AIM Youth Mental Health

The State of Youth Mental Health in the Central Coast and Valley

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.

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 APROACH

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.
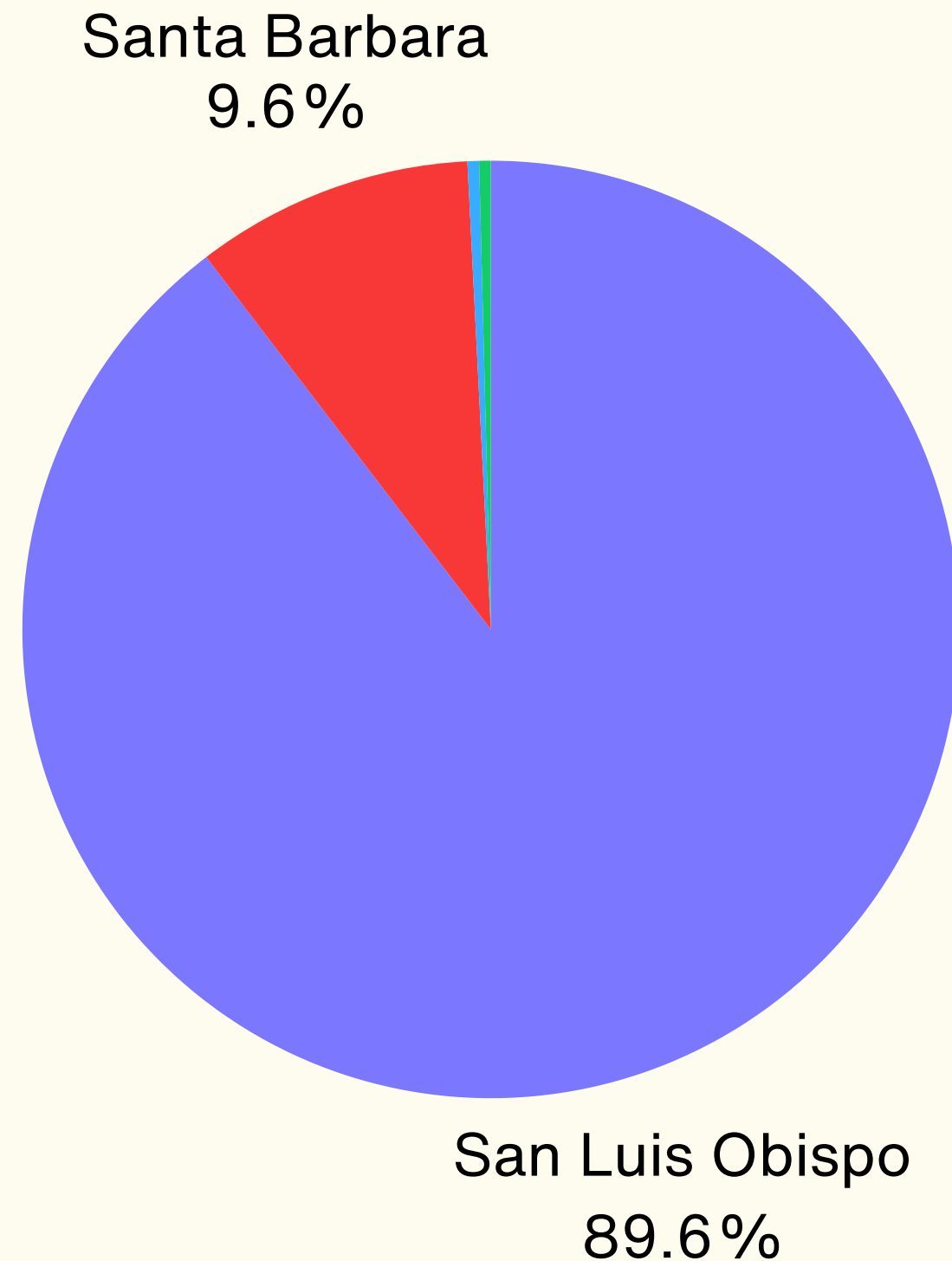
TOTAL RESPONDENTS

2025

278 RESPONDENTS

The youth researchers aimed for 384 respondents to ensure a statistically representative sample of teens in their area.

RESPONDENT DEMOGRAPHICS - COUNTY REPRESENTATION

Santa Barbara
9.6%

San Luis Obispo
89.6%

The Central Coast & Valley represents **16.1%** of the total survey respondents

Central Coast & Valley County Representation:
- San Luis Obispo – 89.7%
- Santa Barbara – 9.6%
- Fresno – 0.4%
- San Joaquin – 0.4%

Responses were collected from youth in San Luis Obispo, Santa Barbara, Fresno and San Joaquin counties.

