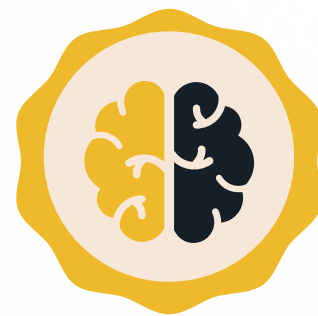


**2022**



# **The Allegheny County Black Youth Mental Health Literacy Study**

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## **F I N A L REPORT**

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A Summary of Results,  
Implications, and  
Next Steps

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# Introducing Our Team

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## The Allegheny County Black Youth MHL Study

# STUDY OVERVIEW:

This research study explored the relationship between Black youth and mental health. We were specifically interested in gaining information about the present knowledge and beliefs of Black youth concerning mental illnesses and treatment methods - also known as their mental health literacy (MHL).

To do this, our team conducted a countywide survey of MHL among Black youth between the ages of 14-25. Crucial to this work were partnerships with nearly 20 Black youth-serving community organizations and institutions. This final report is a tangible representation of our commitment to sharing the results of our study with our community partners and other interested stakeholders throughout the county.

# INTRODUCTION

Black youth in the US are currently experiencing a mental health crisis. Depressive episodes as well as suicide attempts and completions are rising at an alarming rate within this population. Unfortunately, despite evidence of an increased need for mental health treatment, Black youth have historically had lower rates of mental health service use, especially compared to white youth.

Some of the responsibility for mental health treatment disparities affecting Black youth is attributable to failures within the mental health care system. These include low racial/ethnic diversity among the mental health workforce and insurance-related barriers to treatment. However, mental health-related stigma and a lack of knowledge of mental illness and acceptable treatments among Black youth also contribute to low rates of mental health treatment access and utilization.

The promotion of mental health literacy among Black youth is one way to help this group overcome treatment barriers associated with stigma and mental health knowledge. Before MHL promotion interventions can be developed for Black youth, though, it is vital to know where their MHL currently stands, one of the major goals of this work.





# METHODS

- Eligible participants for the study were **Black** youth, between the ages of **14-25 years old**, from **Allegheny County, PA**.
- Participants were recruited through virtual/in-person recruitment events, study advertisements by community partners, and paid social media posts.
- Survey data was collected from Dec 2021 - Aug 2022.
- A total of **290** youth participated in the study.
  - **139** 14-17 year olds
  - **151** 18-25 year olds
- Every participant was offered a \$15 incentive.



# SURVEY MEASURES

## Mental Health Literacy

- 14-17 year olds: Revised Mental Health Literacy Questionnaire for Young People [MHLq-YP]
- 18-25 year olds: Revised Mental Health Literacy Questionnaire for Young Adults [MHLq-YA]

## Subjective Social Status

- 14-17 year olds: MacArthur Scale of Subjective Social Status - Youth Version [MSSSS-Y]
- 18-25 year olds: MacArthur Scale of Subjective Social Status - Adult Version [MSSSS-A]

## Depression

- All participants: Patient Health Questionnaire - 8 [PHQ-8]

## Anxiety

- 14-17-year-olds: Screen for Child Anxiety Related Emotional Disorders - 5 items [SCARED-5]
- 18-25-year-olds: General Anxiety Disorder-7 [GAD-7]

## General Demographic Info

- All participants: Study Demographic Questionnaire

# RESULTS

Data from the 14-17 and 18-25 surveys were analyzed separately.

