

‘I’m So Proud of How Hard You’re Trying’: A Photovoice Analysis of Youth Mental Health and Wellness in Wisconsin

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ABSTRACT

Understanding youth and young adult mental health and well-being is critical to addressing rates of suicide among this population. This qualitative study sought to gather additional perspectives of students across Wisconsin using photovoice methods to enhance understanding of their experiences and to inform future policies and programs. A total of 11 youth and young adults ages 14 to 26 participated by taking pictures in response to given prompts and then discussing those pictures within a virtual focus group. Spanning the social-ecological framework, 4 themes emerged from the photographs and discussion: (1) individual-level factors drive mental health and well-being; (2) the support of interpersonal relationships is crucial; (3) school-related factors are predominant sources of stress; (4) policies, culture, and systems influence well-being. This study highlights the unique experiences of youth and young adults and underscores the impact of systems and structures on their mental health and well-being.

INTRODUCTION

The COVID-19 pandemic and racial and civil unrest throughout the United States have propelled mental health and well-being into the public discourse. Youth and young adult mental health has been at the apex of this discussion. At the conclusion of 2021, the US Surgeon General issued an advisory on the crisis of youth mental health, citing critical increases in mental health symptoms—including suicide rates—among youth and young adults ages 10 to 24 between 2007 and 2018.¹

The adolescent and young adult period typically involves a change in social structure, with peer interactions and peer acceptance taking prominence and familial influence and interactions

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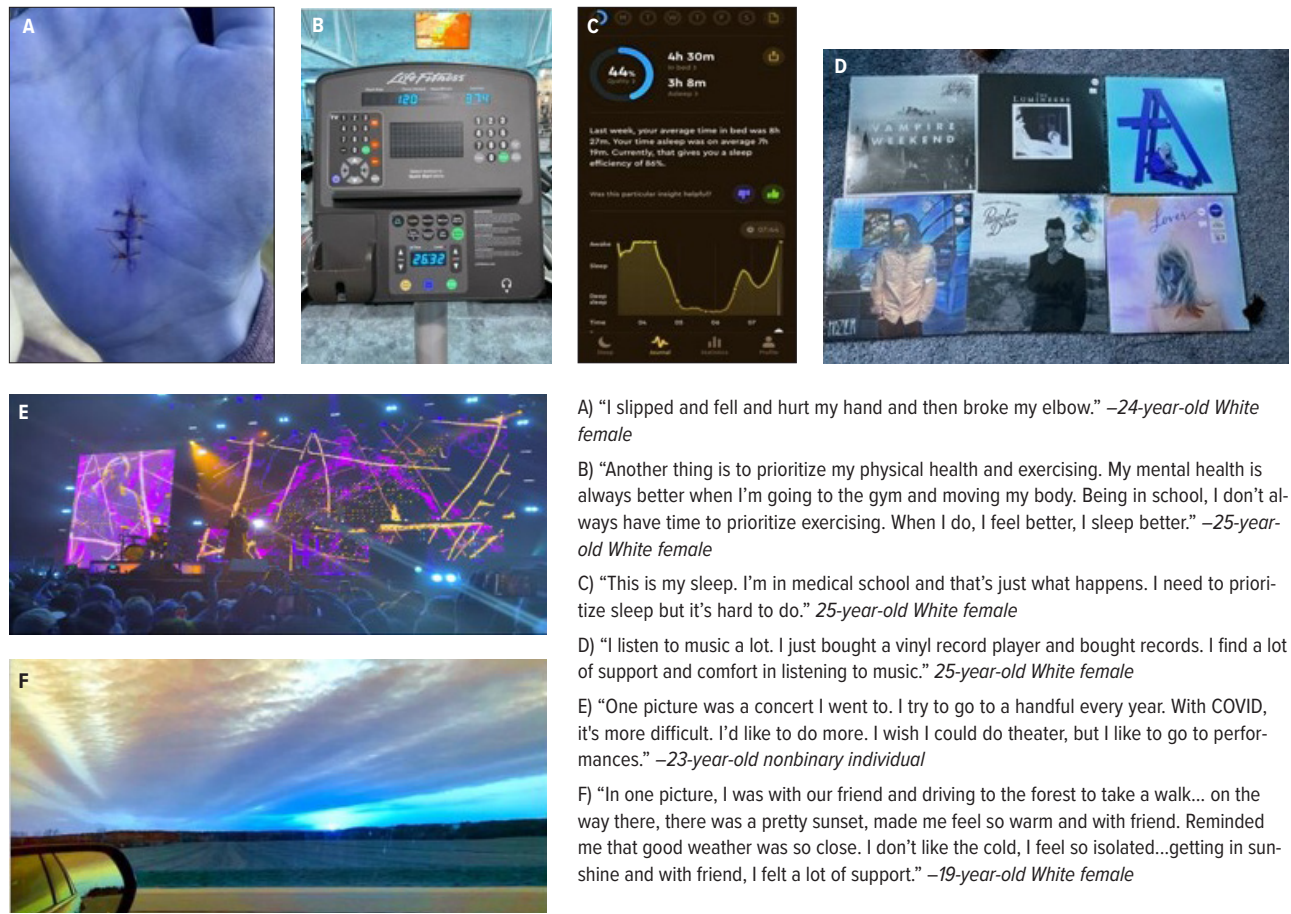
weakening.² The pandemic disrupted this, creating a shift in social dynamics in which interactions with peers became less prominent. This, along with the increase in social isolation, contributed to higher rates of anxiety and depression symptoms,³ which may have contributed to an increase of substance use⁴ and suicidal ideation and suicide attempts among youth and young adults.⁵

