



**The State of Youth Mental Health in the Bay Area**

**2025 AIM Ideas Lab Report**

## OUR VISION

A world of mentally healthy youth.

## OUR MISSION

AIM is bridging the gap between research and access to care for youth struggling with their mental health by finding, funding, and implementing promising youth mental health research and empowering youth to discover their own mental health solutions.





## ABOUT THE AIM IDEAS LAB

### Empowering Teens to Address the Youth Mental Health Crisis

The AIM Ideas Lab is an innovative youth participatory action research program, designed to give young people a direct voice in addressing the youth mental health crisis.

Over the course of 8 weeks, high school students conduct peer-to-peer mental health research, gathering insights from their fellow students. They analyze the data to develop actionable solutions and use their findings to better understand the state of youth mental health in their communities and advocate for stronger support systems.

The AIM Ideas Lab empowers teens to lead the conversation around mental health and drive positive change in their communities.

## UNDERSTANDING TEEN MENTAL HEALTH

Mental health is a widespread and deeply felt concern among teens. Many carry heavy emotional burdens—often quietly and alone. There's an urgent need for youth-informed education, stronger school-based support, and open, judgment-free conversations across communities.

Teens are overwhelmed, anxious, and navigating family pressure, academic stress, and personal challenges. While common, these struggles show up differently and willingness to talk about them varies by gender and age. From anxiety and burnout to depression and unhealthy relationships, the challenges are wide-ranging, deeply personal, and often intensify over time.

Though many are quick to support a struggling friend, most hesitate to ask for help themselves—even when they want it. Stigma, fear of judgment, and concerns about confidentiality remain major barriers, especially when it comes to using school-based mental health resources.

Until support systems feel safe, relatable, and free from shame, they will go unused. This research calls for youth-informed solutions—at school, at home, and across communities—that meet teens where they are and remind them: you're not alone.

## KEY RECOMMENDATIONS

**Normalize and Promote Mental Health Support:** Schools should provide consistent, visible access to mental health resources and promote them regularly reducing stigma and encourage help-seeking.

**Promote Youth-Led Mental Health Campaigns:** Youth-led campaigns with peer stories reduce stigma, build empathy, and motivate students to care for themselves and others. Centering youth perspectives ensures mental health efforts are relevant, relatable, and resonate with those they aim to support.

**Create Anonymous Support Pathways:** Implementing anonymous, confidential ways for students to seek support can reduce stigma and help youth access existing school-based mental health resources.

**Strengthen Peer Support Systems:** Students often turn to peers first, and skill-building workshops to recognize signs of distress, support friends, and feel more confident reaching out for help themselves.

**Tailor Interventions by Gender and Grade:** Mental health concerns and barriers to support vary by gender and grade; strategies should be tailored to meet the unique needs of different student groups.

## RESEARCH APPROACH

**Youth Participatory Action Research (YPAR)** is an approach to research and social change that encourages young people to use their own perspectives and strengths to identify, study, and address issues that impact them.

**Research Objective:** Survey a demographically representative sample of teens in California to identify the most pressing mental health challenges they are facing and to explore potential strategies for addressing them effectively.

## RESEARCH METHODOLOGY

**Survey Development & Review:** Youth researchers developed a survey to explore pressing mental health issues affecting teens in their community. It was reviewed by AIM's Scientific Advisory Board to ensure clarity, impact, and adherence to research ethics guidelines

**Mixed-Methods Approach:** The survey consisted of 28 quantitative (frequencies, percentages) and 1 qualitative (open-ended response) questions.

**Survey Distribution:** The survey took ~ 10 min to complete and was distributed Feb 17 - 28, 2025, via word-of-mouth, text message, social media, and in select schools.

**1,623 youth in California** completed the survey.

# RESPONDENT DEMOGRAPHICS



## DEMOGRAPHIC INSIGHTS

- The geographic and demographic distribution reflects the identities and communities of the youth researchers leading the project in regard to county, school, gender, race/ethnicity, age and grade.
- Participation tended to be higher in schools where direct outreach took place or where school communities were already engaged with the program.
- The distribution of responses follows a long-tail pattern: a small group of schools contributed a large portion of responses, while the majority of schools had fewer participants.

## RESPONDENT DEMOGRAPHICS - SAMPLE SIZE

### TOTAL RESPONDENTS

**2025**

**272 RESPONDENTS**

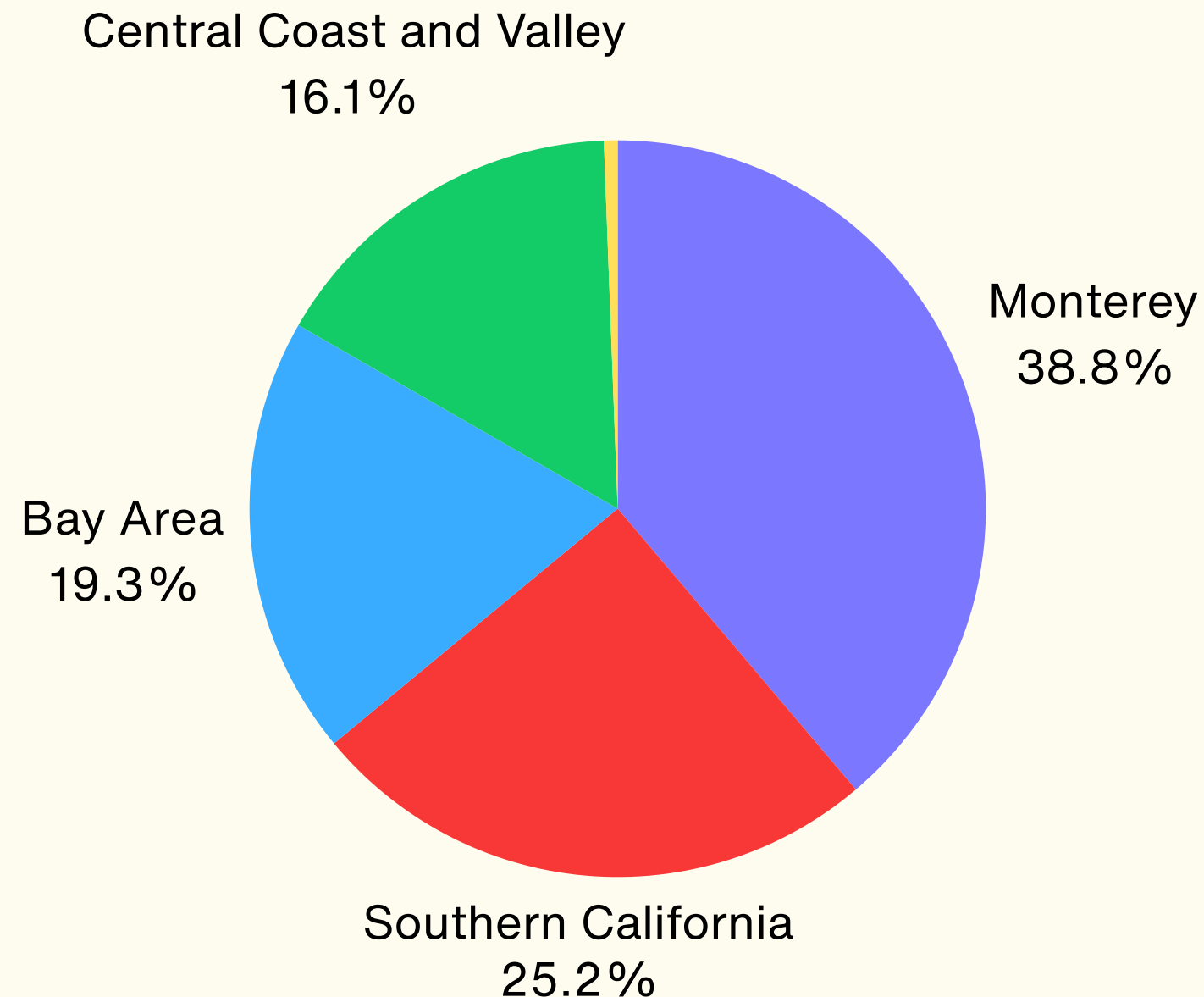
**2024**

**242 RESPONDENTS**

The youth researchers aimed for 384 respondents to ensure a statistically representative sample of teens in the Bay Area.



## RESPONDENT DEMOGRAPHICS - COUNTY REPRESENTATION



### Bay Area - County Representation

- Alameda – 35.7%
- Marin – 20.2%
- Solano – 20.2%
- Santa Clara – 15.5%
- Fremont – 2.1%
- San Mateo – 0.7%
- Contra Costa – 0.2%
- San Francisco – 0.2%
- Santa Cruz – 0.1%
- Napa – 0.1%
- Sonoma – 0.1%

Responses were collected from youth in 11 counties in the Bay Area.

This county distribution reflects the location of the youth researchers leading the project.

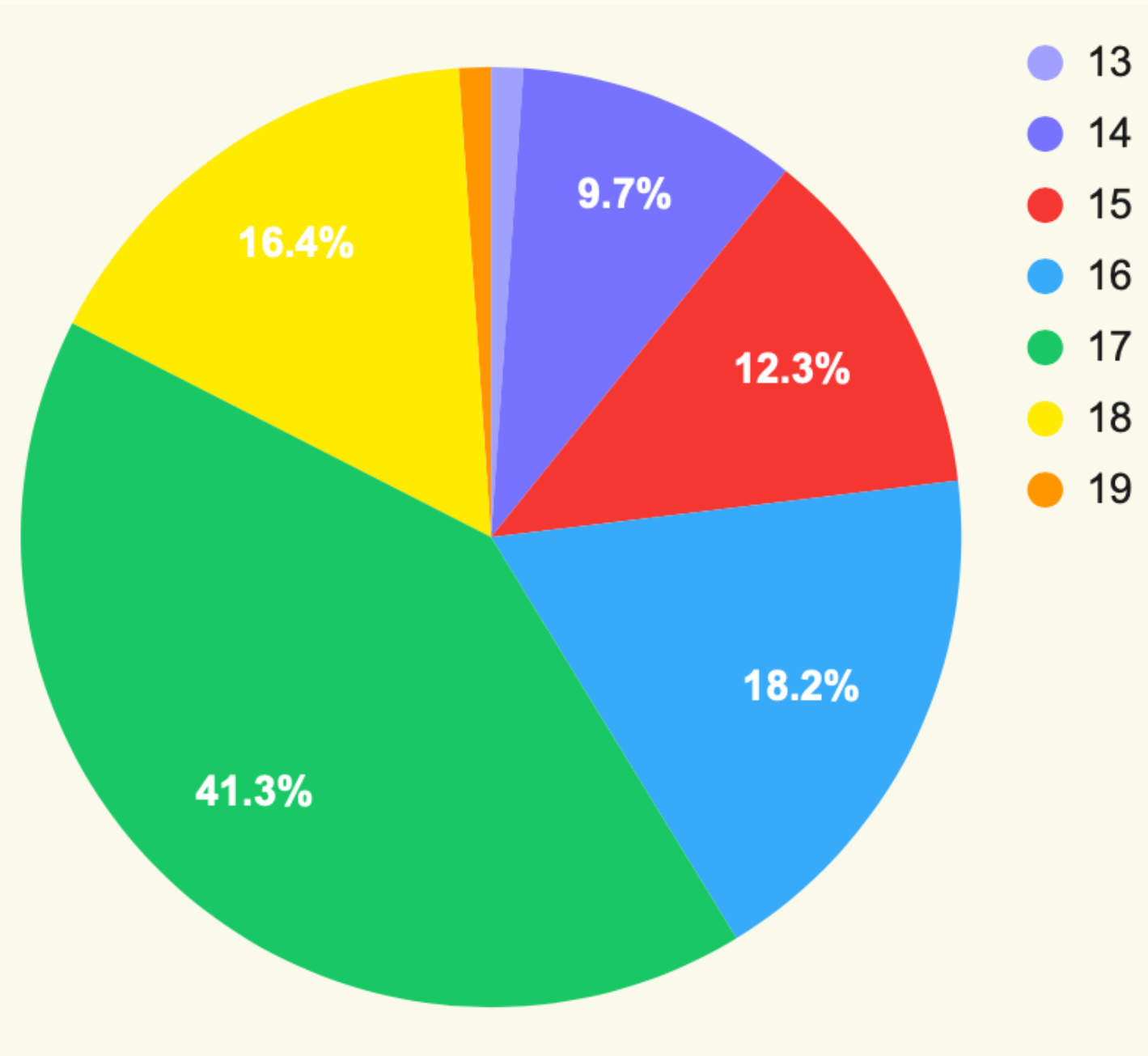
## RESPONDENT DEMOGRAPHICS - SCHOOL REPRESENTATION