Below are our findings:

## MHLq-YP: 14-17 Year Old Data ( $n = 139$ )

### Sample Characteristics

Demographic Questionnaire Variables	Descriptive Statistics and Frequencies
Age	Average Age: 15.30
Gender [Could Choose More Than 1]	Female/Woman: 77 Male/Man: 53 Non-Binary/Non-Conforming: 6 Choice Not Listed: 4 Prefer Not to Respond: 2
Grade Level	9th: 62 10th: 44 11th: 20 12th: 13
Prior Participation in Mental Health Programming	Yes: 37 No: 90 I Don't Know: 12
Prior Mental Illness Diagnosis	Yes: 29 No: 95 I Don't Know: 15
Knows Someone with Mental Health Problems	Yes: 98 No: 26 I Don't Know: 15



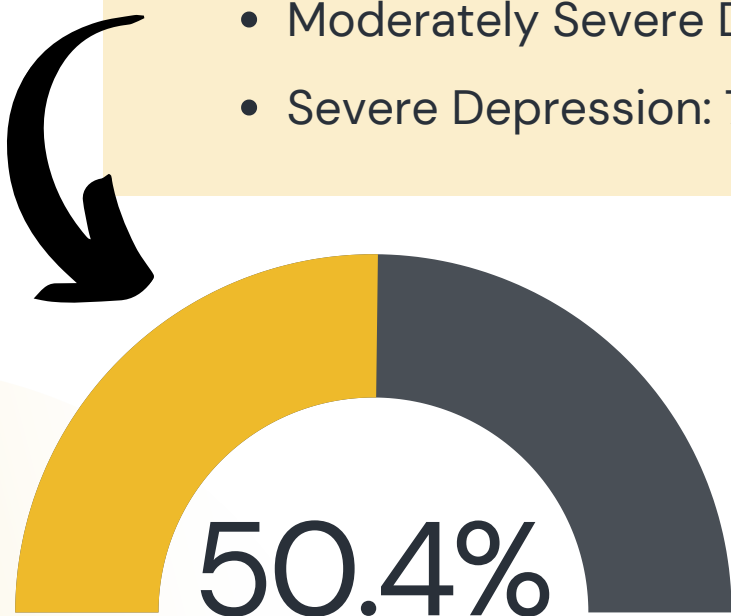
# RESULTS

## MHLq-YP: 14-17 Year Old Data

### Overall Sample Mental Health Status [PHQ-8 for Depression; SCARED-5 for Anxiety]

#### Depression

- No or Minimal Depression: 23%
- Mild Depression: 26.6 %
- Moderate Depression: 25.9%
- Moderately Severe Depression: 17.3%
- Severe Depression: 7.2%



of youth aged 14-17  
endorsed **moderate  
to severe depressive  
symptomatology.**

#### Anxiety

48.2%

of youth had  
SCARED-5 scores  
that **indicated  
problems with  
anxiety.**

# RESULTS

## MHLq-YP: 14-17 Year Old Data

### Notable Group Differences In Overall MHL

Knowing someone with a mental illness was associated with **higher** overall MHL scores.

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### Important terms:

- ***Points of Pride:*** Items in which there were high rates of participants that answered in a desired fashion
  - ***Areas for Growth:*** Items in which participants answered in an undesirable or neutral fashion
-

# RESULTS

## MHLq-YP: 14-17 Year Old Data

### MHLq-YP Component 1: Help-Seeking & First Aid Skills

#### *Points of Pride*

Question	Percentage of favorable responses
Q1: If my friend developed a mental illness, I would try to support them.	[Agree or Strongly Agree: 95.7%]
Q13: If my friend had a mental illness, I would listen to them and not make fun of them.	[Agree or Strongly Agree: 94.3%]

#### *Areas for Growth*

Mental Health Help-Seeking for Self	
Question	Percentage of unfavorable responses
Q5: If I had a mental illness, I would ask my family for help.	[Neither Agree nor Disagree, Disagree, or Strongly Disagree: 45.4%]
Q10: If I had a mental illness, I would get help from a counselor.	[Neither Agree nor Disagree, Disagree, or Strongly Disagree: 44.7%]
Q20: If I had a mental illness, I would go to my friends for help.	[Neither Agree nor Disagree, Disagree, or Strongly Disagree: 42.5%]