The Voices of Wisconsin Students Project: Learning, Coping, and Building Resilience During COVID-19 (VoWS), completed by the Wisconsin Public Policy and Service Research Partners, provided

Wisconsin students the opportunity to participate in focus groups to share thoughts relating to challenges and coping strategies during COVID-19.⁶ Middle school and high school students shared experiencing an increase in stress, anxiety, and depression during the pandemic, with loss of connectedness as a potential factor. Though students found ways to cope—including exercise, therapy, time in nature, and family support—stigma and fear of seeking help were noted as barriers.

This study aimed to continue the work of VoWS using photovoice as a medium to highlight the lived experience of Wisconsin youth and young adults. Photovoice is a qualitative research method that invites participants to take photos in response to question prompts as a manner of illustrating their lived experience in the context of a specific health issue. Our guiding research question was, “What are the mental health and well-being experiences of Wisconsin youth ages 14 to 26?” Additionally, this study extends the largely survey-based literature around youth mental health in the wake of the COVID-19 pandemic by providing contextualized narratives and photographic evidence of the lived experience of young people.

Figure 1. Photographs Depicting Theme 1: Individual-level Factors Drive Mental Health and Well-Being



- A) "I slipped and fell and hurt my hand and then broke my elbow." –24-year-old White female
- B) "Another thing is to prioritize my physical health and exercising. My mental health is always better when I'm going to the gym and moving my body. Being in school, I don't always have time to prioritize exercising. When I do, I feel better, I sleep better." –25-year-old White female
- C) "This is my sleep. I'm in medical school and that's just what happens. I need to prioritize sleep but it's hard to do." 25-year-old White female
- D) "I listen to music a lot. I just bought a vinyl record player and bought records. I find a lot of support and comfort in listening to music." 25-year-old White female
- E) "One picture was a concert I went to. I try to go to a handful every year. With COVID, it's more difficult. I'd like to do more. I wish I could do theater, but I like to go to performances." –23-year-old nonbinary individual
- F) "In one picture, I was with our friend and driving to the forest to take a walk... on the way there, there was a pretty sunset, made me feel so warm and with friend. Reminded me that good weather was so close. I don't like the cold, I feel so isolated...getting in sunshine and with friend, I felt a lot of support." –19-year-old White female

METHODS

This qualitative project leveraged data from focus groups and photovoice. Photovoice has been demonstrated to enhance understanding of community contexts⁷ and was leveraged in this project to provide students a forum to depict their experiences with mental health and wellness in a way that increases others' understanding.

Our study sample included Wisconsin students ages 14 to 26, which mirrored the ages included in prior listening sessions conducted by the Wisconsin Office of Children's Mental Health. Participants were recruited via social media and other venues, including email listservs. Students were provided with 3 prompts to take photos that depict their daily experience:

- 1) What does mental health and well-being mean to you?
- 2) What stressors and supports do you encounter in your life?
- 3) What does a safe and supportive relationship look like?