Tier	# of Schools	Total Responses	% of Responses	Schools
<b>High Representation (75+ responses)</b>	1	86	31.6%	Irvington HS (86)
<b>Moderate Representation (10–75 responses)</b>	6	114	41.9%	Early College HS (31), Bishop O’Dowd School (24), San Domenico HS (19), San Marin HS (16), Angelo Rodriguez HS (14), Saint Patrick Saint Vincent HS (10)
<b>Broad Distribution. (&lt;10 responses)</b>	35	66	24.3%	<i>Burlingame HS (8), Archie Williams HS (7), Novato HS (6), Head Royce School (4), University Preparatory Academy (4), Redwood HS (3), Granada HS (3), The Branson School (2), Marin Catholic HS (1), Armijo HS (1), Lynbrook HS (1), Dougherty Valley HS (1), +</i>

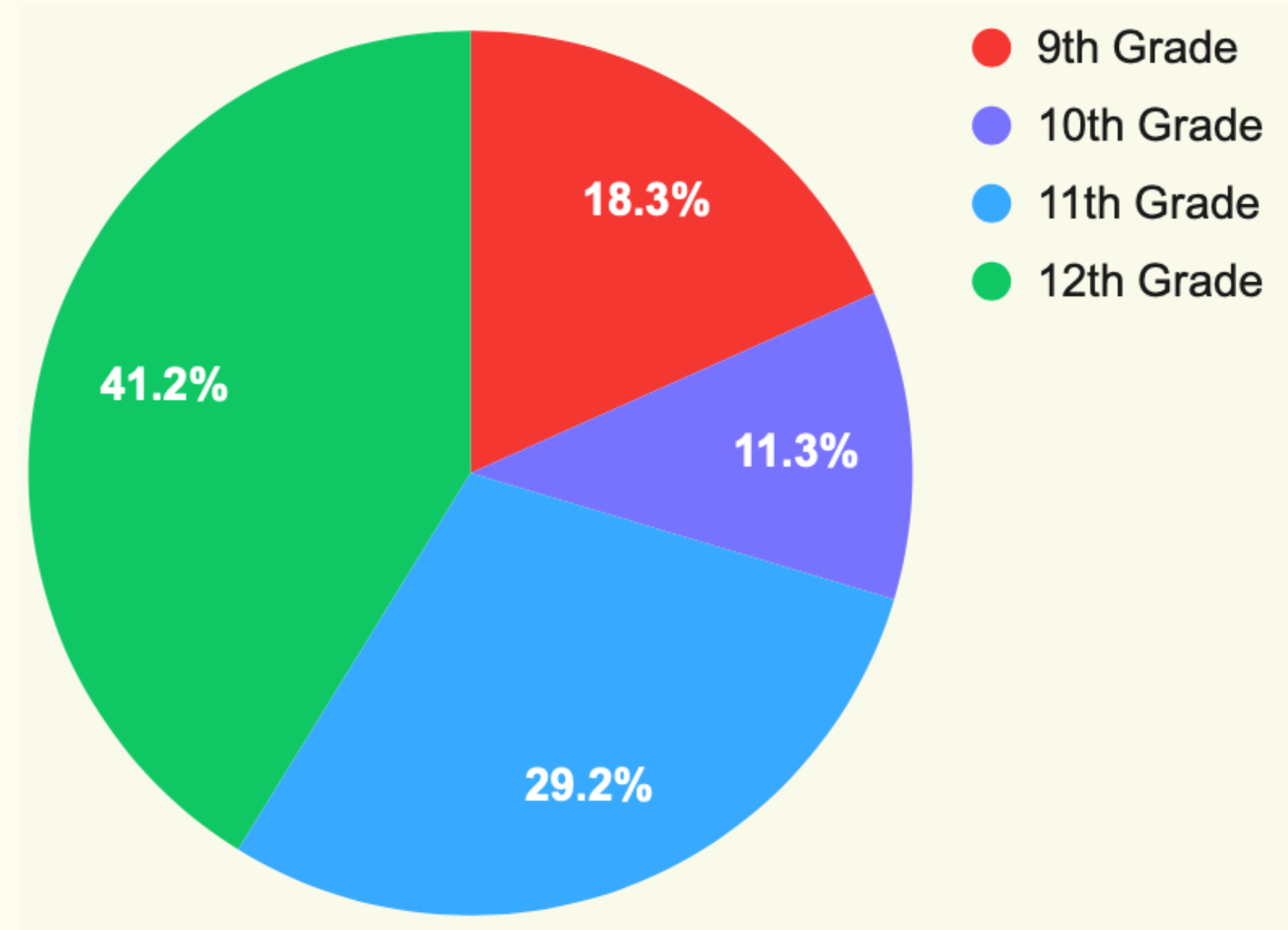


## RESPONDENT DEMOGRAPHICS - AGE & GRADE LEVEL

### AGE



### GRADE



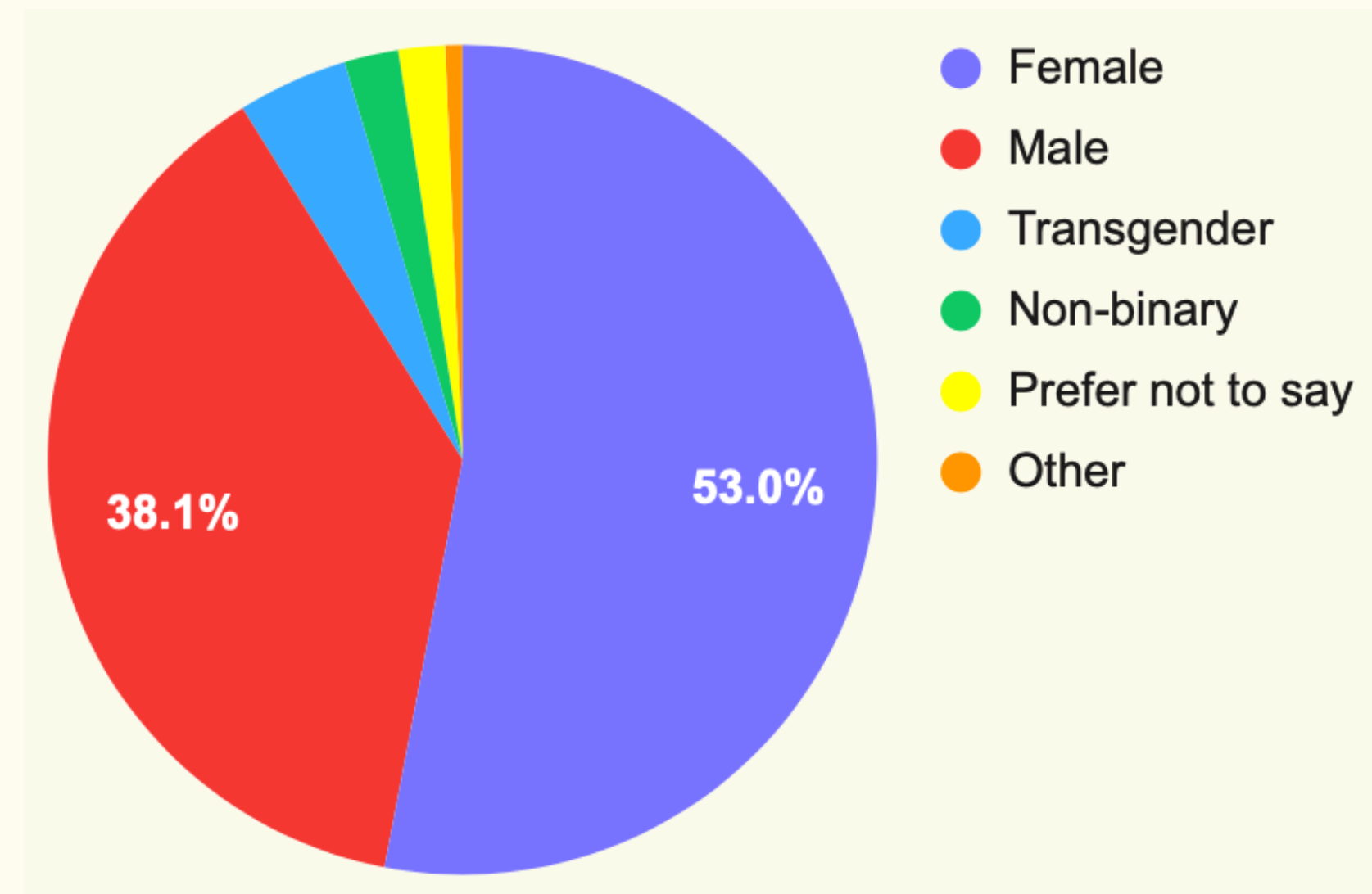
## RESPONDENT DEMOGRAPHICS - RACE & GENDER IDENTITY

### RACE AND ETHNICITY

Race/Ethnicity	Percent
Asian or Asian American	67.4%
White or Caucasian	32.6%
Latino/a or Hispanic	9.4%
Black or African American	3.0%
Middle Eastern or North African	2.2%
Native Hawaiian or Pacific Islander	2.2%
Indigenous or Native American	1.9%
Prefer not to say	1.1%
Other - Write In	0.7%

269 total respondents, includes 53 respondents who selected more than 1 racial/ethnic identity

### GENDER IDENTITY



269 total respondents, includes 12 respondents who selected more than 1 gender identity