# RESULTS

## MHLq-YP: 14-17 Year Old Data

### MHLq-YP Component 1: Help-Seeking & First Aid Skills

#### *Areas for Growth Continued*

Mental Health First Aid Provision for a Friend	
Question	Percentage of unfavorable responses
Q6: If my friend had a mental illness, I would tell them to talk to a counselor.	[Neither Agree nor Disagree, Disagree, or Strongly Disagree: 24.5%]
Q19: If my friend had a mental illness, I would encourage them to see a doctor.	[Neither Agree nor Disagree, Disagree, or Strongly Disagree: 27.4%]
Q24: If my friend had a mental illness, I wouldn't be able to help them.	[Neither Agree nor Disagree, Disagree, or Strongly Disagree: 47.5%]
Mental Health Help-Seeking for a Friend	
Question	Percentage of unfavorable responses
Q8: If my friend developed a mental illness, I would talk to their mom or dad.	[Neither Agree nor Disagree, Disagree, or Strongly Disagree: 62.6%]
Q29: If my friend had a mental illness, I would talk to an adult at school.	[Neither Agree nor Disagree, Disagree, or Strongly Disagree: 63.3%]

# RESULTS

## MHLq-YP: 14-17 Year Old Data

### MHLq-YP Component 2: Knowledge/Stereotypes on Mental Health Problems

#### *Points of Pride*

Question	Percentage of favorable responses
Q11: Certain things may make a person with high anxiety really scared.	[Agree or Strongly Agree: 89.9%]
Q16: The sooner someone finds out they have a mental illness and gets help, the better.	[Agree or Strongly Agree: 82%]
Q17: Only grown-ups have mental illnesses.	[Disagree or Strongly Disagree: 92%]
Q22: One sign of being depressed is no longer liking or wanting to do things.	[Agree or Strongly Agree: 79.9%]
Q23: A person with anxiety avoids things that may stress them out.	[Agree or Strongly Agree: 82.8%]

# RESULTS

## MHLq-YP: 14-17 Year Old Data

### MHLq-YP Component 2: Knowledge/Stereotypes on Mental Health Problems

#### *Points of Pride Continued*

Question	Percentage of favorable responses
Q26: Depression is not a real mental illness.	[Agree or Strongly Agree: 80.5%]
Q28: Mental illnesses can change what and how people think.	[Agree or Strongly Agree: 87.1%]

#### *Areas for Growth*

Knowledge of Schizophrenia (and potentially other serious mental illnesses)	
Question	Percentage of unfavorable responses
Q4: People with schizophrenia sometimes think that bad people are out to get them.	[Neither Agree nor Disagree, Disagree, or Strongly Disagree: 47.5%]
Q31: Someone with schizophrenia may see and hear things that no one else does.	[Neither Agree nor Disagree, Disagree, or Strongly Disagree: 33.1%]

# RESULTS

## MHLq-YP: 14-17 Year Old Data

### MHLq-YP Component 2: Knowledge/Stereotypes on Mental Health Problems

#### *Areas for Growth Continued*

##### Connections between Substance Use and Mental Health

Question	Percentage of unfavorable responses
Q14: Drinking a lot of alcohol can be a sign of mental illness.	[Neither Agree nor Disagree, Disagree, or Strongly Disagree: 30.2%]
Q27: Using drugs may be a sign of mental illness.	[Neither Agree nor Disagree, Disagree, or Strongly Disagree: 28.7%]

##### Knowledge of Mental Health Stressors/Causes

Question	Percentage of unfavorable responses
Q12: Not having enough money can hurt your mental health.	[Neither Agree nor Disagree, Disagree, or Strongly Disagree: 51.1%]
Q33: Situations that stress you out a lot may cause mental illnesses.	[Neither Agree nor Disagree, Disagree, or Strongly Disagree: 33.9%]
Q18: If your brain does not work correctly, it can cause mental illnesses.	[Neither Agree nor Disagree, Disagree, or Strongly Disagree: 65.4%]

