely support having a peer mental health program, and this proportion was higher among parents who reported such a program at their teen's school. This suggests that parent support increases once they understand how peer support programs work. The majority of parents in this poll indicated they were uncertain about having a peer support leaders program at their teen's school, with some specific concerns about how the program would work. Foremost among those parent concerns was whether the peer support leaders would maintain confidentiality of students seeking help.

Other key parent concerns pertained to whether the peer leader would be able to tell if their teen needed immediate crisis help and if their teen would know the process for initiating the process to get adult help. Close connection to knowledgeable adults is an essential part of any school-based peer mental health program, particularly with regard to suicide prevention. When schools are considering whether to institute peer support programs, or when teens begin a new school with an existing program, parents may want to ask about the qualifications and onsite availability of the adults overseeing the program.

Most parents in this poll would approve of their teen being trained as a peer support leader, recognizing that it could enable their teen to develop leadership skills and better understand the challenges that different teens face. Alongside these benefits, some parents wondered if there would be sufficient training for their teen to be effective as a peer support leader, and worried that their teen would feel responsible if something bad happens to a peer they had talked with. Parents of teens considering service as a peer support leader may want to learn more about the training and resources offered, including whether the peer support leaders receive counseling and support in the event of a bad outcome.