# 2025 AIM IDEAS LAB FINDINGS

# **FACTORS AFFECTING YOUTH MENTAL HEALTH**

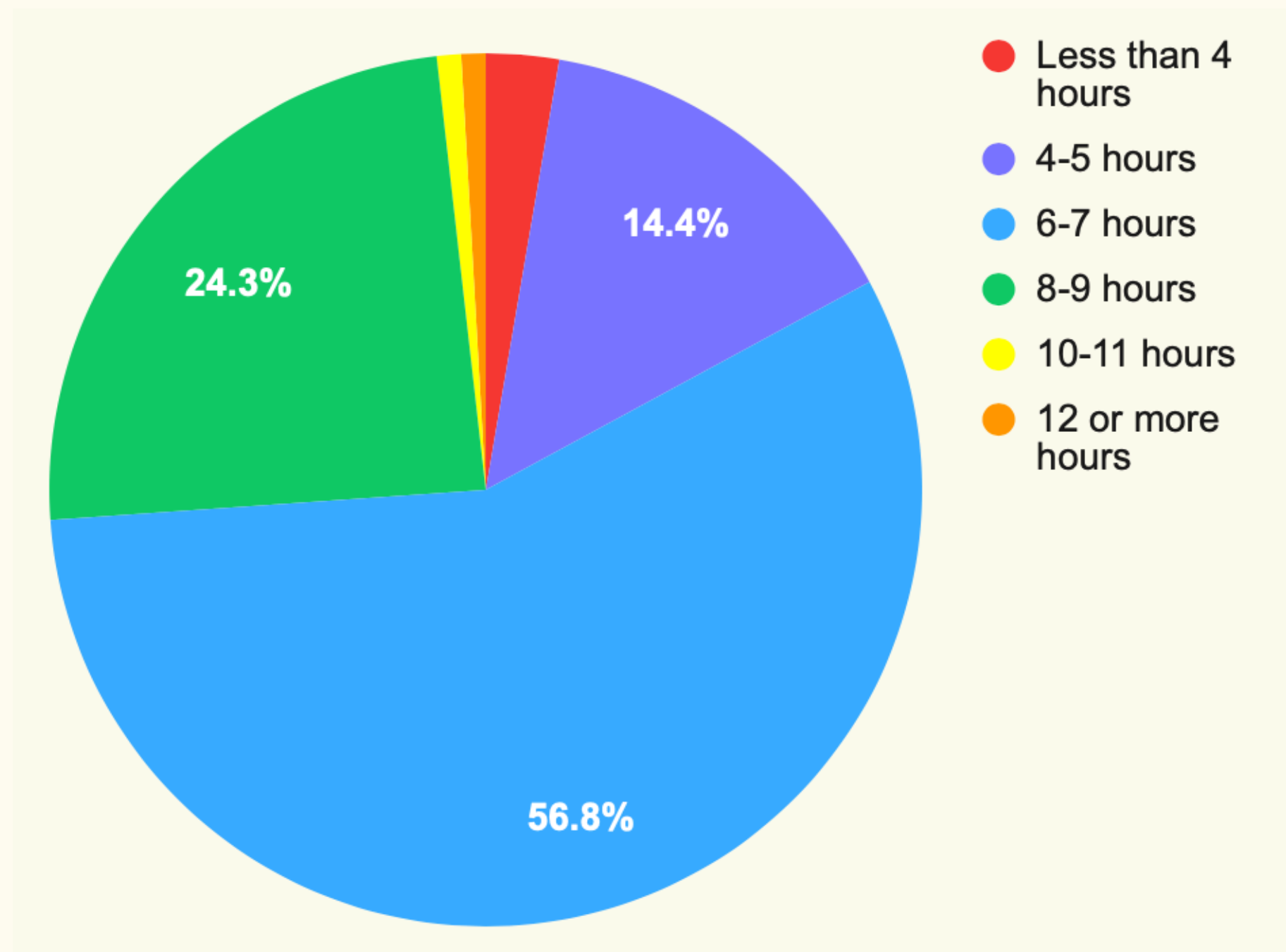


## FACTORS AFFECTING YOUTH MENTAL HEALTH

- 96% of teens in the Bay Area say sleep significantly affects their mental health, yet over two-thirds aren't getting enough sleep—and sleep declines with age.
- 95.0% of Bay Area teens take part in extracurriculars, with nearly one in four students spending more than 10 hours per week on extracurricular activities.
- Most of students (58.9%) feel overwhelmed on a weekly basis, if not daily.
- Female students report frequent overwhelm more often than males, who more commonly experience only occasional or rare stress.
- As academic and extracurricular demands increase, time management becomes more difficult—contributing to rising feelings of overwhelm that peak in 11th grade.
- The impact of self-image can fluctuate depending on the day, environment, or stressors. Female students were more likely to report negative self-esteem than male students.

## SLEEP HABITS

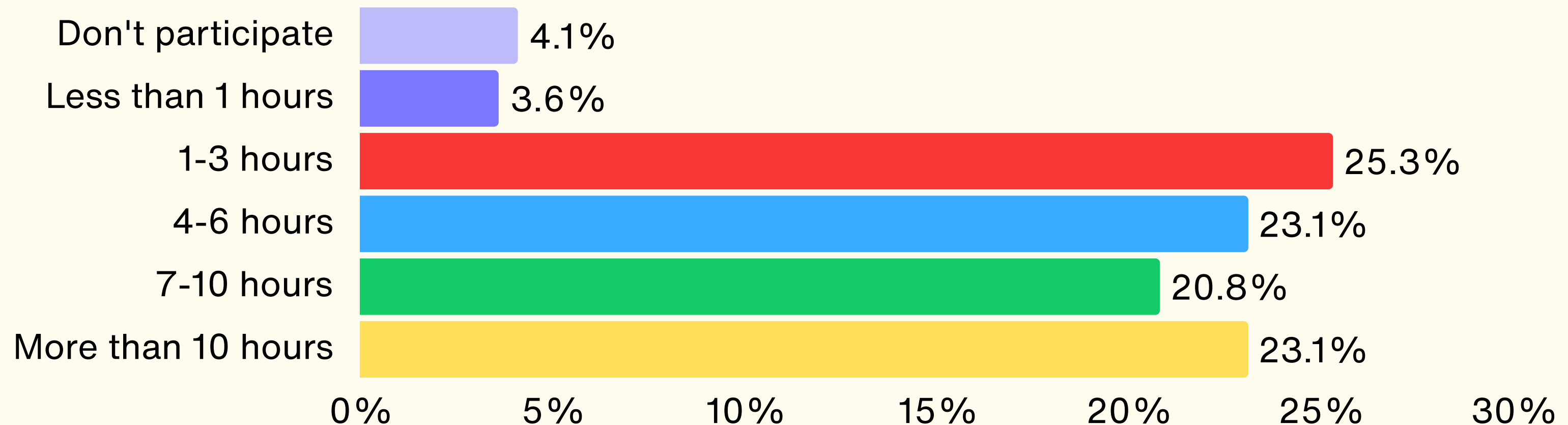
On average, how much sleep do you get per night?



- **Sleep Deficit:** 73.9% are not getting enough sleep (8–10 hours recc.).
  - 14.4% get only 4–5 hours.
  - 56.8% get 6–7 hours.
  - 24.3% get 8–9 hours.
  - 0.9% get 10+ hours.
- **Sleep Declines by Grade:** 11th and 12th graders are most likely to get 4-5 hours.

## PARTICIPATION IN EXTRACURRICULARS

How much time do you spend on extracurricular activities each week?



**95.9%** of Bay Area teens take part in extracurriculars, with **67.0%** spending at least four hours per week on extracurriculars in addition to time spent in school and homework. Nearly **1 in 4 respondents spend over 10 hours weekly** on extracurriculars.

## FEELINGS OF OVERWHELM

How often do you feel overwhelmed by balancing schoolwork, extracurriculars, family responsibilities, and/or a job?

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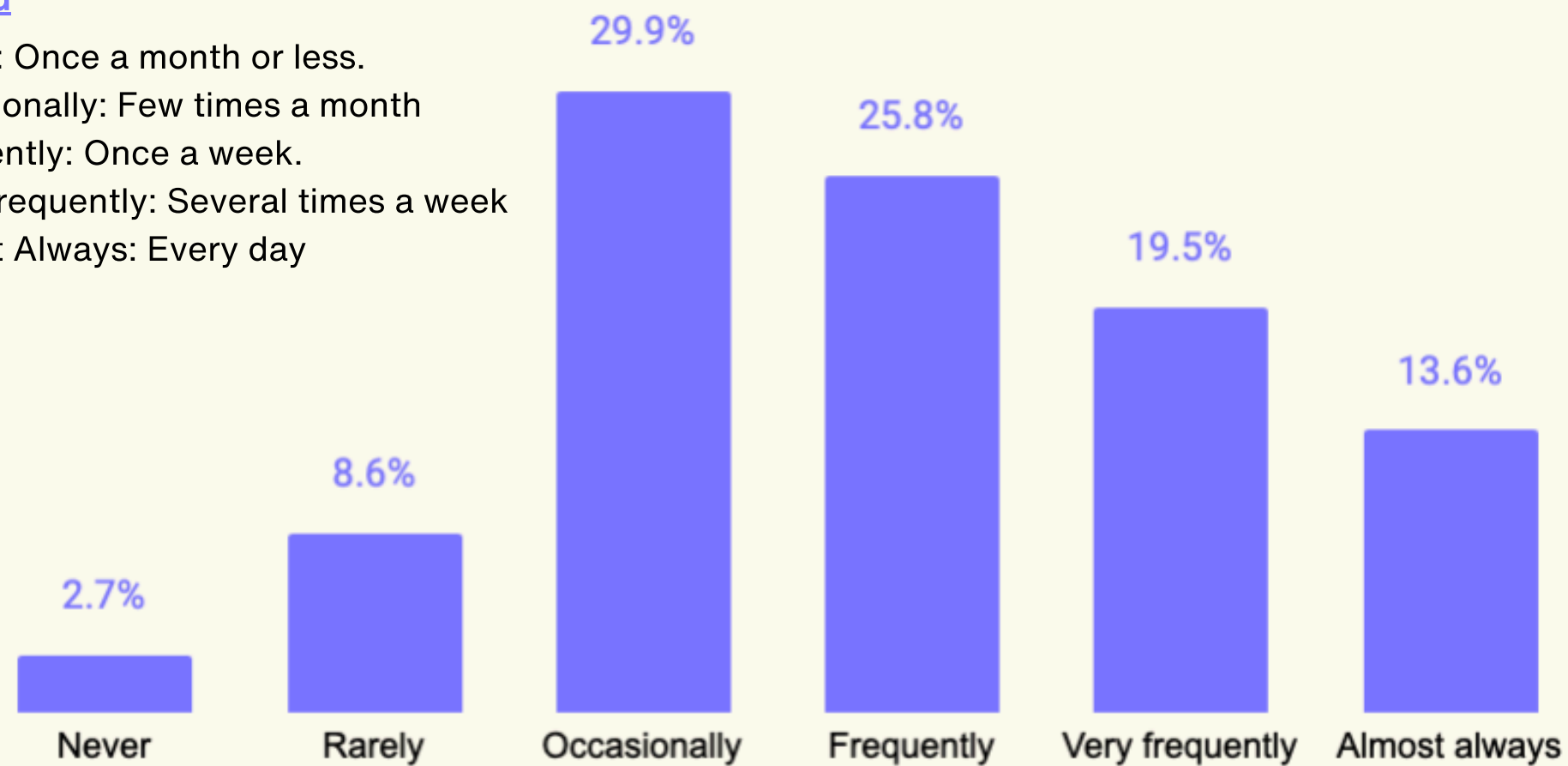
Rarely: Once a month or less.

Occasionally: Few times a month

Frequently: Once a week.