# RESULTS

## MHLq-YP: 14-17 Year Old Data

### MHLq-YP Component 2: Knowledge/Stereotypes on Mental Health Problems *Areas for Growth Continued*

#### Impacts of Mental Illnesses/Mental Illness Symptomatology

Question	Percentage of unfavorable responses
Q3: A person with depression feels very sad.	[Neither Agree nor Disagree, Disagree, or Strongly Disagree: 32.4%]
Q7: Mental illnesses usually don't change how people act.	[Neither Agree nor Disagree, Agree, or Strongly Agree: 37.6%]
Q15: Mental illnesses don't change the way people feel.	[Neither Agree nor Disagree, Agree, or Strongly Agree: 31.7%]

#### Knowledge of Diagnostic Criteria

Question	Percentage of unfavorable responses
Q25: Knowing how long someone has had signs of mental illness will help tell if they have one or not.	[Neither Agree nor Disagree, Disagree, or Strongly Disagree: 48.2%]

### Notable Group Differences

Having a prior mental health diagnosis, knowing someone with a mental illness, and perceiving their family as having a lower SES were associated with higher scores on this component of MHL.



# RESULTS

## MHLq-YP: 14-17 Year Old Data

### MHLq-YP Component 3: Self-Help Strategies

#### *Areas for Growth*

Question	Percentage of unfavorable responses
Q2: Working out can improve your mental health.	Neither Agree nor Disagree, Disagree, or Strongly Disagree: 32.4 %
Q9: Good sleep helps to improve mental health.	Neither Agree nor Disagree, Disagree, or Strongly Disagree: 38.8%
Q21: Having a balanced diet helps to improve mental health	Neither Agree nor Disagree, Disagree, or Strongly Disagree: 46.1%
Q30: Doing fun stuff helps to improve mental health.	Neither Agree nor Disagree, Disagree, or Strongly Disagree: 35.3
Q32: Talking to someone about your problems can help your mental health.	Neither Agree nor Disagree, Disagree, or Strongly Disagree: 24.4%

#### **Notable Group Differences**

Boys and youth with higher perceived social status scored higher on this component.

# RESULTS

## MHLq-YA: 18-25 Year Old Data ( $n = 151$ )

### Sample Characteristics

Demographic Questionnaire Variables	Descriptive Statistics and Frequencies
Age	Average Age: 21.32
Gender [Could Choose More Than 1]	Female/Woman: 103 Male/Man: 39 Transgender: 2 Non-Binary/Non-Conforming: 12
School Level	High School: 15 Undergrad: 47 Grad/Professional: 30 Not in School: 59
High School Grade Level	12th: 15
Undergraduate School Class	Freshman/First Year: 15 Sophomore/Second Year: 8 Junior/Third Year: 13 Senior/Fourth Year: 9 Fifth Year Student: 2
Prior Participation in Mental Health Programming	Yes: 63 No: 80 I Don't Know: 8
Prior Mental Illness Diagnosis	Yes: 86 No: 58 I Don't Know: 6
Knows Someone with Mental Health Problems	Yes: 131 No: 17 I Don't Know: 3

# RESULTS

## MHLq-YA: 18-25 Year Old Data

Overall Sample Mental Health Status:

[PHQ-8 Data]

### Depression

- No or Minimal Depression: **20.5%**
- Mild Depression: **29.1 %**
- Moderate Depression: **27.8%**
- Moderately Severe Depression: **14.6%**
- Severe Depression: **7.9%**



**50.3%**

of youth aged 18-25  
endorsed **moderate to  
severe** depressive  
symptomatology.

# RESULTS

## MHLq-YA: 18-25 Year Old Data

Overall Sample Mental Health Status:

[GAD-7 Data]

### Anxiety

- Minimal Anxiety: **26.5%**
- Mild Anxiety: **21.2 %**
- Moderate Anxiety: **32.5%**
- Severe Anxiety: **19.9%**



**52.3%**

of youth aged 18-25  
endorsed **moderate to  
severe** anxious  
symptomatology.

# RESULTS

## MHLq-YA: 18-25 Year Old Data

### **Notable Group Differences In Overall MHL**

- Knowing someone with a mental illness was associated with higher overall MHL scores.
- Having a moderate level of anxious symptomatology or higher was associated with lower overall MHL scores.