During focus groups held from April through July 2022, students shared their photos and responded verbally to the prompts above. Additionally, students were asked to describe their sense of belonging in their community, coping strategies they employ when they feel stressed, and challenges they face in their own men-

tal health and well-being. Participants were provided with a \$25 gift card and were required to comply with a photovoice ethics agreement that ensured the privacy of others.

Focus group transcripts were analyzed using an inductive thematic analysis process.⁸ Qualitative data analysis was conducted using MAXQDA Plus 2022 (VERBI Software, 2021, Berlin, Germany). All study activities were approved by the Institutional Review Board at the Medical College of Wisconsin.

RESULTS

A total of 11 students participated in all study activities. They ranged in age from 17 to 25 years old; 67% were female, 17% were male, and 16% identified as nonbinary. Eighty-three percent of participants were White, and 17% were individuals of color; 25% were Hispanic/Latinx. Participants originated from both urban and rural counties. Four themes were drawn from the data and are described below.

Theme 1: Individual-level Factors Drive Mental Health and Well-being

Participants spoke at length about how their own individual expe-

periences impact their well-being, and photos reflecting these experiences are displayed in Figure 1. Several participants noted that they were experiencing their own mental health challenges, whether they were diagnosed mental health conditions or issues related to mood. One participant, a 17-year-old multiracial female, talked about the role that mental health issues have played in her life: *“Mental health is a big thing in my life, even without my diagnosis...I kind of found myself always thinking of how to better society because of mental health. It’s a big factor...”*

Another participant, a 25-year-old White female, talked about how symptoms of depression interfere with her well-being: *“When my mental health is worse, I wake up and I don’t want to get out of bed. I have a bunch of things to do, and I get cranky.”*

Sleep is important to both physical health and mental health, and several students discussed issues related to lack of sleep. One participant, who is in medical school, took a picture of her sleep tracking app, which showed how little sleep she got some nights.

Participants demonstrated that they engage in several forms of self-care to cope with stressors in their lives, including physical activity, also shown in Figure 1.

Theme 2: The Support of Interpersonal Relationships is Crucial

Participants indicated that they find support in strong, supportive relationships with others. One benefit of such relationships is a sense of shared experience, which contributes to a feeling of belonging and community and can be protective against suicidal thoughts and behaviors. This sense of shared experience and the support and validation it provides is highlighted by a 24-year-old student:

“Speaking to my classmates, we have a sense of belonging through shared struggles. We have a class chat, ‘Man, that was a really tough exam.’ My feelings are validated. And then not being afraid to ask questions and having others being receptive to that. That makes me feel like a part of community.”

Another student, who is Hispanic, discussed how she feels a sense of belonging as part of a group for underrepresented students:

“A big sense of belonging for me is when I feel as though

Figure 2. Photographs Depicting Theme 2: The Support of Interpersonal Relationships Is Crucial



A) A student’s friend came to visit him during a particularly stressful time and took him to a hockey game to destress. –24-year-old White male

B) “This is a dinner my partner made for me. I feel a supportive relationship can be expressed through food.” –24-year-old White male

C) “I was able to go home this past week, and here is a picture of my dog...that is the definition of a supportive relationship. He knows when I’m stressed and happy; he’s able to sense my emotions on the spot.” –23-year-old Hispanic female

D) “I just really enjoy spending time in nature. I really like this photo, how close up it is. I tend to focus on the details. When I am feeling stressed, it can often feel like there are so many things to do, but slowing down in nature and focusing on tiny details can help me.” –24-year-old Asian female



I have similarities with someone else and relate to them. When coming to [school], I joined the Latino Medical Association. I was able to relate to their stories of getting to this point [in our education] and being an underrepresented student.”

Students also discussed the support of family in the context of belonging. A 23-year-old Hispanic female student reported that family provides a strong sense of community, which is a source of support for her: *“... my family is my biggest community, because they know me unlike anyone else, and we have many things in common.”*

Friends, significant others, and pets also provide a source of support and coping for participants in times of stress. These relationships are expressed through the photographs and related quotes in Figure 2.