Very Frequently: Several times a week

Almost Always: Every day

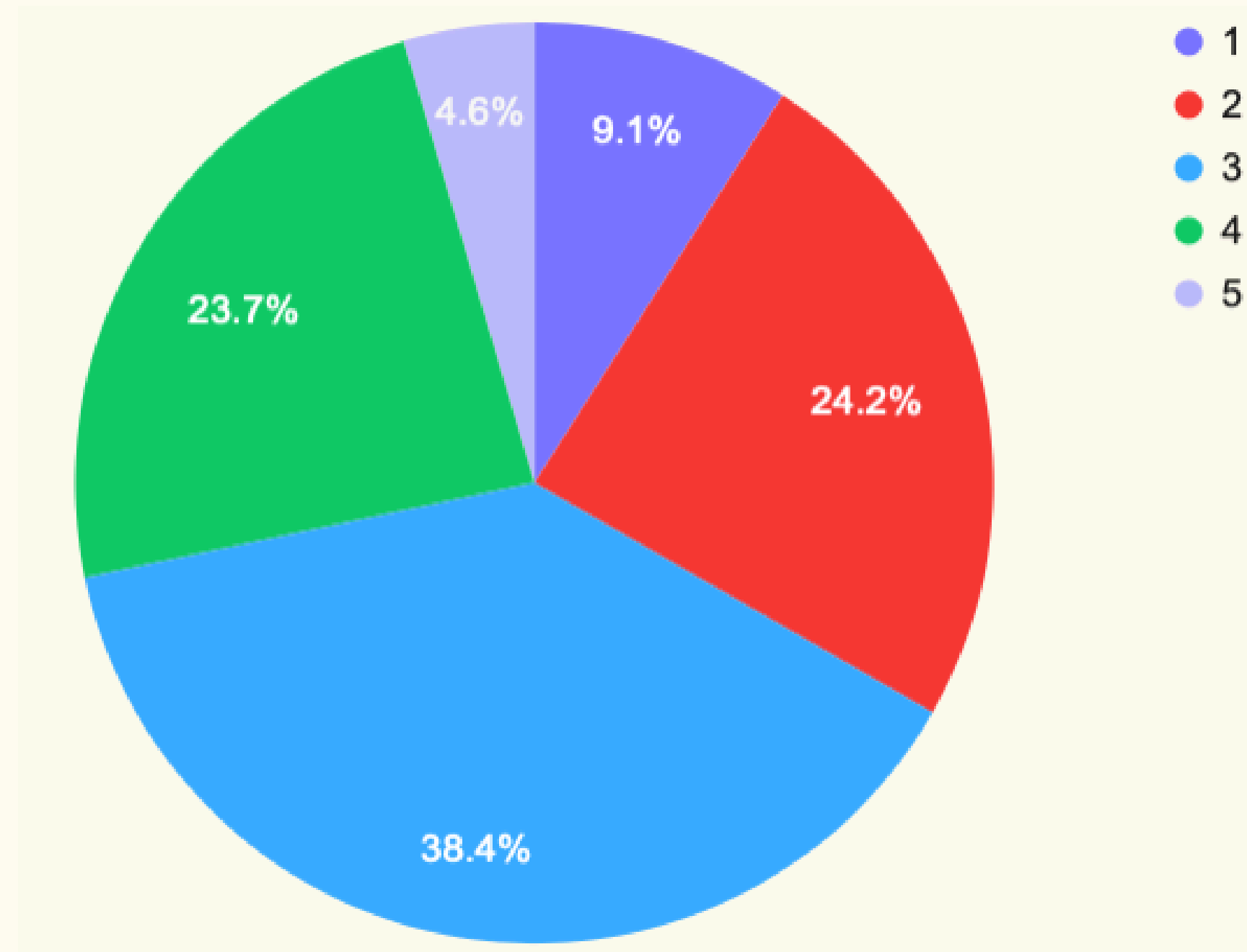


- Female students are more likely to feel overwhelmed frequently, while male students more often report occasional or rare stress.
- Feelings of overwhelm increase through 11th grade and peak in 12th grade.



## TIME MANAGEMENT

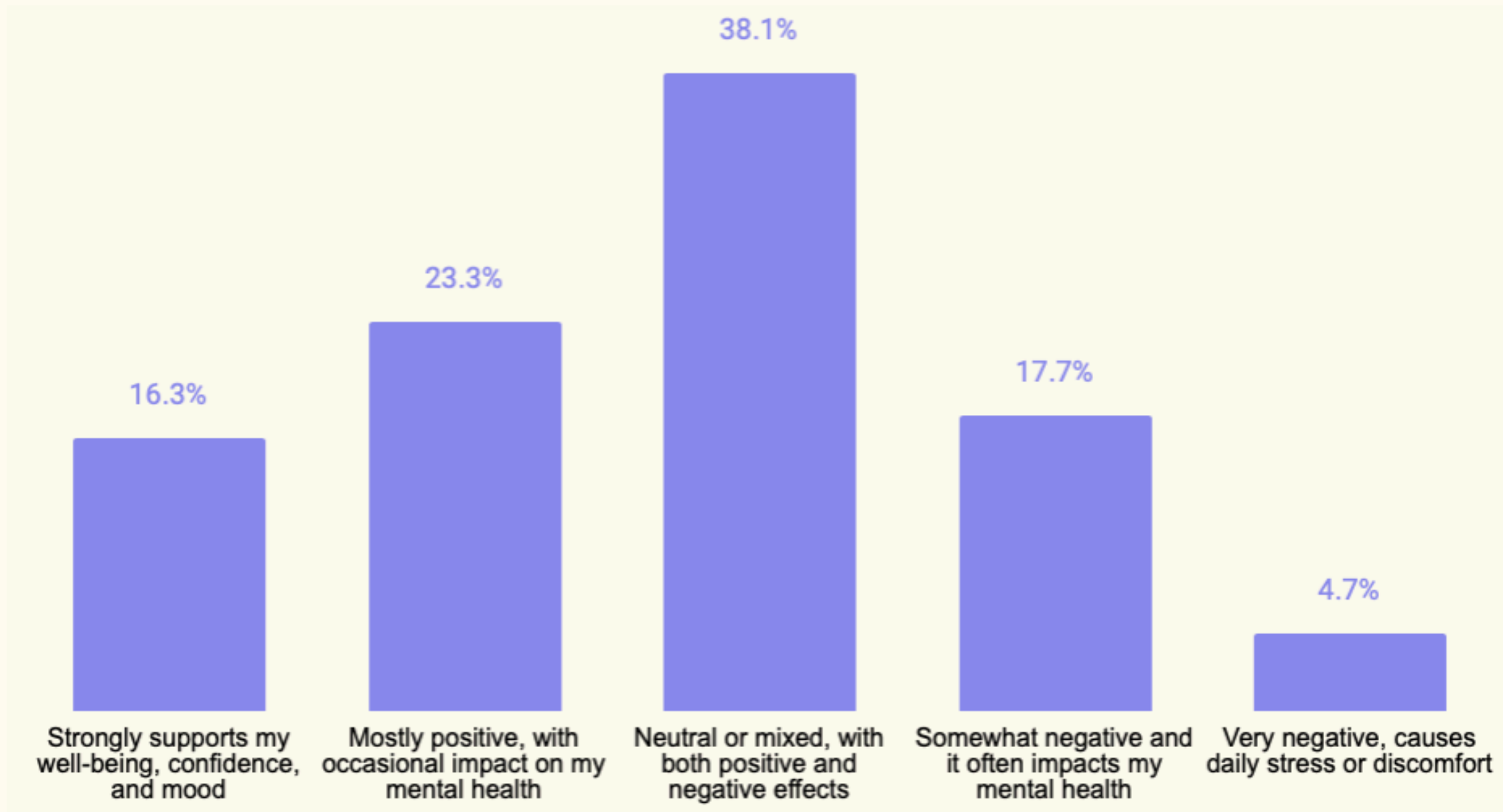
How well do you manage your time?



- **Most students feel somewhat capable** in managing their time
- 11th graders most likely to rate themselves a 1 and least likely to rate a 5—suggesting **time management becomes more difficult as academic and extracurricular demands increase**, particularly by junior year.

## IMPACT OF SELF-ESTEEM

How much does your self-image impact your mood or mental health on a daily basis?



- Nearly 1 in 4 students said self-image negatively affects their mental health
- Negative self-image rises with age
- **Girls reported more negative impacts** from self-image than boys.

# MENTAL HEALTH CHALLENGES

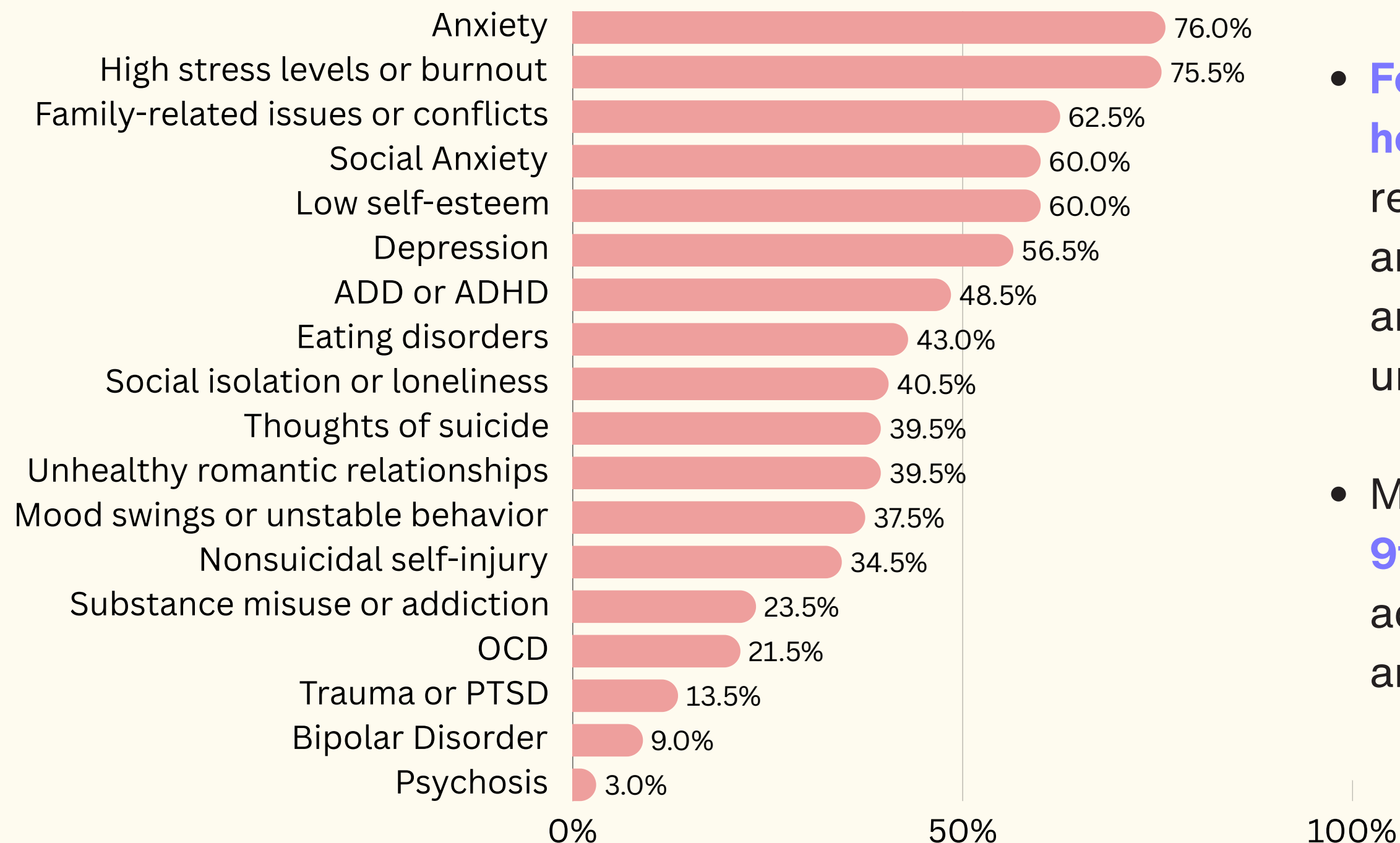
## MENTAL HEALTH CHALLENGES

- Teens most commonly report struggles with anxiety, burnout, family challenges, social anxiety, low self-esteem, and depression—reflecting complex pressures from academics, social life, home, and internal expectations.
- Two in five students say their peers have disclosed thoughts of suicide or nonsuicidal self-injury.
- Female teens report higher rates of mental health challenges than males—potentially reflecting greater emotional openness and different experiences, while lower rates among boys may stem from stigma and underreporting.
- Mental health impacts nearly every aspect of teens' lives—from emotions and self-esteem to academics, daily functioning, and safety—with very few reporting little to no effect across these areas.
- At least 3 in 4 students report that mental health strongly affects their emotional wellbeing, self-esteem, academic performance, sleep, their friendships and social life, and ability to manage their responsibilities .