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
High Representation (75+ responses)	1	179	70.5%	Nipomo HS (179)
Moderate Representation (10–75 responses)	1	61	24.0%	Arroyo Grande HS (61)
Broad Distribution. (<10 responses)	6	14	5.5%	*Ernest Righetti HS (5), Central Coast New Tech HS (3), Pioneer Valley HS (3), Santa Barbara Senior HS (1), Buchanan HS (1), Dos Pueblos HS (1)*

RESPONDENT DEMOGRAPHICS - AGE & GRADE LEVEL

AGE

GRADE

14
15
16
17
18
19

8.3%
22.1%
31.2%
29.3%
8.7%

19.1%
26.4%
31.4%
23.1%
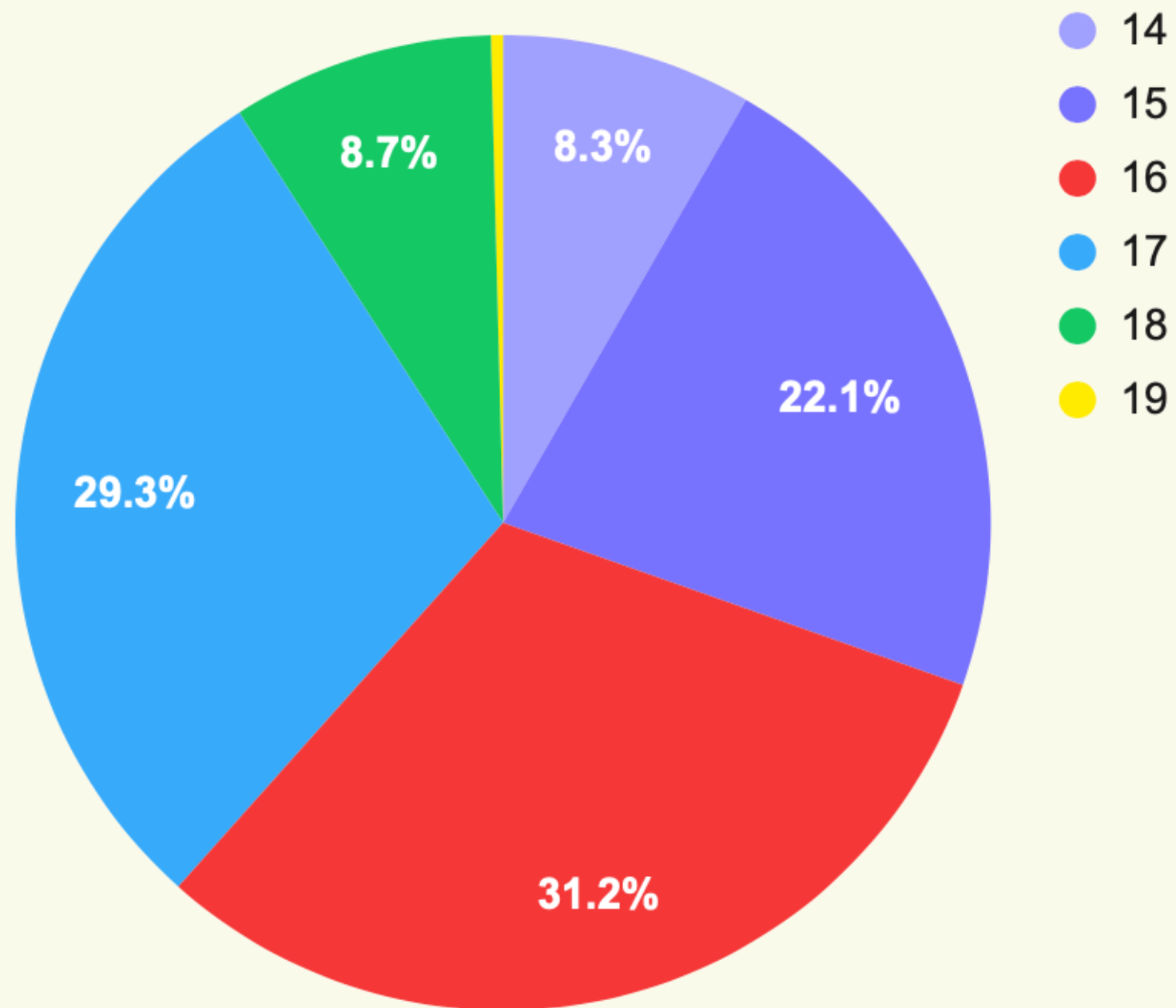
9th Grade   10th Grade   11th Grade   12th Grade
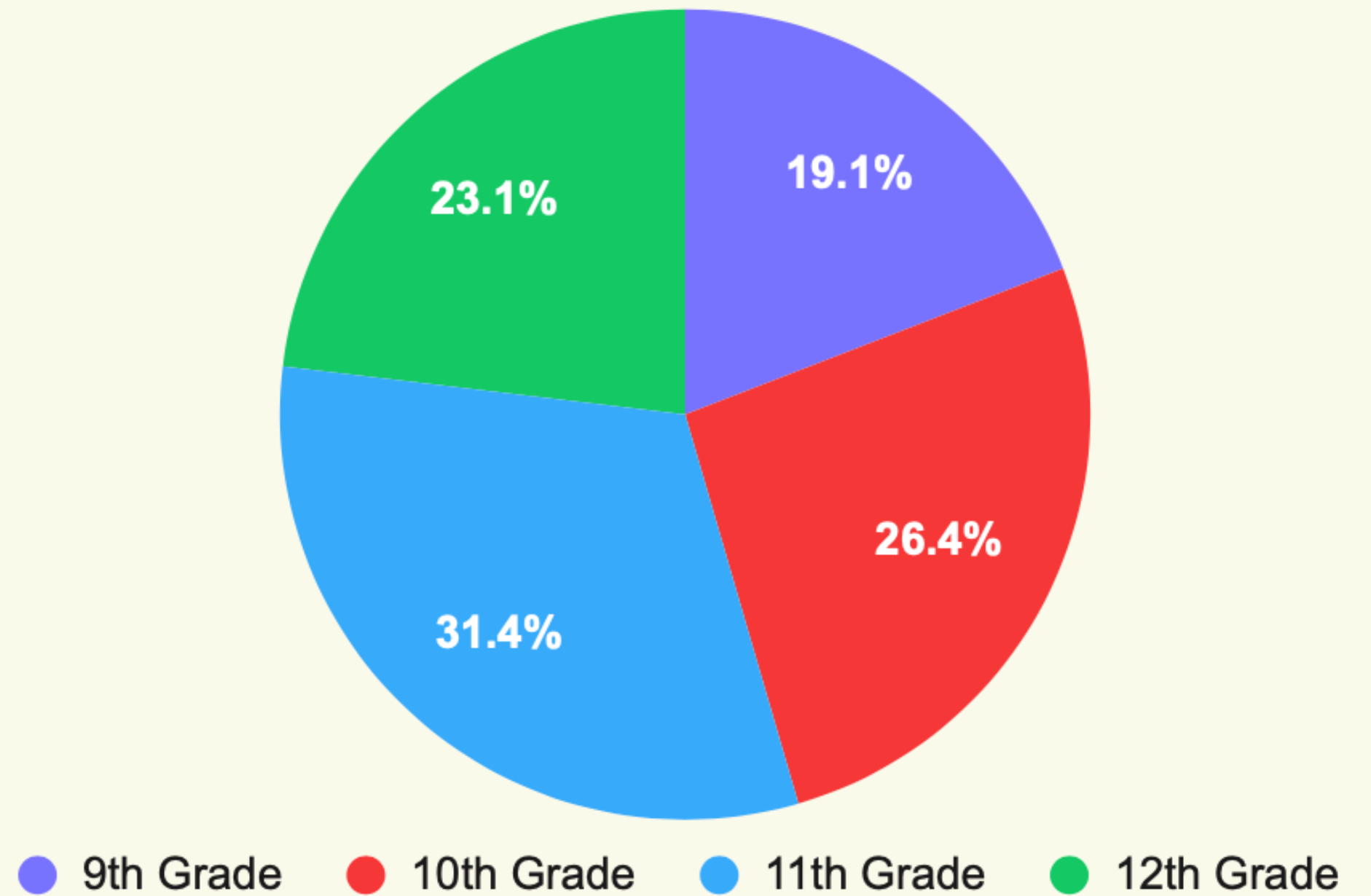
RESPONDENT DEMOGRAPHICS - RACE & GENDER IDENTITY