Interestingly, while participants overwhelmingly attested to the power of support from others, they also expressed feeling like a burden at times when relying on others for comfort and support. One said, *“A lot of my friends are in school, and we are all so busy and stressed. I don’t want to spend 2 hours of my time and their time venting.”* Another participant echoed this sentiment: *“If I’m*

talking with my family and personal friends, I'm almost feeling like I don't want to burden them [with my problems]."

For many students, the COVID-19 pandemic contributed to a sense of isolation from peers, which caused distress. One student said:

"A big part [challenge] has been the pandemic. For me being around people helps take my mind off things. I've been a lot more isolated than I have ever been...feeling like I spend my whole life in this tiny apartment."

Students also may isolate themselves from others when they are facing stressors. This was true for a 19-year-old student who is usually the person that friends rely on when they are facing their own issues:

"When I need support the most, I drop communication with people and just lay in my room. I think a challenge is reaching out when I need the support. 'Cause with my friend group, I am usually the friend that everyone can talk to. I usually don't have too many issues and challenges in my life, but when I do, it's challenging for me to reach out to the people that should hear it the most."

Additionally, being a student who is new to an area presents a number of challenges, including a sense of isolation. One student described this experience when asked what helps her feel a sense of belonging in her community: *"I am new to the area. I recently moved. So, in this community, I don't really feel a sense of belonging."*

Theme 3: School-related Issues Are Predominant Sources of Stress

Given that students spend many hours per week at school, it is natural that several stressors they experience are school-related. Many students discussed how their overwhelming workload contributes to their level of stress. This stress was depicted in photographs and quotes from participants as shown in Figure 3.

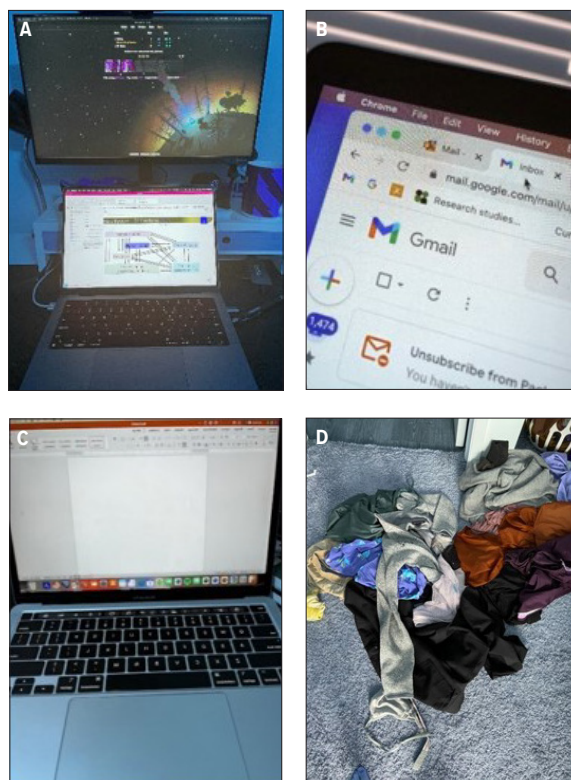
Students discussed how they feel a need to participate in extra-curricular activities to stand out amongst their peers. One participant talked about how juggling multiple priorities causes stress, which was echoed by another college student, who said:

"I have a lot of responsibilities and a lot to get done regularly. The tasks are piling up. That is inevitably stressful. So many hours, commitments with school, and extracurriculars to do to stand out."

Finally, some students described how the physical school environment, which can be crowded and noisy, is a source of stress. One high school student talked about how she feels anxious and overwhelmed in the school hallways: *"For me in the hallways, that overstimulation and all those people...I think also, after COVID, I get anxious that people in the hallway aren't being safe...general COVID concerns."*

This statement illustrates the overlapping stressors of feeling overstimulated in crowded hallways and feeling concerned about

Figure 3. Photographs Depicting Theme 3: School-related Issues are a Predominant Source of Stress



A) "I'm a student at [school], and a stressful photo is my computer with my notes and software that I use many hours a day, that I love to hate. That's a lot of what my stress revolves around." –24-year-old White male

B) "There was one [photo] that showed my emails and the number of notifications. It's a source of stress for me. Seeing the number go up and up and working to balance out...email can bring me a lot of stress and I spend a lot of time on it. The time it takes to write up an email, thinking that I'm spending too much time on this." –23-year-old White female

C) "The past couple of weeks have been stressful with school. This photo shows a blank Word document. I'm trying to find the motivation to start this research project. It's so stressful to do it and so stressful to begin." –23-year-old Hispanic female

D) "I have a pile of clothes that will pile up. I find this stressful. When I have a lot going on, I can't frequently clean up. I hate it, but with so much going on, I can't prioritize cleaning up." –25-year-old White female

one's health due potential exposure to COVID-19 in situations where many people are present.