## MOST COMMON MENTAL HEALTH CHALLENGES

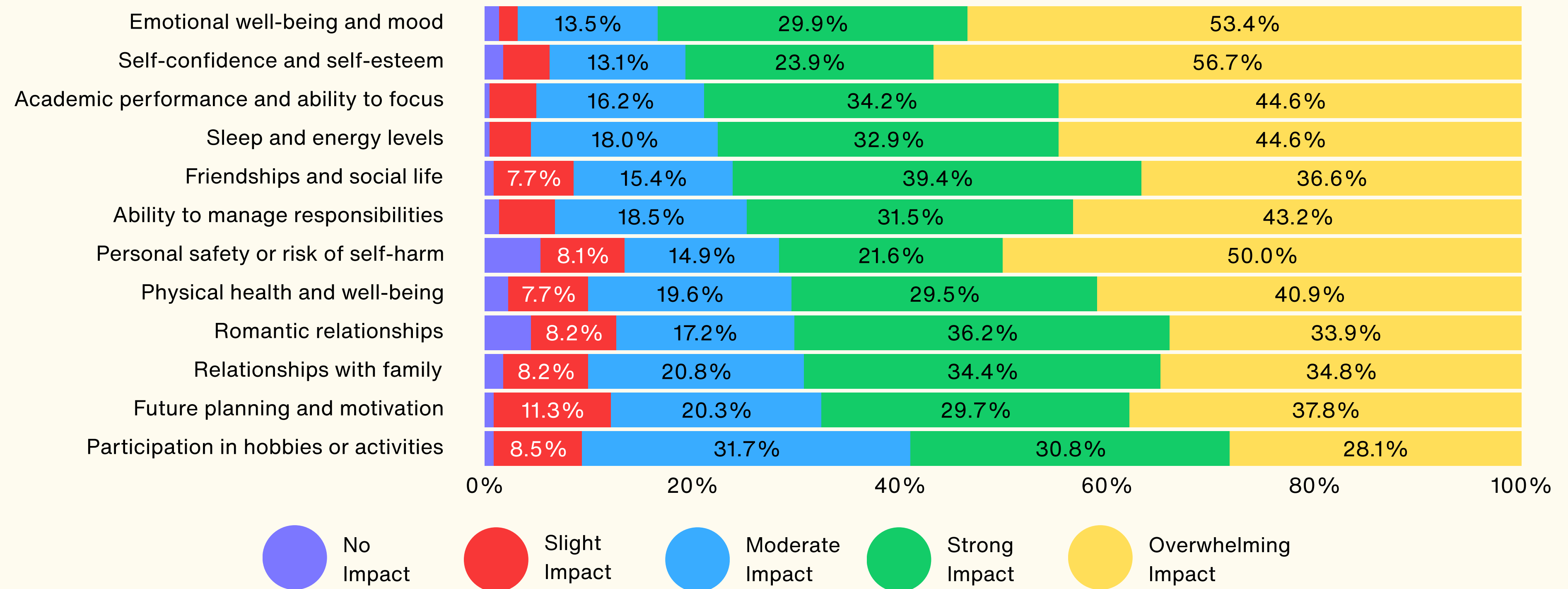
Have any of your peers shared with you that they have experienced any of the following mental health challenges?



- **Female teens report higher rates of mental health challenges** than males, which may reflect both greater emotional openness and differing experiences. Lower rates among boys could be due to underreporting linked to stigma.
- Mental health challenges **increase from 9th to 12th grade**, likely driven by rising academic pressure, societal expectations, and stress around future planning.

# IMPACT OF MENTAL HEALTH ON THEIR LIVES

How do you think mental health can affect the following aspects of life?



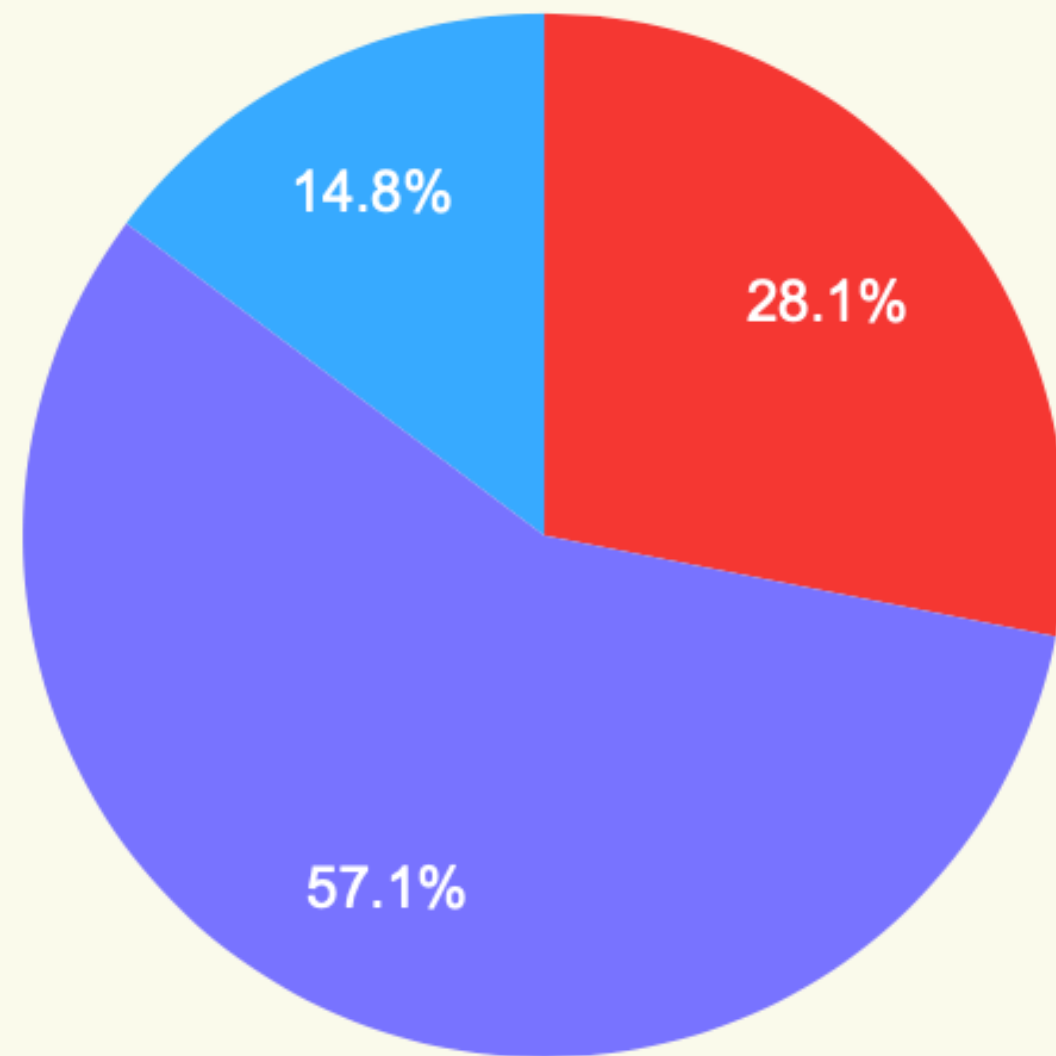
**SEEKING SUPPORT + SELF-CARE**

## SEEKING SUPPORT AND SELF CARE

- Most students feel at least somewhat comfortable asking for support, but more than 1 in 4 don't feel comfortable at all.
- Teens find it much easier to give support to others than to ask for help themselves.
- Nearly half of teens say they would reach out to no one even when wanting help, reflecting barriers like stigma, confidentiality concerns, and uncertainty.
- Teens primarily turn to trusted people—friends, significant others, and parents—but over half avoid school counselors, teachers, or professional therapists.
- Female students seek help more across all sources, while male students show greater reluctance and are more likely to avoid seeking help despite wanting it.
- Common coping strategies can help, but may lead to avoidance and isolation.
- Teens feel most comfortable discussing mental health in judgment-free, confidential, safe spaces with trusted, empathetic listeners—especially when conversations include shared experiences, vulnerability, and active support.

## COMFORTABILITY SEEKING SUPPORT

If you were going through a challenging time, how comfortable are you asking for support?

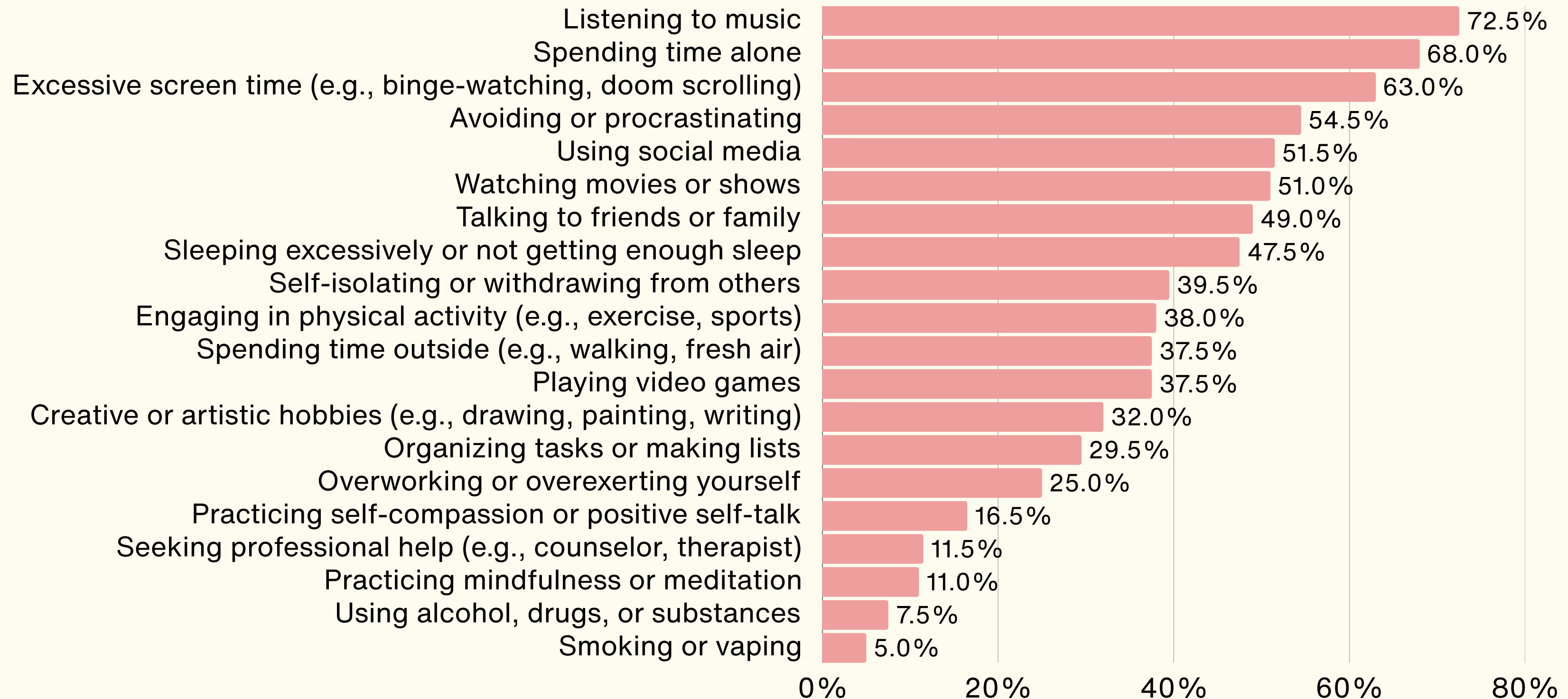


● Not comfortable ● Somewhat comfortable ● Very comfortable

- Most students feel at least somewhat comfortable asking for support, however more than **1 in 4 are not comfortable at all.**
- Overall comfort in **seeking support was similar across genders**
- Older students are more confident in seeking support.

