

Myths & Misconceptions about Youth Mental Health, and what it means for youth in the Church

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Plan for today

**Context of youth
mental health**

**10 Myths &
Misconceptions**

**Questions &
practical**

What is mental health?

Depression
Anxiety
PTSD etc

**Mental
Wellness**

**Mental
health**

**Mental
illness**



Low distress

**High distress
+ Chronic**

How is youth mental health going in NZ?

- International trends show an increase in youth experiencing mental health challenges
- NZ matches this
- Mental wellbeing has dropped, particularly in last 10 years
 - Felt most by females, Māori, those in hardship, minority groups

Growing Up In NZ Study



- A longitudinal study of 6000 young people, across Auckland, Waikato representing wide range of life styles and demographics.
- Recently the “Now we are 15” research came out

Growing Up In NZ Study



- Young people with disabilities more likely to have worse mental health
- 72% of teens never self-harmed, 80% have never seriously considered suicide
- Discrimination had large effect on mental health
- Deprivation has role on mental health and self harm, i.e. food deprivation, housing insecurity, financial strain
- 84% have seen violence online
- 50% had come across sexual content online
- Good friendships protect against mental health which 84% of teens had
- Where teens were satisfied at school, far more likely to have good mental wellbeing

4 key drivers of poor mental health in NZ

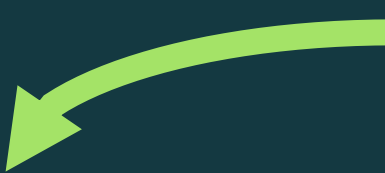


Uncertain futures

Racism & discrimination

Social Media & Safety
Online

Whanau Wellbeing &
Intergenerational
Connectedness

The Church is God's model village, & can provide all this

The village matters

Friendships, parents, schooling, wider community, intergenerational connection all matters

Galatians 6:10

Therefore, as we have opportunity, let us do good to all people, especially to those who belong to the family of believers.

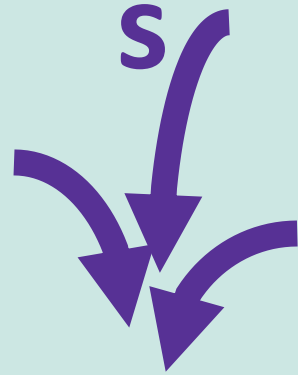
misconception

beliefs

myths

wonderings

assumptions



What questions do you have about youth mental health?

10 myths & misconceptions

And what it means for youth in the Church

#1 it's all the phones /video games

Research showing there are risks online & research showing there are benefits

When young people have good options for connection in real life, social media risk is lessened.

Action: Providing spaces for teens to connect, with the gospel, but also just with each other is highly protective

#2 it's all parenting

Parenting has a role, but so does the home environment as a whole, as well as school, peers & world events.

Research for treating mental health in teens almost always involves parents being highly involved.

Action: Supporting family stability, communication skills & parenting courses

#3 they just need more prayer

Prayer is always needed.

Where it is possible, action is also helpful.

- Supporting them individually
- Supporting the family
- Encouraging + supporting access to counselling or therapy

Action: Pray + Doing the Practical

James 2:15-16

'Suppose a brother or sister is without clothes and daily food, if one of you says to them "Go in peace, keep warm and well fed" but does nothing about their physical needs, what good is it?'

Nehemiah 4:9

'But we prayed to our God and posted a guard day & night to meet this threat.'

#4 It's a sign of sin

Not always a sign of sin, or faithlessness.

Human brains are learning machines – we are constantly interpreting the world around us.

In this, we form implicit beliefs about ourselves, other people, and the world around us.

Living in a fallen world, means we are exposed to things that are not true > beliefs form. Revealing the kingdom to people, means providing an environment that challenges these lies.