Theme 4: Policies, Culture, and Systems Influence Well-being

The fourth theme revolves around larger, structural issues that influence the mental health and well-being of Wisconsin students. These systemic forces can be barriers to seeking help, and often policies, culture, and systems are at the root of the stressors students face. Many students discussed issues with stigma, which are often rooted in a culture of disapproval or shame at the societal level.

One student, a Hispanic female, talked about how intergen-

erational stigma influences her interactions with her parents when it comes to issues of mental health:

“My personal perception is that a lot of people my age are open and willing to talk. I think there is a stigma between my generation and my parents’. We’re open to talking but our parents are not. And we’re at the age where we still need to talk with our parents...So, I think there is stigma in talking with parents but not with my peers.”

Cultural and societal beliefs also impact how students feel about their own mental health issues. This can result in self-stigma, in which a student blames themselves for their own mental health problems. One nonbinary high school student said:

“I think that maybe I’m my biggest challenge. I happen to have situations where I self-blame and invalidate myself and my experiences. I have to sit down and think ‘if my best friend was telling me this, what would I tell them?’ If I would tell my best friend something [supportive], then I have to treat myself the same way.”

Despite the pervasiveness of stigma around mental health issues, participants reported that they feel that this is less of an issue among their peers. One 24-year-old student said, “*My personal perception is that a lot of people my age are open and willing to talk.*”

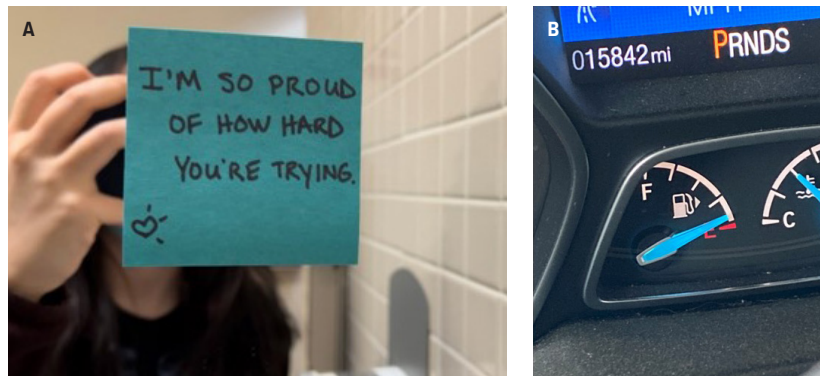
This openness to discussing issues related to mental health among young people was captured in a photo (Figure 4) a student took of a post-it note on a school bathroom mirror.

Another stressor mentioned by students that has roots in distal factors was the price of gas. Our focus groups were conducted at a time when gas prices in Wisconsin were over \$4 per gallon in many places, and this caused significant financial stress. One student captured a photo (Figure 4) from the dashboard of her car to illustrate this point.

Policies also can create barriers to seeking help for students, specifically access. Some participants reported that they don’t have time to access mental health services that are made available to them at school because they are too busy with schoolwork. One student said, “*I have access, I don’t feel ashamed, it’s normalized. I just don’t have time to access [services]. I could spend 2 hours in counseling or spend 2 hours on schoolwork.*”

Another access issue is related to money. Many students reported that they had access to a limited number of counseling sessions through their school but didn’t feel that this was adequate to fully address the mental health issues they face. One student said, “*I think we get 5 free sessions. I think it would be beneficial to have more sessions at a regular place [eg. professional counseling office], and I don’t have the money to do that.*”

Figure 4. Photographs Depicting Theme 4: Policies, Culture, and Systems Influence Well-being



A) The openness to discussing issues related to mental health among young people was captured in a photo one student took of a post-it note on a school bathroom mirror. –24-year-old Asian female
B) “The cost of gas is very stressful in my everyday life. I have to drive and go places, and this is definitely a stressor for me.” –25-year-old White female

A final access-related issue mentioned by participants involved aging out of the child welfare system and, therefore, losing access to services, including mental health services. One 17-year-old student, who is about to age out of the system, said:

“I’m struggling with the fact that my therapist won’t be able to take me any long[er] at 18, so parting with her will be really hard. I’ve worked with her for 5 years. So, trusting someone else will be hard...I’m not ready for that.”