## COPING MECHANISMS

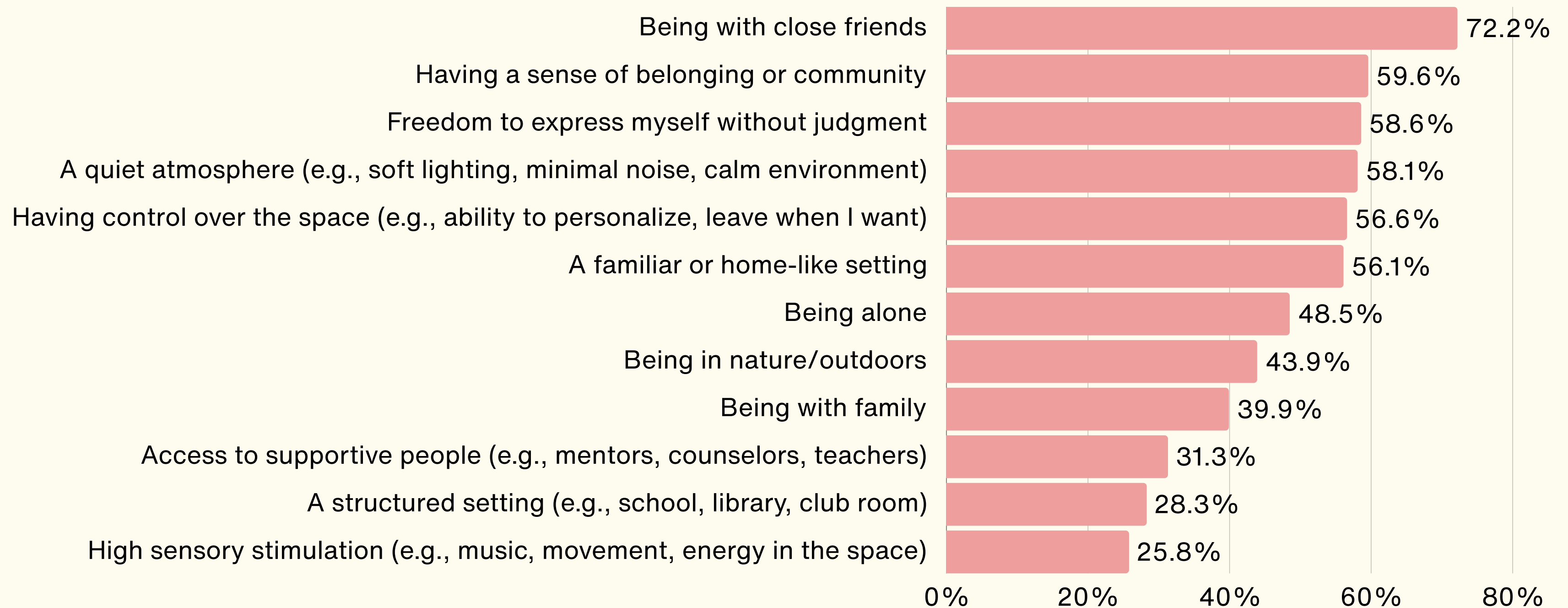
How do you typically cope with stress and pressure?





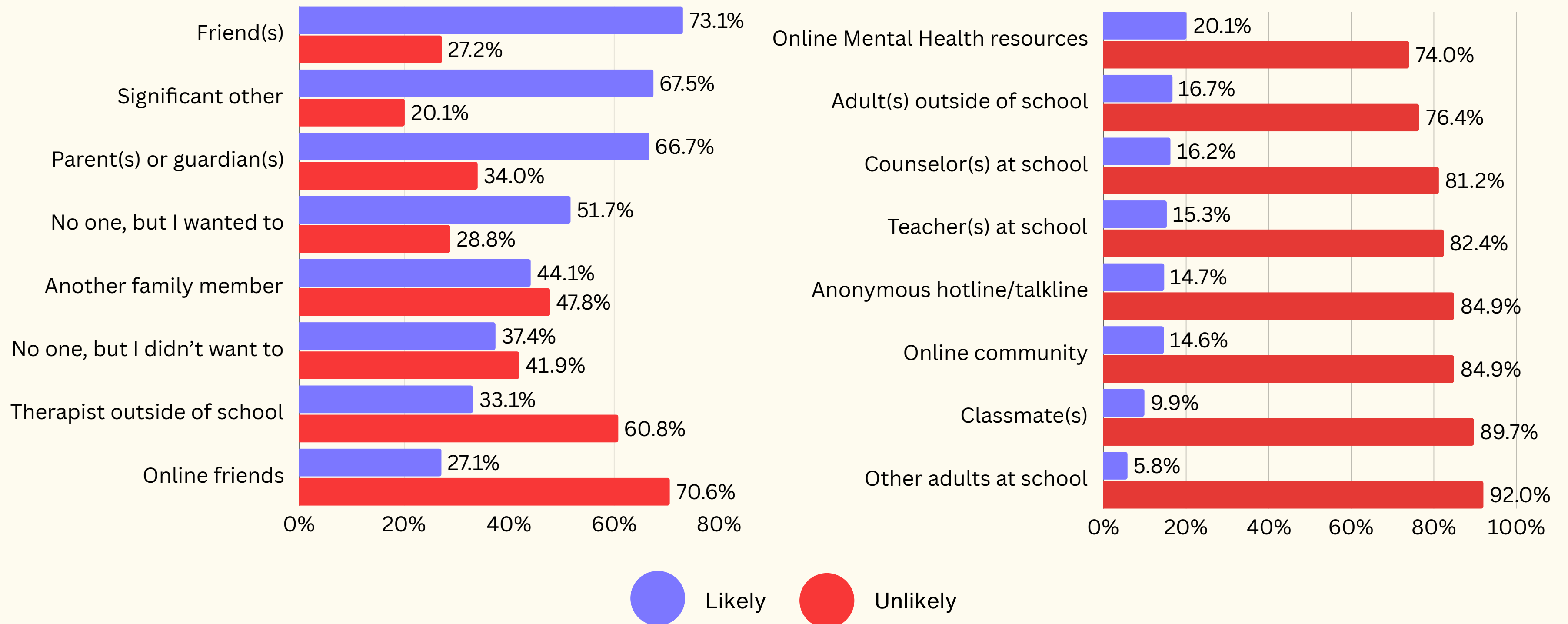
## COMFORTABLE AND SUPPORTIVE SPACES

What factors make an environment feel comfortable and supportive?



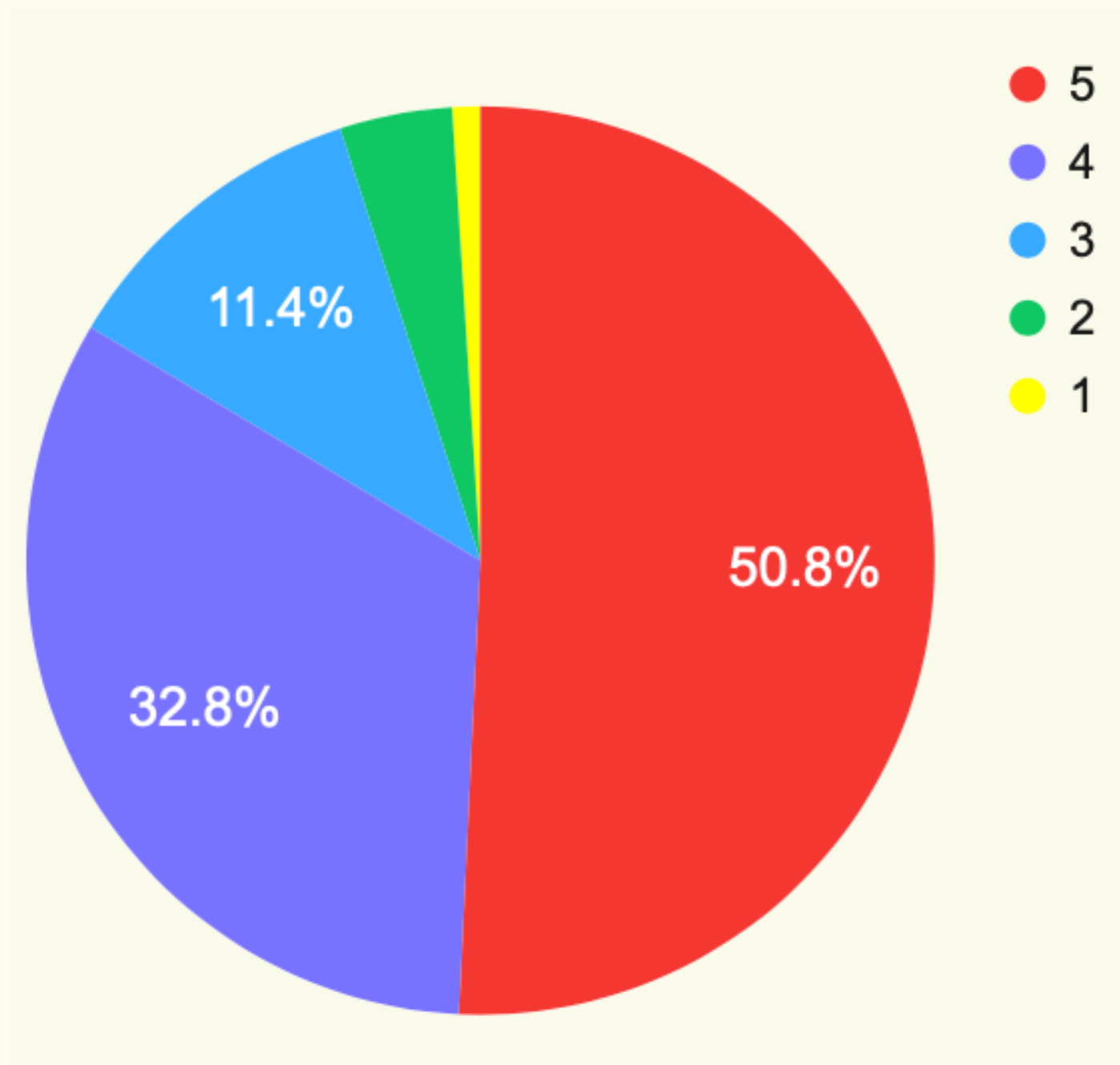
## WHO YOUTH TURN TO FOR SUPPORT

If you were going through a challenging time, how likely are you to ask the following people or resources for mental health support?



## COMFORTABILITY OFFERING SUPPORT TO A FRIEND

If a friend reached out to you for help with their mental health, how comfortable would you feel offering support?



- Students are far more comfortable offering support (50.8%) than asking for it (14.8%), revealing a key tension in how youth navigate mental health.
- Most students are very comfortable offering support, with overall comfort levels nearly identical across genders.
- Teens are often the first to support peers—giving them tools to help themselves and others can reduce stigma and improve access to care.

## CHALLENGES IN PEER SUPPORT

If you felt less comfortable offering support, what do you think would make it difficult for you to help?

1. I'm unsure how to approach the conversation - **81.3%**
2. I'm worried I might say the wrong thing - **78.1%**
3. I don't feel equipped to help with mental health issues - **71.9%**
4. I don't feel confident in my ability to provide the right type of support - **71.9%**
5. I'm unsure if I should involve others in the situation (e.g., family, other friends) - **53.1%**
6. I'm not sure how to support them without overstepping - **50.0%**
7. I'm worried it could make things worse - **46.9%**
8. I don't know where to direct them for professional help - **34.4%**
9. I'm afraid they might not be open to receiving help - **31.3%**
10. I don't feel like I have enough time or energy to help - **28.1%**
11. I've never dealt with something like this before - **25.0%**
12. I'm afraid it might negatively affect our friendship - **21.9%**
13. I have my own mental health concerns that make it hard to help others - **12.5%**

## WHAT MAKES TEENS COMFORTABLE OPENING UP

What would make you feel more comfortable opening up about and having conversations about mental health with people you trust?

### No Judgment

“Knowing I can share without being judged.”

### Feeling Heard

“They listen without jumping to conclusions.”

### Shared Experience

“They’ve gone through it too.”

### Close Relationship

“It’s easier if I know they care.”

### Mutual Openness & Vulnerability

“I’ll share if they’re open too.”

### Safe, Private Setting

“One-on-one in a calm space”

### Confidentiality & Trust

“They’ll keep it between us”

### Normalize the Conversation

“Talking about mental health shouldn’t be taboo.”