RACE AND ETHNICITY

Race/Ethniticy	Percent
Latino/a or Hispanic	60.4%
White or Caucasian	36.0%
Asian or Asian American	9.8%
Indigenous or Native American (North and South America, e.g. Native American, Mixtec, Zapotec, Nahualt)	2.2%
Middle Eastern or North African	2.2%
Native Hawaiian or Pacific Islander	1.1%
Black or African American	0.7%
Prefer not to say	3.3%
Other - Write In	1.5%

275 total respondents, includes 47 respondents who selected more than 1 racial/ethnic identity

GENDER IDENTITY

- Female
- Male
- Transgender
- Non-binary
- Prefer not to say
- Other

31.6%
60.8%
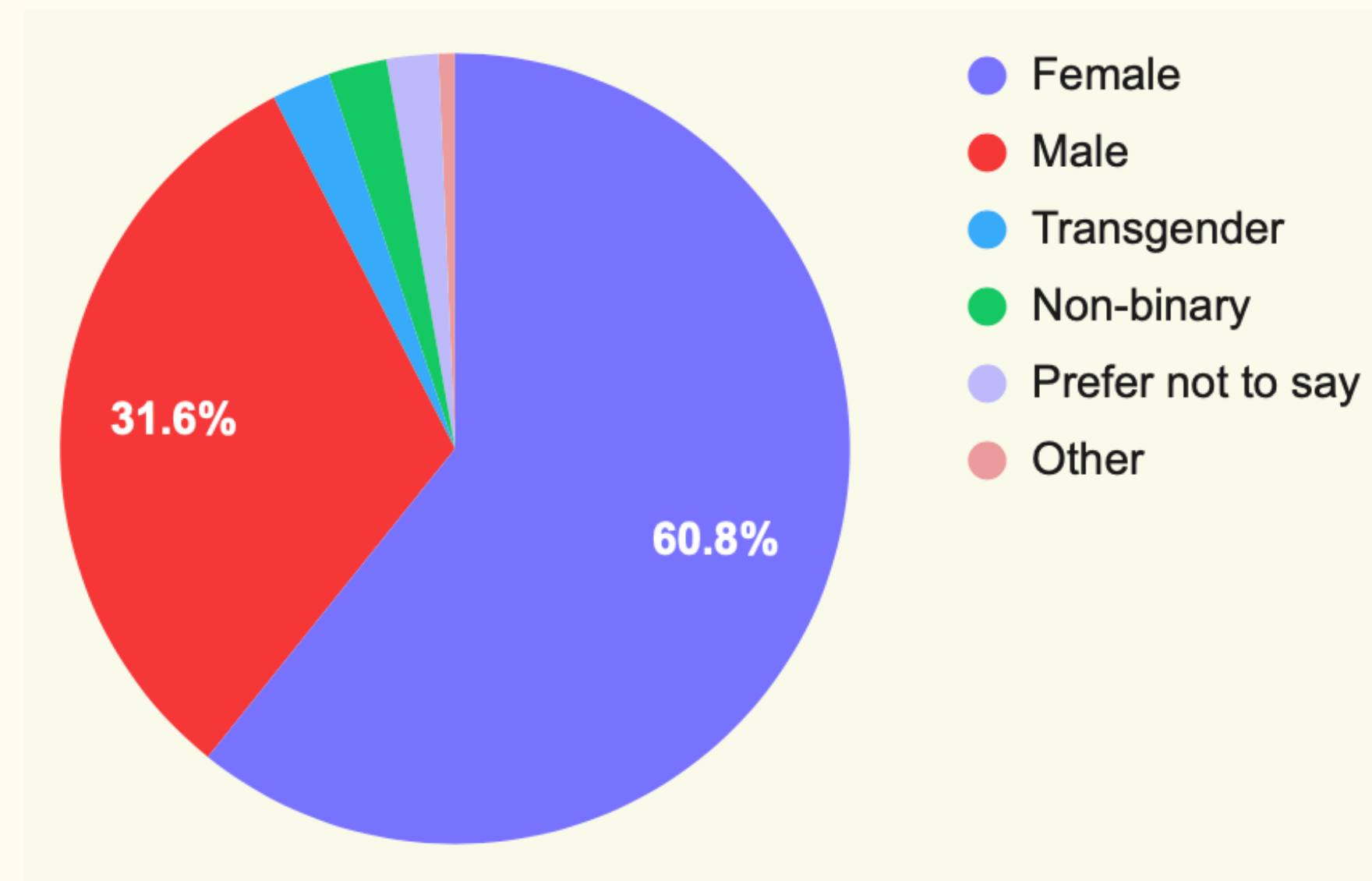
277 total respondents, includes 11 respondents who selected more than 1 gender identity