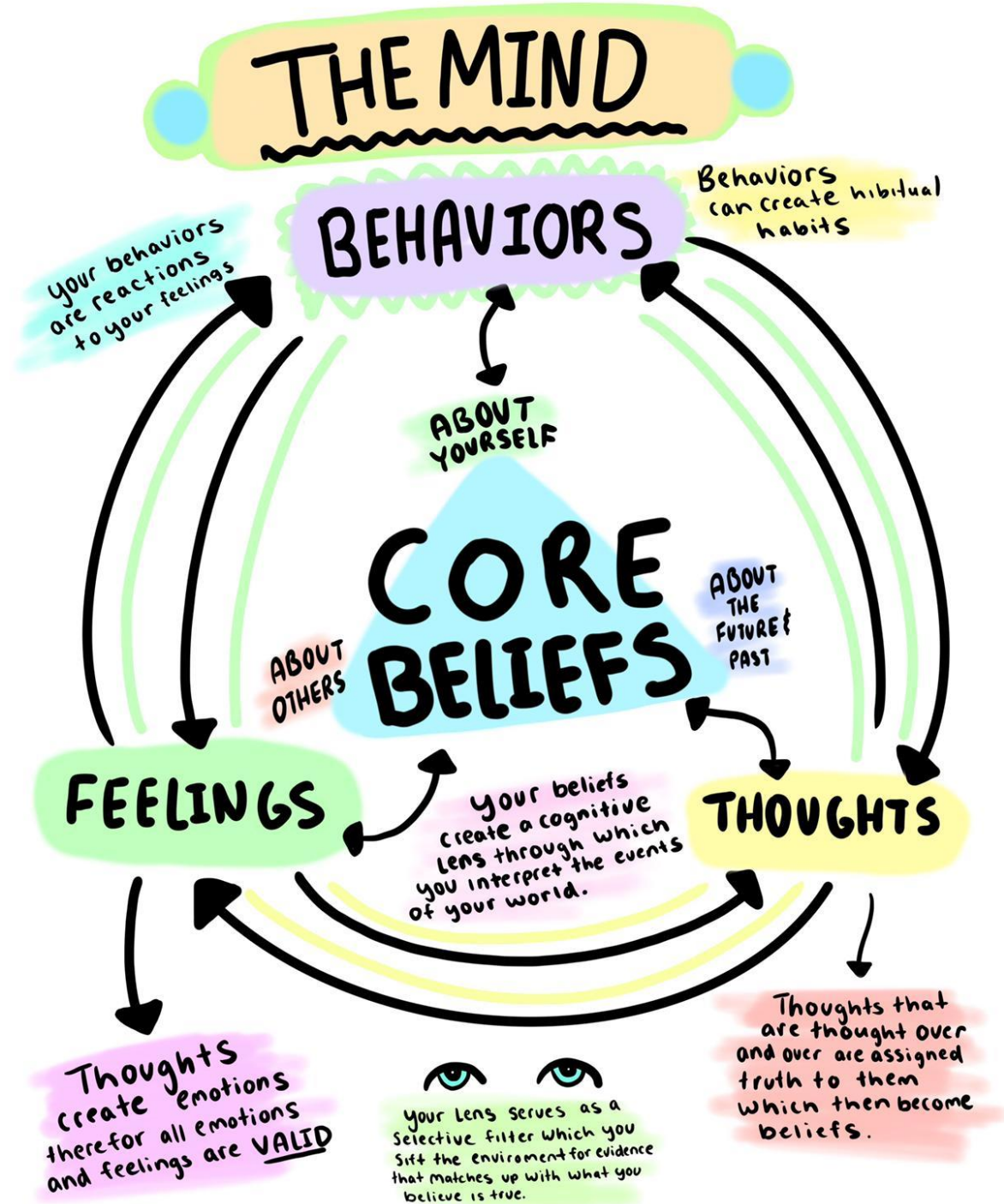
We can be 'loyal to lies' about our value

#4 It's a sign of sin

Learning to identify our implicit beliefs allows us to bring them to Jesus

Action:

- Being curious with teens about what sits beneath their feelings.
- Treating them with the graciousness of Christ.
- Challenging beliefs, not just verbally but through creating communities that disprove negative beliefs.



#5 they've got it for life

- Both are true – it can be either.
- Sometimes the pressure to get rid of mental health, keeps it present.
- Sometimes the pressure to be positive, is untruthful & keeps struggles going.
- What does a well life look like, while having mental health?

#5 it's a phase

Action:

Joining the young person wrestling in the now and not yet.

Learning how to grieve with family.

Holding hope & God's desire for healing + goodness.

