

A surprising remedy for teens in mental health crises

The provider shortage is real. So this training empowers teens to step up for one another



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March 3, 2023 at 6:00 a.m. EST

RAMSEY, N.J. — Last spring, Jamie Gorman had a panic attack at the mall.

The high school sophomore was with a group of friends at Garden State Plaza in Paramus, N.J., when she began to feel overwhelmed. Her fingers were tingling. She couldn't catch her breath. She felt shaky and dizzy.

Her teenage friends sprang into action.

"They were like, 'Jamie, sit down.' 'Jamie, give me your phone — unlock it,'" Gorman recalled in a recent interview at her high school. "They immediately called my dad so he could talk to me. They found a water bottle for me. They sat with me; they were just there for me." She said her friends were "very comforting because they were very calm and they were like, okay, we know what to do."

It was not just luck that gave Gorman such capable friends. They, like every sophomore at Ramsey High School in Ramsey, N.J., had just finished a training program called Teen Mental Health First Aid, designed to teach students how to recognize warning signs and help a friend through a mental health crisis.

Teen Mental Health First Aid is adapted from Youth Mental Health First Aid, a training designed for adults who work with or care for teens. The latter program was developed about two decades ago in Australia and has been taught in the United States since 2008. The benefits of both programs are supported by peer-reviewed scientific studies. In teens, the training has been shown to increase mental health literacy and reduce reported psychological distress. In one randomized controlled trial, teens reported a significantly higher level of confidence in helping a friend who was anxious or suicidal, as well as a lower stigma around mental illness, and were also more likely to choose the correct, helpful course of action.

Since 2020, the number of people trained in mental health first aid in the United States has more than doubled, to more than 1.1 million, says Tramaine EL-Amin, the assistant vice president for strategic partnerships and a client experience officer at the National Council for Mental Wellbeing. The reasons for the growing interest are clear. According to the American Academy of Pediatrics, the state of children and teens' mental health since the coronavirus pandemic qualifies as a national emergency. The latest national numbers from the Centers for Disease Control and Prevention show "mental health among students overall continues to worsen," with more than 40 percent of high school students in 2021 showing signs of depression.

Just as first aid training doesn't make someone a doctor, Mental Health First Aid participants are not certified to provide therapy. But the course helps them act as first responders — to assess a situation, do what they can in the moment and inform a trusted adult. The curriculum covers anxiety and panic disorders, depression, suicidality, eating disorders, addiction and other common mental health concerns for this age group. It trains teens in the appropriate actions to take if a friend shows warning signs of a developing problem, plunges into acute crisis or is recovering.

Kayla O'Rourke, a classmate of Gorman's at Ramsey High School, said the areas of the training that really stick with her are those that buck popular misconceptions. "Something I learned, which I would never expect," she said, "is that you have to say right to them, like, 'Are you thinking about hurting yourself or are you thinking about suicide?' Which is something that I would never be so blunt about."

Both she and Gorman said the training has made them feel less alone in their own moments of stress. And they regularly draw on the self-care techniques they learned.

Mental health care providers are scarce in the United States. In 2019, there were just 14 practicing child and adolescent psychiatrists for every 100,000 children. The American Academy of Child and Adolescent Psychiatry says that children with the most serious diagnoses wait, on average, several years for appropriate treatment. And the CDC says that 80 percent of children and youth who need treatment have no access to a specialized mental health provider. The shortage of care is worse in rural areas; for Black and Indigenous people and other people of color; and for LGBTQ youth. What's more, it takes years for people to qualify as mental health counselors, psychologists or psychiatrists, meaning this problem cannot be solved quickly.

That's why organizations like Child Trends have been urging schools and communities to take an all-hands-on-deck approach to youth mental health. Rather than place all the pressure on practitioners, the organization encourages a "population health" mind-set that looks upstream and enlists the entire community in promoting mental well-being, prevention and early intervention. Mental Health First Aid represents one such approach.

The National Council for Mental Wellbeing, which delivers the training along with the National Association of Counties, anticipates a new influx of funding following the passage of the Bipartisan Safer Communities Act last June. The states of Arkansas, Maine, North Dakota and Virginia all now mandate some form of Mental Health First Aid training for school personnel, according to EL-Amin.

Parents are signing up for training through PTAs. And an increasing number of teens are being certified to help their peers, since it's very common for young people to first turn to a friend rather than an adult.

Molly Dinning, the director of student support services for the Ramsey School District, a well-resourced district in an affluent New York City suburb, said that teenagers are empowered by the training in ways that go beyond just mental health.

“It gives them a lot of ownership, self-direction, knowledge and self-confidence in these situations that they're definitely going to face as they go through life,” she said.

Ottumwa High School in Iowa is also concerned with student mental wellness. The school, which serves a population with a much lower income than Ramsey, has just one dedicated mental health counselor for its 1,300 students. (Ramsey High School has two for 780 students.)

Ottumwa's counselor, Kolby Streeby, said “friends are the first line of defense” when students are having a hard time. “Unfortunately, family isn't always a good support for them.”

Streeby and her students said that familial homophobia and transphobia are problems in the community. Other students are dealing with a family member's substance abuse; Iowa is known for high rates of methamphetamine use in particular.

Streeby, who was already certified in Mental Health First Aid, was excited to hear about the Teen Mental Health Program. She offered the training to the nine members of the student club she supervises, the Teen Outreach Program.

The students completed the training in December. Tenth-grader Oliver Hernandez-Norris said it proved useful almost immediately.

“I had noticed some signs in my friend I was concerned about, and I wouldn't have even thought about it if I hadn't taken the training,” he said. The friend was losing interest in activities, becoming distant from others and showing anger. Hernandez-Norris said that if he had not been trained to recognize the behaviors as symptoms of depression, he could “have thought they were stressed out about work.”

“I messaged Kolby [Streeby] and said, ‘My friend is going through these warning signs.’ And I asked my friend on a call — ‘Are you doing okay? Do you want to maybe hang out?’ They're okay now. They were just going through a tough time.”

Although the stressors that contribute to mental health issues are often more common in low-income communities, it appears that adoption of the program, for the most part, has started in wealthier, majority-White districts.

The program's direct cost — excluding loss of classroom time and time for professional development — can range from \$1,700 for a small package of instructor training and materials to as much as \$52,000 for a district-level package. These costs can be covered by regular school budget, federal grants or outside donors.

The National Council for Mental Wellbeing says that, to protect the privacy of teens who take part, it doesn't collect demographic information on who participates in the program. But all of the districts that agreed to allow media interviews about the program were predominantly White. Most, with the exception of Ottumwa, were more affluent than the national average.

EL-Amin said the organization is "leading several national efforts to support the diversification of our instructor pool and engaging philanthropic efforts to obtain resources for under-resourced communities."

Gorman and O'Rourke in New Jersey, and several students interviewed in Iowa, all said the training made them a better friend — more open, more empathetic, more likely to check in because they had both the language to speak about tough times and the practical tools to help.

In fact, one night, Gorman was hanging out with friends in her basement, and she confessed to being stressed.

"Having the course made me feel more confident to talk to them because I felt they were more receptive and more aware of the possibilities of what I could be feeling," she recalled.

"I was like, I'm feeling really overwhelmed. And they were like, 'Oh my gosh, I'm also feeling overwhelmed.' And I was like, 'Wow, that's so good to know,'" she said. "Being honest with each other about the way that we're feeling made us feel so much better. Like, I'm not the only one who's feeling really stressed before math class, you know?"

This story about mental health first aid was produced by the Hechinger Report, a nonprofit, independent news organization focused on inequality and innovation in education.