2025 AIM IDEAS LAB FINDINGS

FACTORS AFFECTING YOUTH MENTAL HEALTH

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- 90.1% of teens said sleep significantly affects their mental health, yet nearly two-thirds aren't getting enough sleep—and sleep declines with age.
- 89.4% of teens take part in extracurriculars, with nearly half of students spending more than 4 hours per week on extracurricular activities.
- 1 in 2 of students 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.
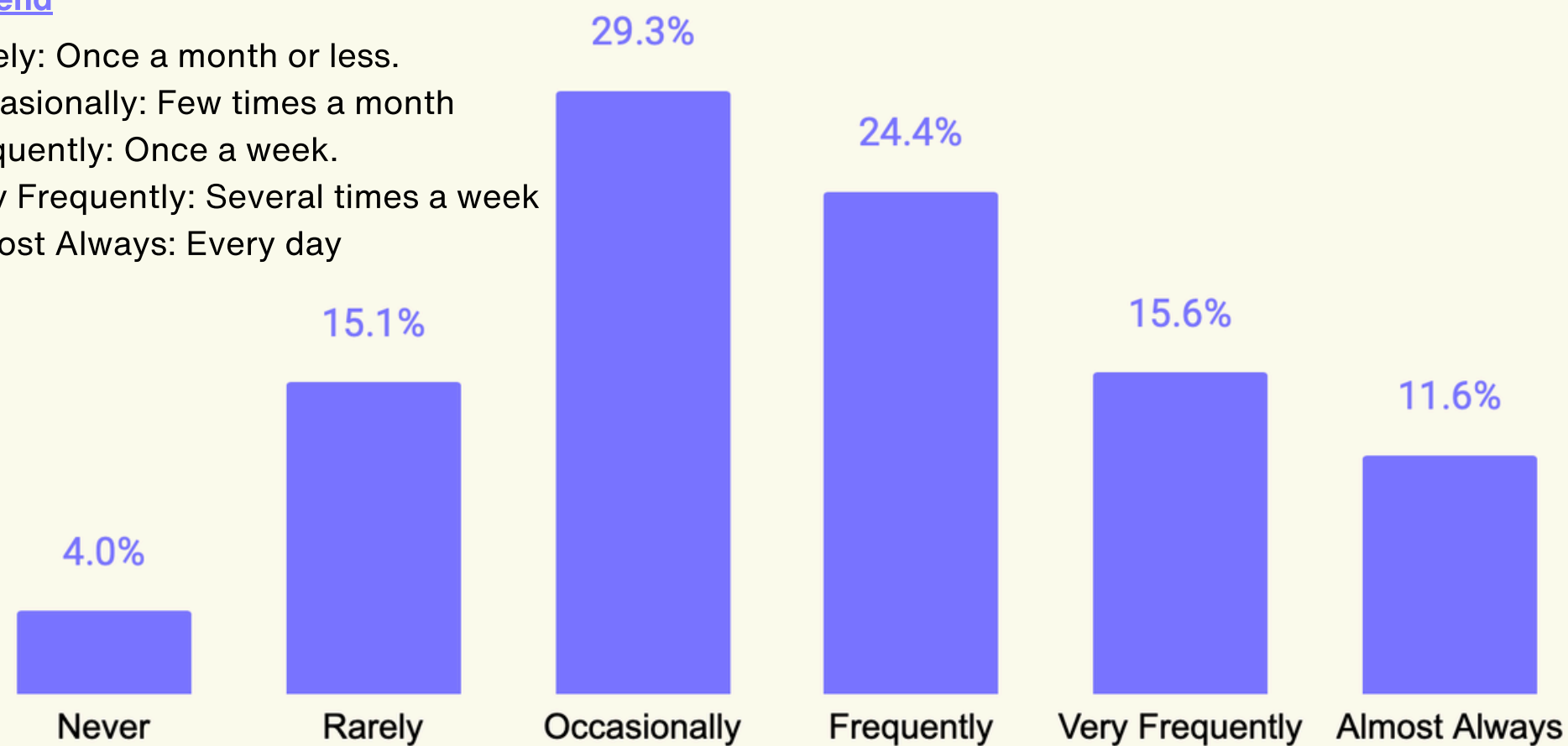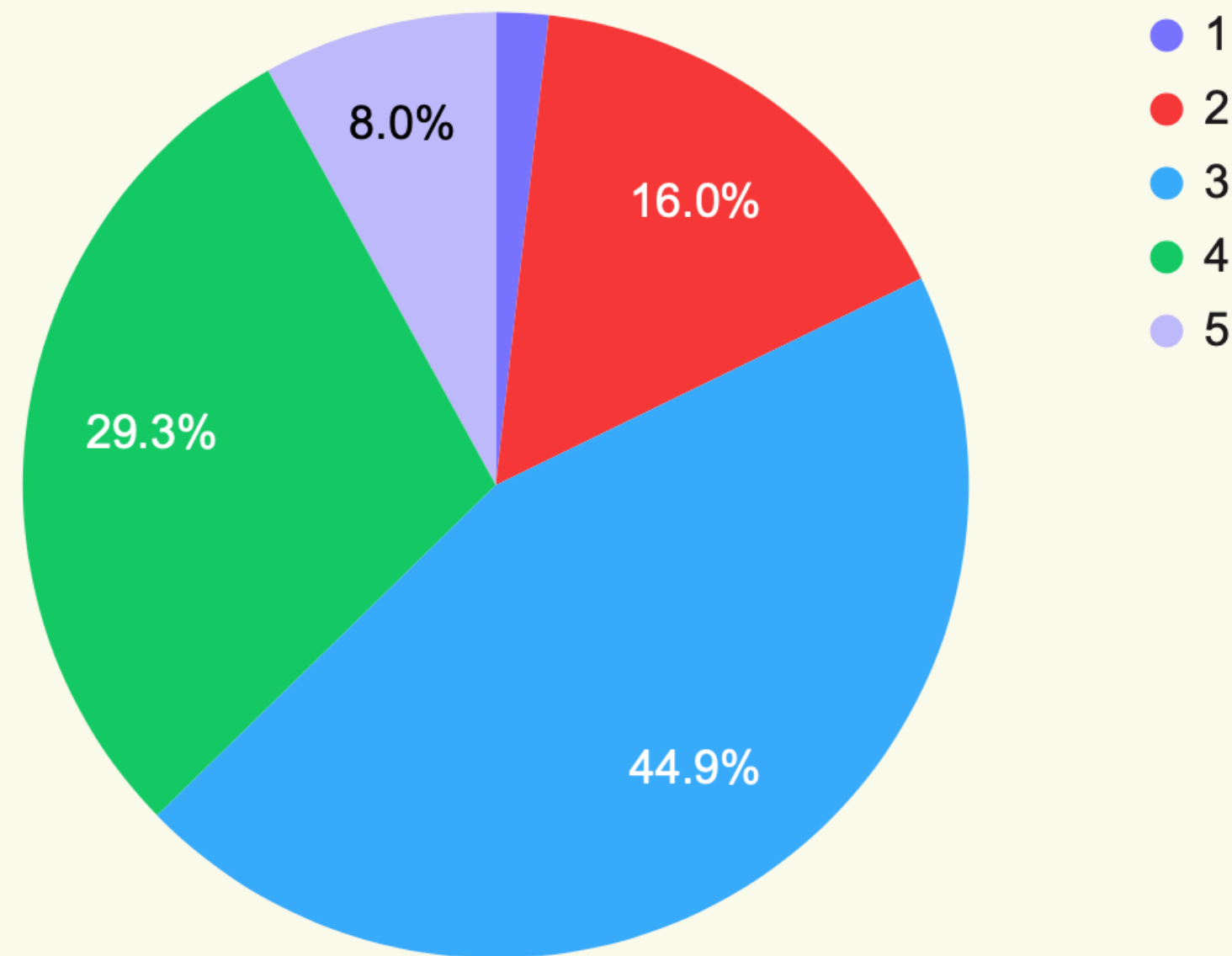
SLEEP HABITS

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

Legend:
- Less than 4 hours
- 4-5 hours
- 6-7 hours
- 8-9 hours
- 10-11 hours
- 12 or more hours

Pie chart values:
- 10.1%
- 51.1%
- 34.8%

- **Sleep Deficit:** 62.1% are not getting enough sleep (8–10 hours recc.).
  - 10.1% get only 4–5 hours.
  - 51.1% get 6–7 hours.
  - 34.8% get 8–9 hours.
  - 3.1% get 10+ hours.

- **Sleep Declines by Grade:** 11th and 12th graders are most likely to get 4-5 hours and least likely to get the recommended 8–9 hours.

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.
- 2 in 5 students say their peers have disclosed thoughts of suicide or 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 2 in 3 report that mental health strongly affects their ability to participate in hobbies and activities, their personal safety, motivation and future planning, relationships, emotional wellbeing, self-esteem and physical health.

MOST COMMON MENTAL HEALTH CHALLENGES

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

Challenge	Percentage
Anxiety	64.4%
High stress levels or burnout	61.3%
Family-related issues or conflicts	55.5%
Social Anxiety	50.8%
Low self-esteem	46.6%
Depression	39.3%
Unhealthy romantic relationships	38.7%
Eating disorders	33.5%
ADD or ADHD	29.8%
Social isolation or loneliness	29.3%
Mood swings or unstable behavior	28.3%
Thoughts of suicide	22.5%
Substance misuse or addiction	21.5%
Nonsuicidal self-injury	19.4%
Trauma or PTSD	17.3%
Bipolar Disorder	13.1%
OCD	9.9%
Psychosis	3.1%

- **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?