# RESULTS

## MHLq-YA: 18-25 Year Old Data

### MHLq-YA Component 1: Knowledge of Mental Health Problems

#### *Points of Pride*

Question	Percentage of favorable responses
Q3: People with schizophrenia usually have delusions (e.g., they may believe they are constantly being followed and observed).	[Agree or Strongly Agree: 79.4%]
Q9: A person with anxiety disorder may panic in situations that they fear.	[Agree or Strongly Agree: 97.3.%]
Q12: Alcohol use can be a sign of mental disorders.	[Agree or Strongly Agree: 74.1%]
Q19: One of the symptoms of depression is the loss of interest or pleasure in most things.	[Agree or Strongly Agree: 97.4%]
Q23: Drug addiction may be a sign of mental disorders.	[Agree or Strongly Agree: 85.5%]
Q24: Mental disorders can affect people's thoughts.	[Agree or Strongly Agree: 80.5%]
Q26: A person with schizophrenia may see and hear things that nobody else sees and hears.	[Agree or Strongly Agree: 92.7%]
Q27: Highly stressful situations may cause mental disorders.	[Agree or Strongly Agree: 90.1%]

# RESULTS

## MHLq-YA: 18-25 Year Old Data

### MHLq-YA Component 1: Knowledge of Mental Health Problems

#### *Areas for Growth*

Mental Illness Symptomatology	
Question	Percentage of unfavorable responses
Q2: A person with depression feels very miserable.	[Neither Agree nor Disagree, Disagree, or Strongly Disagree: 28.5%]
Knowledge of Mental Health Stressors/Causes	
Question	Percentage of unfavorable responses
Q16: Changes in brain function may lead to the onset of mental disorders.	[Neither Agree nor Disagree, Disagree, or Strongly Disagree: 21.2%]
Knowledge of Diagnostic Criteria	
Question	Percentage of unfavorable responses
Q21: How long someone has experienced symptoms is one of the important criteria for the diagnosis of a mental disorder.	[Neither Agree nor Disagree, Disagree, or Strongly Disagree: 50.4%]

#### **Notable Group Differences In Overall MHL**

Having a prior mental health diagnosis and knowing someone with a mental illness were associated with higher scores on this component of MHL.

# RESULTS

## MHLq-YP: 18-25 Year Old Data

### MHLq-YA Component 2: Erroneous Beliefs/Stereotypes

#### *Points of Pride*

Question	Percentage of favorable responses
Q6: Mental disorders usually don't affect people's behaviors.	[Disagree or Strongly Disagree: 95.4%]
Q10: The stress of living in poverty can make mental health symptoms worse.	[Agree or Strongly Agree: 94.7%]
Q11: If someone close to me had a mental disorder, I would listen to them without judging or criticizing.	[Agree or Strongly Agree: 96.7%]
Q13: Mental disorders don't affect people's feelings.	[Disagree or Strongly Disagree: 90.1%]
Q14: The sooner mental disorders are identified and treated, the better.	[Agree or Strongly Agree: 90.1%]



# RESULTS

## MHLq-YP: 18-25 Year Old Data

### MHLq-YA Component 2: Erroneous Beliefs/Stereotypes

#### *Points of Pride Continued*

Question	Percentage of favorable responses
Q15: Only adults have mental disorders.	[Disagree or Strongly Disagree: 94.7%]
Q20: If someone close to me had a mental disorder, I could not be of any assistance.	[Disagree or Strongly Disagree: 76.8%]
Q22: Depression is not a true mental disorder.	[Disagree or Strongly Disagree: 85.4%]

#### **Notable Group Differences**

Being female, transgender, non-binary/non-conforming, and knowing someone with a mental illness were all associated with higher scores on this component.

Having a higher perceived social status, lower perceived SES, or moderate to severe levels of depressive/anxious symptomatology were associated with lower scores on this factor.