DISCUSSION

This study aimed to describe experiences relating to mental health and wellness among Wisconsin youth ages 14 to 26. The photos and discussion reflect other cross-sectional research focusing on the impact of the pandemic on youth and young adult mental health—including an increase in isolation and loss of social connections,⁹ barriers to mental health care,¹⁰ and positive outcomes like continued resilience and use of multiple coping strategies in the face of adversity,^{11,12}—and add to this research by providing photographic evidence of these phenomena.

The 4 themes identified span the social ecological spectrum, which indicates that interventions to improve mental health and wellness among young people cannot occur only at the individual level. These findings are consistent with a 2020 systematic review, which that identified a number of interventions across the spectrum that have been demonstrated to improve student well-being at the college and university level.¹² Similarly, a 2019 systematic review of interaction-based interventions to improve secondary student mental health and well-being found that school and community-level interventions promoting positive connections at the interpersonal, school, and community levels have positive effects on students’ well-being.¹³ Implications and suggestions for

Box. Implications and Suggestions for Points of Intervention to Improve Students Mental Health and Wellness Across the Social-Ecological Spectrum

POLICY/SYSTEM/CULTURAL LEVEL

- Combat stigma by advocating for students with mental health issues.
- Ensure appropriate screening and referral protocols are in place (eg, crisis, suicide risk)
- Creatively address barriers to accessing mental health services (eg, financial restraints)
- Establish processes to support transitions in and out of care (eg, child welfare system) that includes early collaboration across agencies and elevates the voice of the young person
- Actively engage with students when reviewing or developing new policies and programs

SCHOOL/ORGANIZATIONAL LEVEL

- Review policies and curriculum to prioritize whole student learning
- Schedule breaks to allow students to complete schoolwork in between activities
- Create spaces that are soothing and promote focus and learning
- Work with community-based mental health providers to facilitate connections to community resources when needed

INTERPERSONAL LEVEL

- Create opportunities for connection among students and their peers
- Increase the mental health literacy of caring adults (eg, caregivers, teachers, primary care doctors)

INDIVIDUAL

- Promote and encourage healthy coping strategies (eg, exercise and mindfulness-related strategies)
- Emphasize the importance of good sleep for mental health

points of intervention are shown in the Box. This study extends this literature by providing additional in-depth and contextualized information on the multifactorial mental health needs of students across secondary and postsecondary years of education.

Limitations

This study reflects the experiences of Wisconsin students ages 14 to 26; therefore, the findings may not be generalizable to all student groups. We attempted to recruit study participants from across the state, with representation from both urban and rural settings, and study participants reflected multiple racial and ethnic backgrounds, as well as lesbian, gay, bisexual, transgender and queer or questioning (LGBTQ) status. There is also a possibility of selection bias in this study, as students who are more interested in issues relating to mental health and wellness may have been more likely to respond to study recruitment. Our sample size was relatively small, which also affects generalizability of findings. However, recent studies demonstrate that thematic saturation in qualitative studies can be reached in as few as 4 focus groups,¹⁴ and we think that saturation was reached in this case. Additionally, our study findings align well with the larger VoWS project findings. Finally, our study sample skews older, so experiences of older (postsecondary) students are more fully reflected in our findings. Future studies could limit recruitment to younger students in order to better understand how their experiences converge and/or diverge with this study's findings.

CONCLUSIONS

To best support the mental health of young people—particularly in the wake of the COVID-19 pandemic—individuals, schools, community organizations, and systems must come together to support positive connection for all students, while at the same time being agile enough to meet the needs of students facing a mental health problem. Working diligently to eliminate mental health stigma also will increase the acceptability of seeking help among young people. Acknowledging students' strengths, their ability to adapt and use appropriate coping skills, along with their willingness to share their experiences and talk about mental health, will enhance the public's response. This work is critically important now more than ever and will save lives.

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