### Addressing Stigma

“I don’t want to be seen as weak or broken”

### Supportive Response

“I want them to take me seriously”

# **MENTAL HEALTH SUPPORT AT SCHOOL**



## MENTAL HEALTH SUPPORT AT SCHOOL

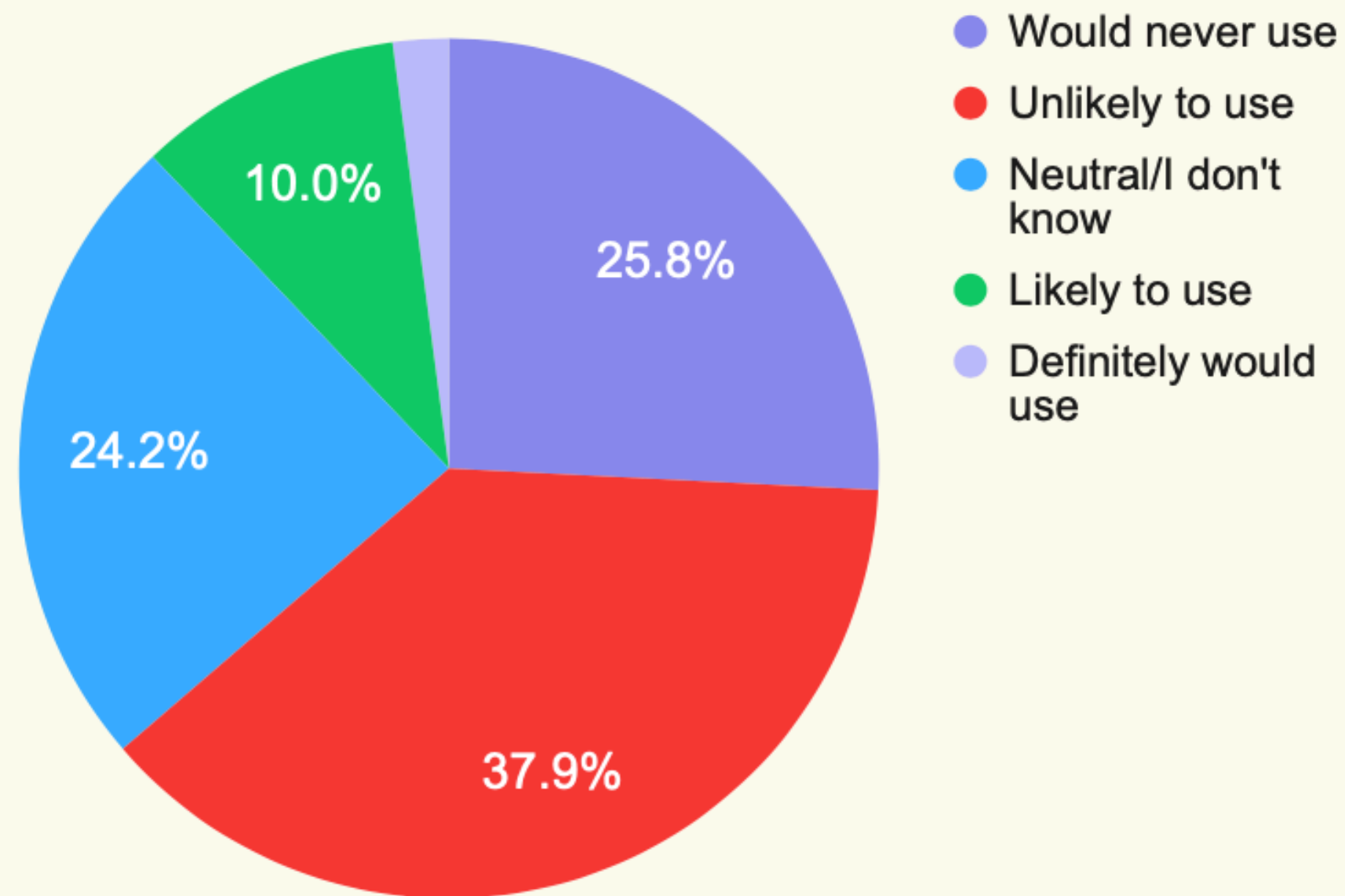
- **Time Spent in School:** Schools are a central part of students' lives, and as such, they serve as a critical environment for mental health support.
- **Established Systems:** Schools already have allocated teams and funding intended to provide mental health support, such as counselors, social workers, and wellness programs.
- **Intention vs. Implementation:** Despite the presence of these resources and efforts to create effective support systems, they are often falling short in meeting the real needs of students.

## MENTAL HEALTH SUPPORT AT SCHOOL

- Two-thirds of students hesitate to use school mental health resources; only about 1 in 10 would likely or definitely seek school-based support.
- Fewer than half know where to find help, citing stigma, embarrassment, and confidentiality concerns as major barriers.
- Many students feel unsafe or uncomfortable discussing mental health, fearing judgment or stigma from peers and adults at school.
- Teens believe school mental health resources could be more approachable and accessible through greater teacher and staff support.
- Academic stress is significant, with over half endorsing reduced workload, flexible deadlines, safe and quiet spaces to take breaks, and additional support during stressful periods as key improvements.
- 4 in 10 support designated mental health days to help normalize and legitimize mental health care in schools.

## UTILIZATION OF SCHOOL MENTAL HEALTH RESOURCES

How likely are you to use school-provided mental health resources if you were going through a challenging time?



- $\frac{2}{3}$  of students express reluctance to use school mental health resources, with only 1 in 10 likely to turn to them.
- Only 2.1% of students said they would definitely use school provided mental health resources.
- Boys showed more hesitation, while female students are more open to using them

## FAMILIARITY AND COMFORT WITH SCHOOL RESOURCES

**Which of the following best represents your familiarity and comfort accessing mental health resources or accommodations at school?**

**42.5%** know where to find resources, but feel hesitant to access them due to embarrassment, concerns about confidentiality, or fear of judgment.

**34.9%** are unsure whether their concerns are serious enough to justify seeking help or using available resources.

**21.5%** feel comfortable accessing resources when they need them

**19.9%** are aware of the available resources, but are unsure how to use them

**19.9%** are not sure what resources or accommodations are available

**15.1%** would feel more comfortable accessing resources if they were promoted in a more approachable way.

**13.4%** feel that teachers and staff could do more to make resources feel accessible and approachable

## BARRIERS TO UTILIZING MENTAL HEALTH RESOURCES

**If you haven't used the mental health resources available at school or outside of school, what are some reasons why?**

- 47.2%** prefer to handle their mental health on their own
- 30.6%** don't feel comfortable or safe discussing their mental health with others
- 28.3%** don't believe their mental health problems are serious enough to warrant help
- 27.8%** don't think the resources will be helpful or effective
- 26.1%** are afraid of being judged or stigmatized for seeking help
- 22.2%** find it difficult to find someone they can relate to
- 20.6%** are concerned that their parent(s)/guardian(s) will find out
- 18.9%** feel embarrassed or ashamed about needing help
- 18.3%** are not sure if they trust the professionals or the services available
- 16.1%** are concerned that seeking help will affect my grades or teacher's perception of me

## BARRIERS TO UTILIZING MENTAL HEALTH RESOURCES

**If you haven't used the mental health resources available at school or outside of school, what are some reasons why?**

**15.0%** have not experienced any obstacles

**13.3%** are not aware of the resources available or where they are located

**8.9%** cannot afford mental health care

**8.3%** are unsure how to access the resources or ask for help

**8.3%** are concerned that seeking help could affect future opportunities (college apps, recommendations)

**7.8%** are worried that my teachers or school staff will negatively judge me for seeking help

**7.2%** are discouraged from seeking mental health support by their parents

**5.6%** believe mental health issues should be kept private and not discussed

**3.9%** say resources are not available when they need them



## WHAT STUDENTS SAY WOULD ACTUALLY HELP

**How can your school improve its mental health support system to make resources more accessible and comfortable for students?**

- 61.1%** – Reduced or more manageable homework and assignment workload
- 56.7%** – More flexible deadlines or extended time for assignments
- 55.6%** – Less emphasis on grades
- 52.2%** – Private, quiet spaces for students to take breaks during the school day
- 45.6%** – More resources during stressful times (e.g., finals, college applications)
- 42.8%** – Providing specified mental health days for students to utilize
- 40.0%** – Training for teachers and staff to recognize and respond to mental health needs
- 37.2%** – Teachers openly acknowledging their availability to support student mental health
- 32.8%** – Educating parents/guardians about youth mental health
- 28.9%** – Tips to combat student stress
- 23.3%** – Increasing visibility of mental health resources through posters, announcements, and digital platforms
- 21.1%** – Offering regular mental health awareness programs or workshops
- 21.1%** – Education on how students can support one another and peer support groups
- 20.0%** – Integrating mental health discussions into classroom lessons and school activities

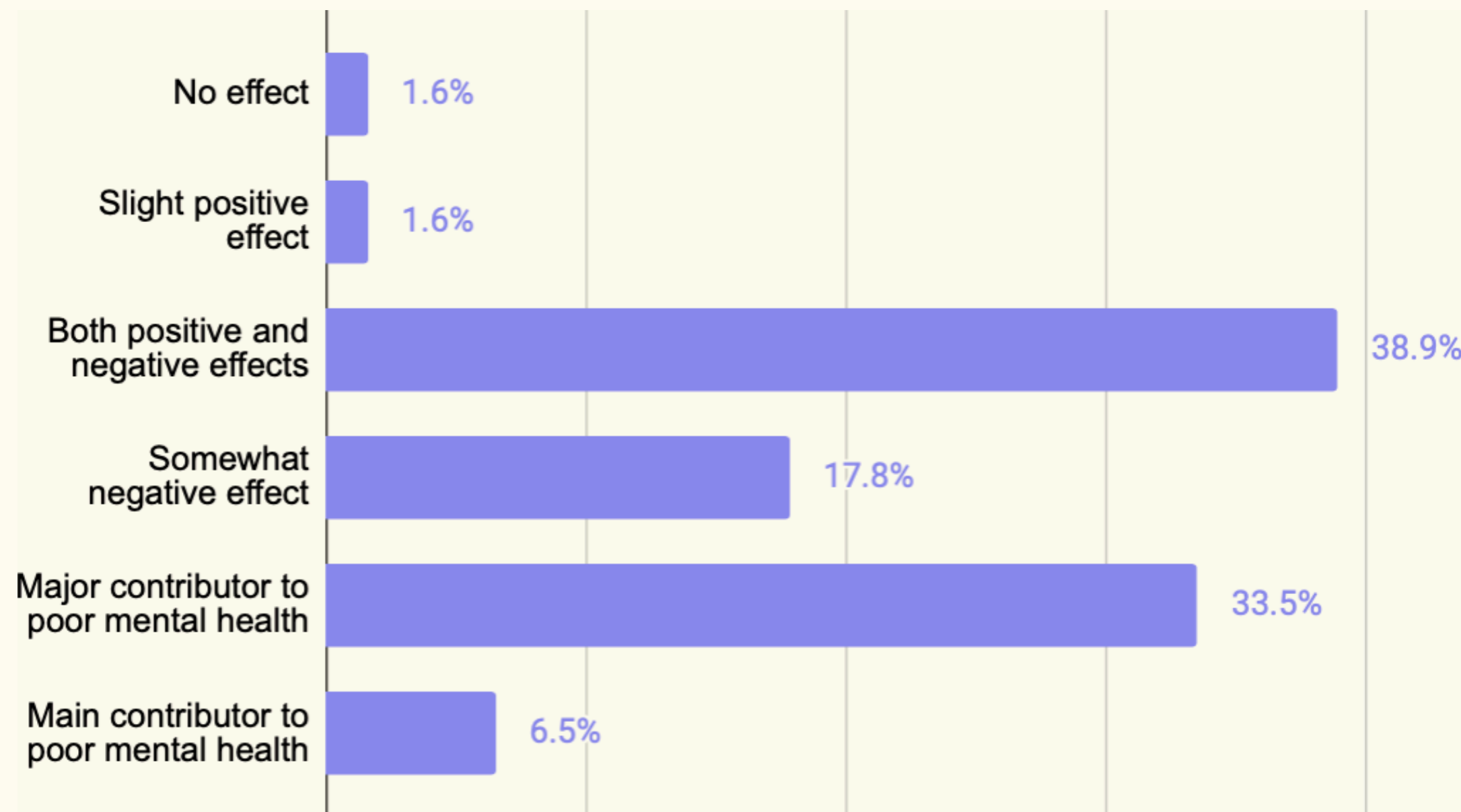
**SOCIAL MEDIA**

## SOCIAL MEDIA

- Teens view social media as both a source of community and relaxation, but also as a factor that negatively affects sleep, self-esteem, and productivity.
- Half of students use social media excessively to cope with stress and pressure.
- Over half see social media as more harmful than helpful, with 40% citing it as a major contributor or main contributor to poor mental health in teens.
- As students get older, fewer report no effect from social media on their mental health, while more recognize it as a major contributor, indicating growing awareness over time.
- Negative effects are reported as having a stronger impact than positive ones, often shaping teens' self-image, habits, and mental health.
- Positive impacts include entertainment, inspiration, and a making new connections.
- Major negative effects include comparison to others, addiction, setting unrealistic expectations, and sleep disruption impacting most teens.