Praying for transformation.



Luke 15: 11-32

When he came to his senses

Still their responsibility to realize – their choice

But while he was still a long way off

Waiting with hope & expectation - prayer

Filled with compassion

Soft & gentleness even though there is sin

Ran to his son, threw his arms

Seeking out – embracing in the midst

Bring the best robe

Honouring & caring, even when they have made those choices

So they began to celebrate

Being joyful & hopeful – future oriented

#6 everyone is _____ these days

The DSM (diagnostic manual) first released in 1952. 70 years is a very short time to develop understanding.

There are more diagnoses these days, and diagnoses are needed more these days.

Most professionals see diagnoses as descriptors not explanations. *The value is the understanding, not the identity.*

Action:

- Asking people what diagnoses mean for them – value of diagnosis varies person to person
- “glasses” metaphor
- An opportunity for curiosity

**Turn to person
next to you:**

One question you have

One person that comes to mind

One action point you are considering

#7 talking about suicide puts ideas into their head

- Research individual setting, asking about suicide does not increase risk.
- Murkier in groups, with mixed evidence due to not being able to tailor conversation and monitor people's experiences > hard for youth groups.
- Forced debriefing not wise > available debriefing is very wise.
- Always talk to someone – never manage independently
- No secrets, can't promise not to share

Action:

If you're worried, being willing to ask the question, and talk to others about it

Basic risk questions might include:

- Do you ever think about hurting yourself? (wide, open ended)
- What thoughts come into your head when you think like this?
- Do you have any specific plans / methods?

**Check your church policies/
guidance on this**

**IF IN DOUBT, CALL 111 OR
LOCAL CRISIS TEAM**

#7 talking about suicide puts ideas into their head

**Mental Health
Foundation**



#8 they need to just do _____

Complex diagnoses with combination of factors *i.e. 227 unique permutations to meet depression diagnosis and 636120 unique permutations of how can meet PTSD diagnosis*

= really complicated

= really varied person to person

#9 they can't be unwell, they're still doing _____

There's no one fix / treatment per diagnosis – things change with person & time. *This makes good advice giving hard.* Following guidance can make it seem like someone is doing better when they aren't yet.

Action:

Being curious about what behaviours / emotions / symptoms mean for that person

Supporting behaviour change but not over emphasizing it.

#10 mental health is only solved through therapy

Therapy works because it targets human nature / brain design.

The main evidence-based therapies match what the bible tells us about ourselves and our brains. Other approaches can have the same effect as therapy.

#10 mental health is only solved through therapy

Type of Therapy

Dialectic Behavioural Therapy

Cognitive Behavioural therapy

Family Therapy

Acceptance Commitment Therapy

Idea behind it:

Emotions aren't inherently true, & blindly obeying them doesn't help.

Thoughts aren't inherently true

How we relate to one another shapes our wellbeing

Struggling with non important things distracts us from the important stuff

How it works

Slowing down, noticing your emotions & choosing how you want to act

Believing truth & choosing how you want to act

Bringing to light family structures & relationship quality

Choosing to do what matters, and not get distracted

Verse

James 1:19b
Everyone should be quick to listen, slow to speak and slow to become angry

2 Cor 10:5b
...take every thought captive & make it obedient to Christ

Proverbs 22:6
Train up a child in the way he should go: and when he is old, he will not depart from it.

Romans 8:5-6
Those who live according to the flesh have their minds set on what the flesh desires; but those who live in accordance

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Therapy does not have the monopoly on wellness and human change

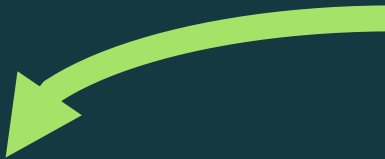
i.e. healthy communities, strong friendships, pastoral care and support, prayer, ministry, hobbies & sports

#10 mental health is only solved through therapy

Actions:

- **Skilled therapy is always advised as a way to make these gains**
- **If someone doesn't want therapy, other approaches can work > They still need to take responsibility for themselves in this**
- **If they aren't getting therapy - extra important that you are getting supervision or support so lines don't get blurry**
- **The village, alongside therapy is the ideal.**

stay curious - stay hopeful - stay present - pray

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