Aspect	No Impact	Slight Impact	Moderate Impact	Strong Impact	Overwhelming Impact
Participation in hobbies or activities			17.0%	29.5%	44.6%
Personal safety or risk of self-harm		9.3%	17.3%	30.5%	37.2%
Future planning and motivation			22.4%	30.5%	37.2%
Relationships with family			22.9%	22.9%	44.8%
Romantic relationships		7.2%	21.1%	32.7%	33.2%
Emotional well-being and mood			24.4%	32.9%	32.9%
Self-confidence and self-esteem			24.4%	29.8%	35.6%
Physical health and well-being			24.3%	25.2%	39.6%
Friendships and social life	14.3%		18.3%	21.0%	42.4%
Ability to manage responsibilities		9.0%	22.5%	32.0%	31.1%
Academic performance and ability to focus	8.4%	8.4%	22.7%	29.3%	31.1%
Sleep and energy levels	6.7%	8.5%	27.7%	28.6%	28.6%

Legend:
- No Impact
- Slight Impact
- Moderate Impact
- Strong Impact
- Overwhelming Impact

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 family —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

17.0%

29.8%

53.2%
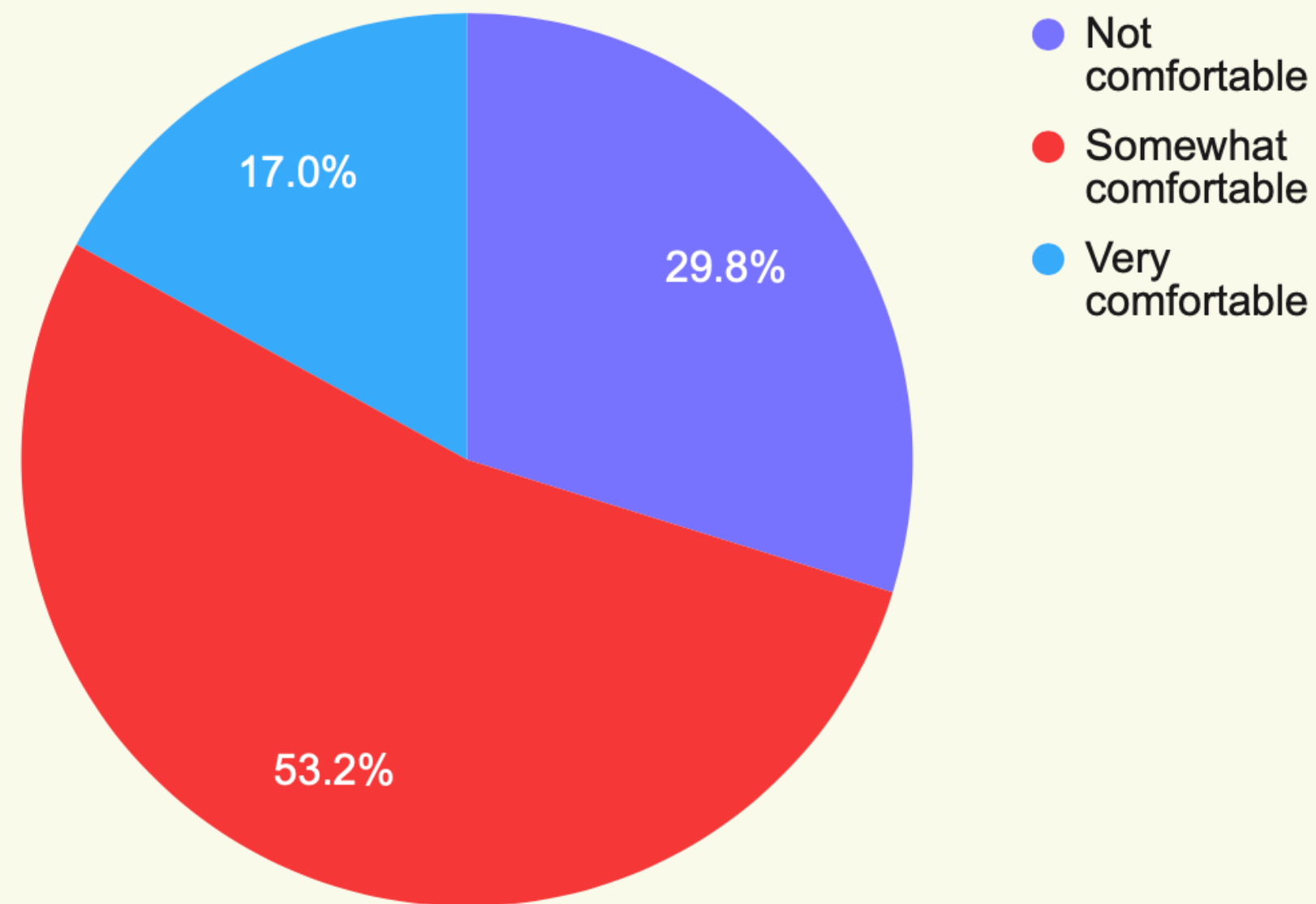
- Most students feel at least somewhat comfortable asking for support, however **more than 1 in 4 are not comfortable at all.**

- 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?