## HOW SOCIAL MEDIA AFFECTS TEEN MENTAL HEALTH

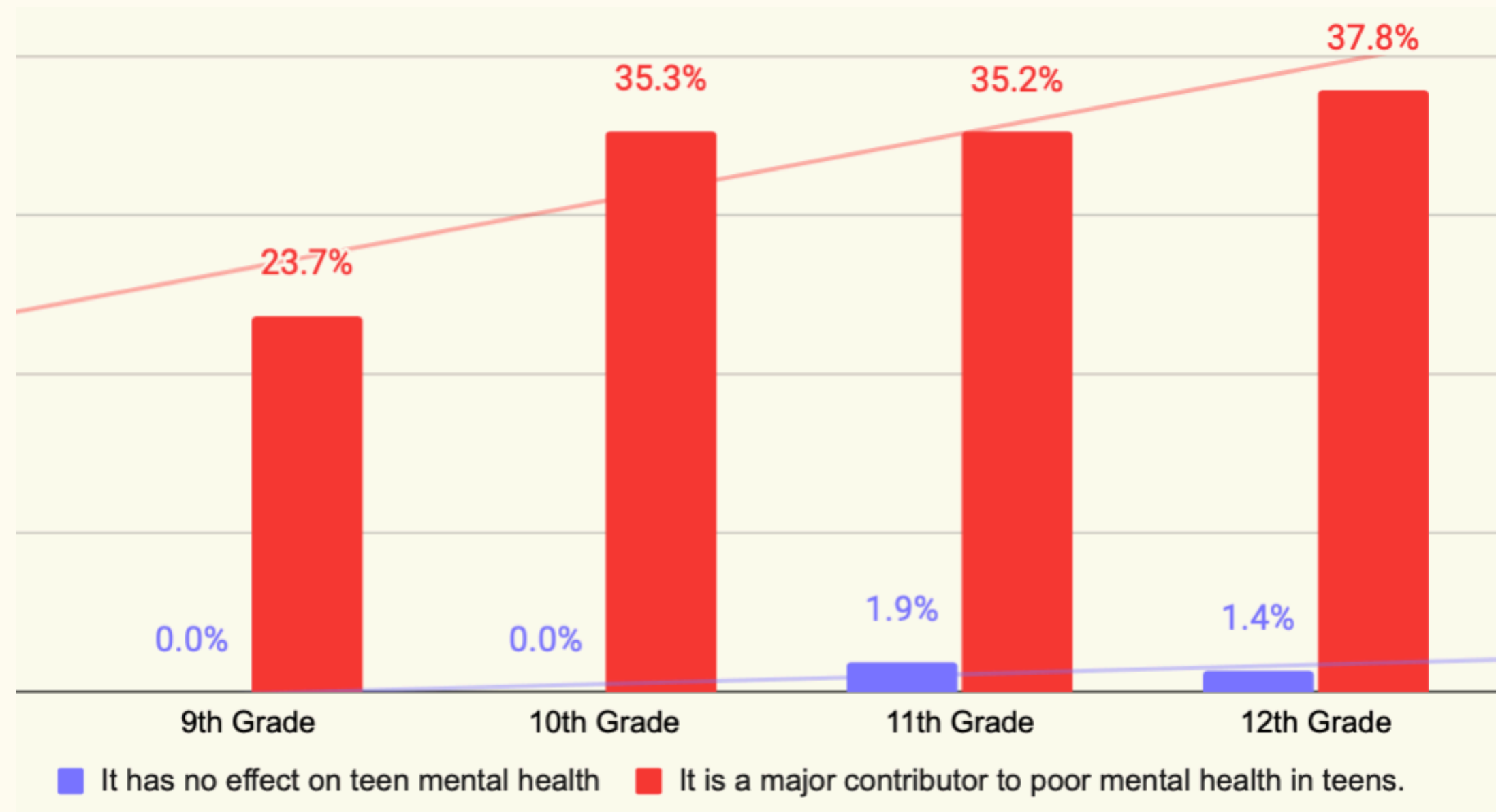
Which of the following statements reflects how you believe social media affects teen mental health overall?



- 57.8% recognize social media as having an overall negative effect on youth mental health.
- Findings reflect the dual nature of social media: while it can foster community and provide relaxation, it can also harm sleep, self-esteem, and productivity.

## HOW SOCIAL MEDIA AFFECTS TEEN MENTAL HEALTH BY GRADE

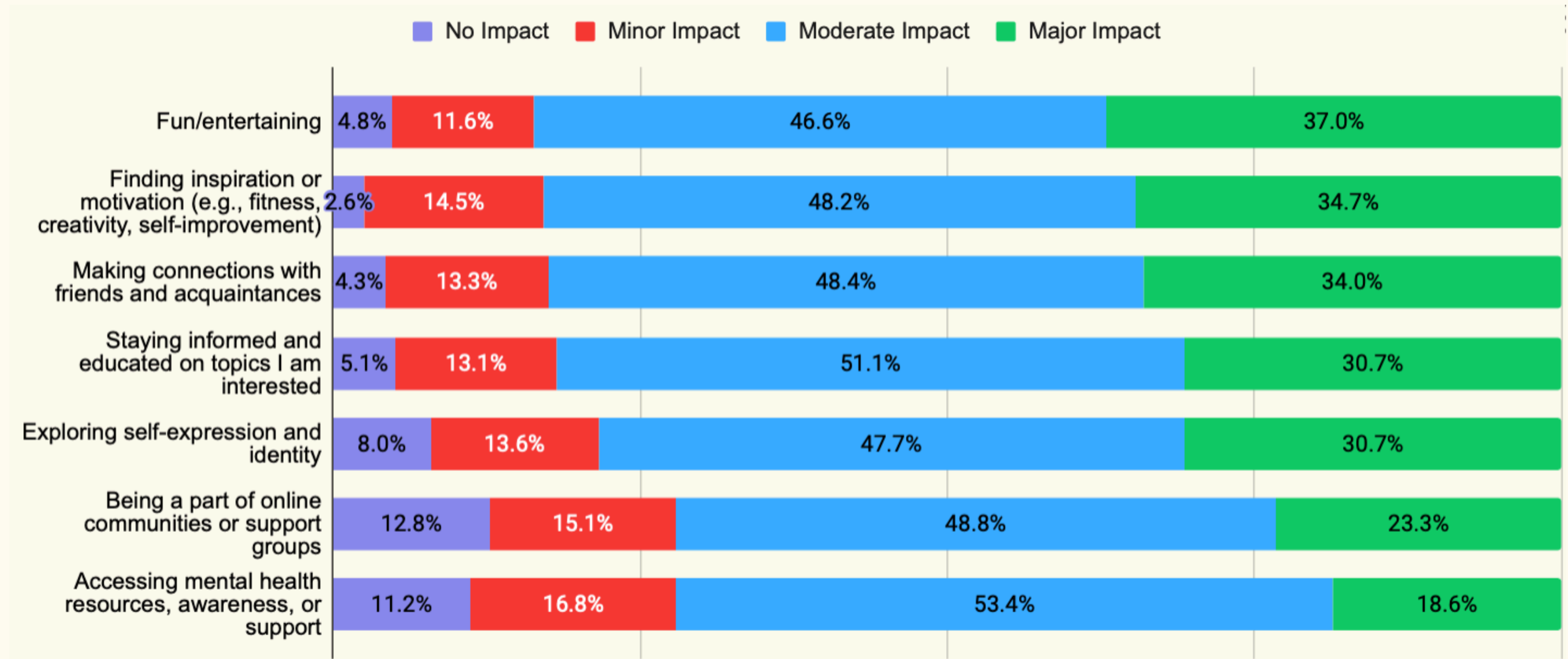
Which of the following statements reflects how you believe social media affects teen mental health overall?



As students get older more students recognize it as a major contributor—suggesting increased awareness of its impact over time.

## POSITIVE IMPACTS OF SOCIAL MEDIA

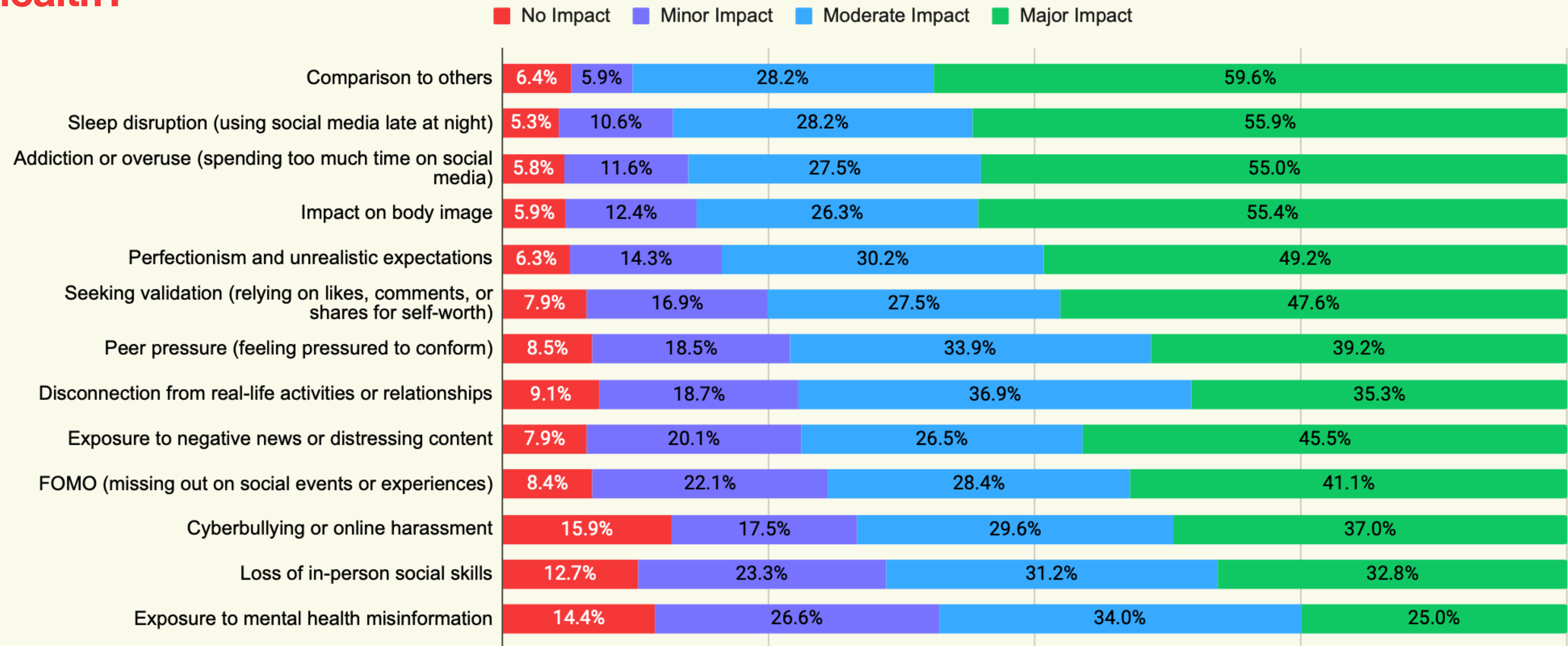
How much of a positive impact do the following aspects of social media have on mental health?





# NEGATIVE IMPACTS OF SOCIAL MEDIA

How much of a negative impact do the following aspects of social media have on mental health?





**THANK YOU FOR BEING HERE**

If you have any questions, please contact [Mariana@AIMymh.org](mailto:Mariana@AIMymh.org)