# RESULTS

## MHLq-YA: 18-25 Year Old Data

### MHLq-YA Component 3: Help-Seeking & First Aid Skills

#### *Points of Pride*

Question	Percentage of favorable responses
Q5: If someone close to me had a mental disorder, I would encourage them to see a mental health professional.	Agree or Strongly Agree: 92.1%
Q8: If I had a mental disorder, I would see a mental health professional.	Agree or Strongly Agree: 80.8%

#### *Areas for Growth*

Question	Percentage of unfavorable responses
Q4: If I had a mental disorder, I would go to my family for help.	Neither Agree nor Disagree, Disagree, or Strongly Disagree: 57.6%
Q17: If I had a mental disorder, I would go to my friends for help.	Neither Agree nor Disagree, Disagree, or Strongly Disagree: 52.4%

#### **Notable Group Differences**

Having a prior mental health diagnosis, a higher perceived social status or SES, and moderate to severe levels of depressive/anxious symptomatology were associated with having lower scores on this component of MHL.

# RESULTS

## MHLq-YA: 18-25 Year Old Data

### MHLq-YA Component 4: Self-Help Strategies

#### *Points of Pride*

Question	Percentage of favorable responses
Q1: Physical exercise can contribute to good mental health.	Agree or Strongly Agree: 85.4%
Q25: Doing something enjoyable can contribute to good mental health.	Agree or Strongly Agree: 82.8%

#### *Areas for Growth*

Question	Percentage of unfavorable responses
Q7: Good sleep may help to improve mental health.	Neither Agree nor Disagree or Disagree: 27.2%
Q18: A balanced diet can contribute to good mental health.	Neither Agree nor Disagree, Disagree, or Strongly Disagree: 29.8%

#### **Notable Group Differences**

- Having a higher perceived social status was associated with higher scores on this component.
- Having a moderate to severe level of depressive symptomatology was associated with lower scores on this component.

# MAJOR FINDINGS & IMPLICATIONS

- 1.** Knowing someone with a mental illness was **associated with higher MHL scores** for youth, providing evidence that increasing exposure to people living with mental illnesses may be a worthwhile path to decrease mental health-related stigma.
- 2.** **Large numbers of youth**, across both age groups, **did not agree** with the idea that they would seek mental health support from any of the listed non-professional sources (friends, family, adults at school). Future work should **ask youth** what they need from these potential sources of mental health support to increase help-seeking behaviors.
- 3.** 18-25-year-old participants that endorsed high levels of depressive and/or anxious symptomatology had **lower MHL scores**. This finding suggests that MHL promotion efforts should include continued assessment of mental health status and potentially create specialized content for youth with high levels of mental illness symptomatology.

# NEXT STEPS

**Conduct Focus Groups**

**Further revision of the survey measure**

**Conduct a larger-scale survey among youth in both Allegheny County, PA and Nashville, TN**

# Acknowledgements

## Contributing Scholars



**Dr. James  
Huguley**



**Dr. Christina  
Newhill**



**Dr. Jaime  
Booth**



**Dr. Ana  
Radovic**

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## Funders

*The Staunton Farm Foundation*

*The University of Pittsburgh Center  
on Race and Social Problems*

# Acknowledgements

## Community Partners



The Mentoring Partnership  
YouthPlaces



Allegheny HealthChoices, Inc

Human Services Center in Turtle Creek

The Neighborhood Academy

Boys and Girls Club of Western PA



UpStreet pgh

Consortium for Public Education

Steel Smiling

CEC Homewood

Youth Empowerment Services

Kingsley Association

Wesley Family Services

Center of Life



Homewood Children's Village

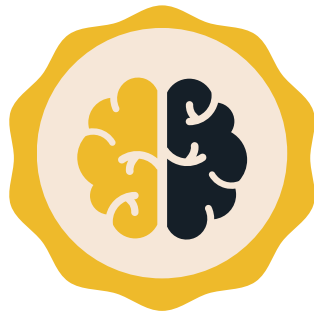
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Wilkinsburgh Community Development Center

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