Coping Mechanism	Percentage
Listening to music	78.5%
Spending time alone	57.5%
Watching movies or shows	47.8%
Talking to friends or family	43.5%
Spending time outside (e.g., walking, fresh air)	39.8%
Using social media	38.2%
Playing video games	34.9%
Excessive screen time (e.g., binge-watching, doom scrolling)	33.9%
Sleeping excessively or not getting enough sleep	33.3%
Engaging in physical activity (e.g., exercise, sports)	31.2%
Avoiding or procrastinating	30.6%
Creative or artistic hobbies (e.g., drawing, painting, writing)	30.6%
Self-isolating or withdrawing from others	29.6%
Overworking or overexerting yourself	25.8%
Organizing tasks or making lists	17.7%
Practicing self-compassion or positive self-talk	12.4%
Practicing mindfulness or meditation	9.7%
Using alcohol, drugs, or substances	5.4%
Seeking professional help (e.g., counselor, therapist)	4.8%
Smoking or vaping	4.8%

COMFORTABLE AND SUPPORTIVE SPACES

What factors make an environment feel comfortable and supportive?

Factor	Percentage
Being with close friends	65.9%
Freedom to express myself without judgment	49.5%
Being in nature/outdoors	45.6%
A quiet atmosphere (e.g., soft lighting, minimal noise, calm environment)	44.0%
A familiar or home-like setting	43.4%
Being with family	42.9%
Having control over the space (e.g., ability to personalize, leave when I want)	41.2%
Being alone	40.1%
Having a sense of belonging or community	38.5%
Access to supportive people (e.g., mentors, counselors, teachers)	23.6%
High sensory stimulation (e.g., music, movement, energy in the space)	16.5%
A structured setting (e.g., school, library, club room)	13.2%
Other - Write In	1.6%

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?

Person/Resource	Likely	Unlikely
Significant other	53.0%	17.5%
Friend(s)	52.4%	25.1%
Parent(s) or guardian(s)	51.1%	30.9%
Another family member	39.6%	39.0%
No one, but I wanted to	27.3%	45.9%
No one, but I didn't want to	26.7%	45.3%
Adult(s) outside of school	17.8%	61.1%
Therapist outside of school	17.7%	62.4%
Online friends	15.6%	68.3%
Teacher(s) at school	14.5%	64.5%
Online mental health resources	12.4%	75.3%
Counselor(s) at school	10.2%	65.8%
Other adults at school	9.1%	70.1%
Classmate(s)	7.5%	73.3%
Anonymous hotline/talkline	6.4%	78.1%
Online community	5.4%	81.7%

Likely ● Unlikely ●

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?

Pie chart legend:
- 5
- 4
- 3
- 2
- 1

55.4%
31.0%
10.9%

- **Students are far more comfortable offering support** (55.4%) **than asking for it** (17.0%), 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 - **84.0%**
2. I'm worried I might say the wrong thing - **52.0%**
3. I don't feel equipped to help with mental health issues - **40.0%**
4. I'm not sure how to support them without overstepping **- 32.0%**
5. I'm afraid they might not be open to receiving help - **32.0%**
6. I don't feel confident in my ability to provide the right type of support - **32.0%**
7. I'm worried it could make things worse - **32.0%**
8. I've never dealt with something like this before - **28.0%**
9. I don't feel like I have enough time or energy to help **- 20.0%**
10. I'm unsure if I should involve others in the situation (e.g., family, other friends) - **20.0%**
11. I have my own mental health concerns that make it hard to help others - **16.0%**
12. I'm afraid it might negatively affect our friendship **- 12.0%**
13. I don't know where to direct them for professional help - **12.0%**

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

- Nearly two-thirds of students hesitate to use school mental health resources; only about 1 in 10 would likely or definitely seek school-based support.
- Few know where to find help or how to use available resources, and cite 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, and additional support during stressful periods as key improvements.
- Students are calling for private, quite spaces on campus for students to take breaks.
- Nearly half 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?

Legend:
- Would never use
- Unlikely to use
- Neutral/I don't know
- Likely to use
- Definitely would use

