



Facts on Mental Health

September 1997

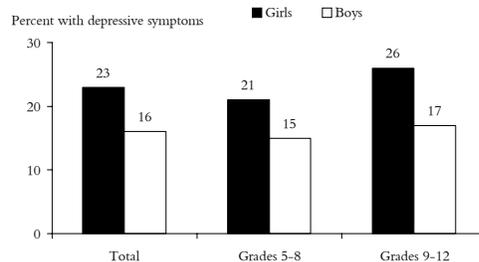
The Commonwealth Fund Survey of the Health of Adolescent Girls

Growing up self-confident and free of depressive symptoms enhances opportunities to participate fully in school and other activities and to live a healthy life. Unfortunately, according to *The Commonwealth Fund Survey of the Health of Adolescent Girls*, a significant minority of girls exhibits signs of poor mental health.

DEPRESSIVE SYMPTOMS

The prevalence of depressive symptoms was particularly disturbing: based on girls' reports of their feelings in the preceding two weeks, the survey found that one in four (23 percent) exhibited depressive symptoms. These symptoms, which included positive responses to such statements as "no one really loves me," "I can never be as good as other kids," "I do not have any friends," or "I look ugly," increased markedly as girls reached their high school years, especially when compared with boys. Because many of the girls who reported depressive symptoms also reported lack of access to care and support, their problems are especially troubling.

Girls are at higher risk than boys for suffering depressive symptoms.



The Commonwealth Fund Survey of the Health of Adolescent Girls, 1997
Louis Harris and Associates, Inc.

An alarming 29 percent of all girls reported suicidal thoughts, responding positively to the statement "I think about killing myself but would not do it." Among high school girls, one in three reported such thoughts, and 3 percent responded positively to the

statement "I want to kill myself." In addition, one-third of older girls said they felt like crying "many days" or "every day," and more than one in four (27 percent) said they were sad "many times" or "all the time."

Girls indicating that they had been physically or sexually abused were particularly at high risk of depressive symptoms: 46 percent of girls who reported abuse exhibited depressive symptoms, more than twice the rate of girls who said they had not been abused. Other factors linked to depressive symptoms, especially when they occurred in combination, included a parent's loss of a job, parents divorcing, parents having legal difficulties, and the death of a close friend. Among girls who reported two or more such factors (14 percent of all girls), more than one-third (36 percent) reported depressive symptoms, compared with one-fifth of girls who reported none of these factors occurring in the past year.

LACK OF SELF-CONFIDENCE

Many girls also exhibited symptoms of low self-confidence: by high school years, only 39 percent of girls appeared highly confident in themselves. At the same time, older girls were much more likely than younger girls to show signs of low self-confidence (14 percent of older girls compared with 9 percent of younger girls). In contrast, older boys were more

As girls mature, their self-confidence declines, while boys experience the opposite.



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likely to be highly self-confident than younger boys, with more than half of all older boys indicating high self-confidence. Girls were particularly likely to be critical of themselves, and one-quarter of older girls reported they did not like or hated themselves. In contrast, only 14 percent of older boys said they felt this way.

MENTAL HEALTH SYMPTOMS VARY BY RACE, ETHNICITY, AND INCOME

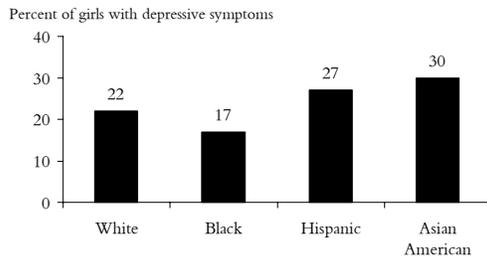
The prevalence of depressive symptoms and low self-confidence was similar among white, Hispanic, and Asian American girls, while black girls showed signs

risk for poor mental health than were those whose mothers had more education. Girls whose mothers had less than a high school education were nearly twice as likely to exhibit depressive symptoms as those whose mothers were college graduates.

GIRLS NEED SUPPORT AND ACCESS TO CARE

Depressive symptoms affected girls' overall assessment of their physical well-being. Although the vast majority of girls (80 percent) rated their health as good or excellent, one-third of girls with severe depressive symptoms and one-fourth with moderate symptoms rated their health negatively.

Girls' rates of depressive symptoms vary by race and ethnicity.



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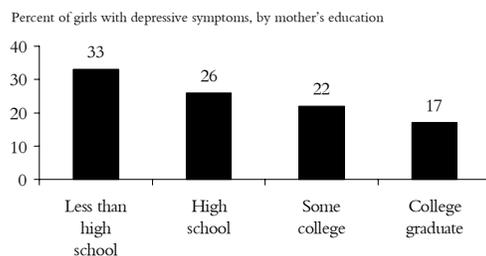
of strong mental health. More than half of black girls indicated high self-confidence, and 83 percent exhibited few or no depressive symptoms. Asian American and Hispanic girls appeared at greatest risk for depressive symptoms, with 30 percent of Asian American and 27 percent of Hispanic girls indicating symptoms.

Using mother's education as a proxy for family income status, the survey found that girls whose mothers had lower levels of education were at greater

Despite their apparent need for care and counseling, less than one in four girls (22 percent) with depressive symptoms had seen a mental health care professional in the past year. Lack of care or counseling may be due partially to girls' embarrassment at bringing up sensitive subjects: whereas 35 percent of all girls said there had been a time when they were too embarrassed to discuss a problem with their doctor, half of girls with depressive symptoms said there had been such a time.

Many girls suffering from poor mental health often lack a source of support when feeling depressed or stressed, thus keeping problems to themselves. When asked to whom they turn when feeling stressed, overwhelmed, or depressed, nearly one-third (31 percent) of girls with severe depressive symptoms and one-fourth (24 percent) of girls with moderate symptoms said "no one." Relatively few viewed their parents as sources of support: only one-third reported that they turned to their mothers for support, and one-tenth reported that they turned to their fathers for support. Only 8 percent of girls with few or no depressive symptoms said they had no one to turn to for help, with 61 percent naming their mothers and 21 percent their fathers as sources of support.

Girls whose mothers have less education are more likely to have depressive symptoms.



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The Commonwealth Fund Survey of the Health of Adolescent Girls, conducted by Louis Harris and Associates, Inc., from December 1996 through June 1997, consisted of in-class questionnaires completed by 6,748 adolescents—3,586 girls and 3,162 boys—in grades five through twelve. The classroom sample included a nationally representative cross-section of schools, with 265 public, private, and parochial schools participating.