Pie chart values: 28.8%, 30.6%, 32.4%
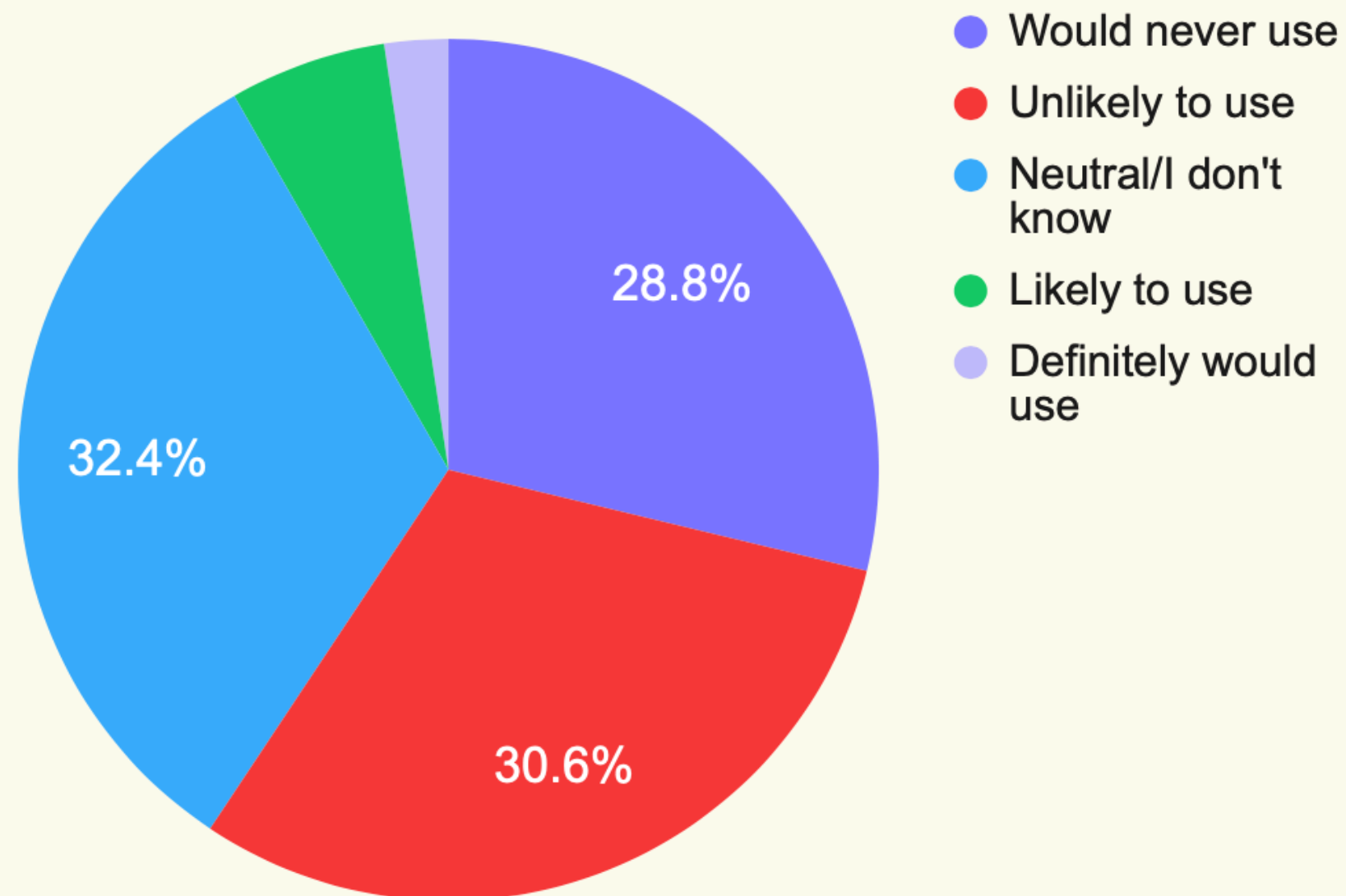
- Nearly ⅔ **of students express reluctance to use school mental health resources**, with less than 1 in 10 likely to turn to them.

- Only 2.4% of students said they would definitely use school provided mental health resources and 5.9% are likely to use 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?

40.4% know where to find resources, but feel hesitant to access them due to embarrassment, concerns about confidentiality, or fear of judgment.

26.1% are aware of the available resources, but are unsure how to use them

22.4% feel comfortable accessing resources when they need them

22.4% are unsure whether their concerns are serious enough to justify seeking help or using available resources.

15.5% are not sure what resources or accommodations are available

11.8% feel that teachers and staff could do more to make resources feel accessible and approachable

9.9% would feel more comfortable accessing resources if they were promoted in a more approachable way.

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?

38.6% prefer to handle their mental health on their own

28.3% have not experienced any obstacles

25.9% don't feel comfortable or safe discussing their mental health with others

21.7% find it difficult to find someone they can relate to

19.3% don't believe their mental health problems are serious enough to warrant help

17.5% are not aware of the resources available or where they are located

16.9% are afraid of being judged or stigmatized for seeking help

16.3% don't think the resources will be helpful or effective

12.7% are concerned that their parent(s)/guardian(s) will find out

12.0% feel embarrassed or ashamed about needing help

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?

12.0% are not sure if they trust the professionals or the services available

9.0% cannot afford mental health care

9.0% are concerned that seeking help could affect future opportunities (college apps, recommendations)

8.4% believe mental health issues should be kept private and not discussed

8.4% are concerned that seeking help will affect my grades or teacher's perception of me

7.2% are worried that my teachers or school staff will negatively judge me for seeking help

4.8% are discouraged from seeking mental health support by their parents

4.8% are unsure how to access the resources or ask for help

3.6% 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?

42.5% – Reduced or more manageable homework and assignment workload

41.9% – Private, quiet spaces for students to take breaks during the school day

41.3% – More flexible deadlines or extended time for assignments

40.0% – Providing specified mental health days for students to utilize

37.5% – Less emphasis on grades

34.4% – More resources during stressful times (e.g., finals, college applications)

23.1% – Training for teachers and staff to recognize and respond to mental health needs

21.9% – Teachers openly acknowledging their availability to support student mental health

21.9% – Educating parents/guardians about youth mental health

18.8% – Tips to combat student stress

16.3% – Education on how students can support one another and peer support groups

13.1% – Offering regular mental health awareness programs or workshops

12.5% – Increasing visibility of mental health resources through posters, announcements, and digital platforms

11.9% – 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.
- Nearly half of students use social media excessively to cope with stress and pressure.
- Nearly half see social media as more harmful than helpful, with 1 in 3 citing it as a major contributor or main contributor to poor mental health in teens.
- 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, staying informed, and exploring self expression and identity.
- Major negative effects include seeking validation, comparison to others, addiction, exposure to negative content or news, setting unrealistic expectations and standards, and disconnection from real life activities.

HOW SOCIAL MEDIA AFFECTS TEEN MENTAL HEALTH

Which of the following statements reflects how you believe social media affects teen mental health overall?
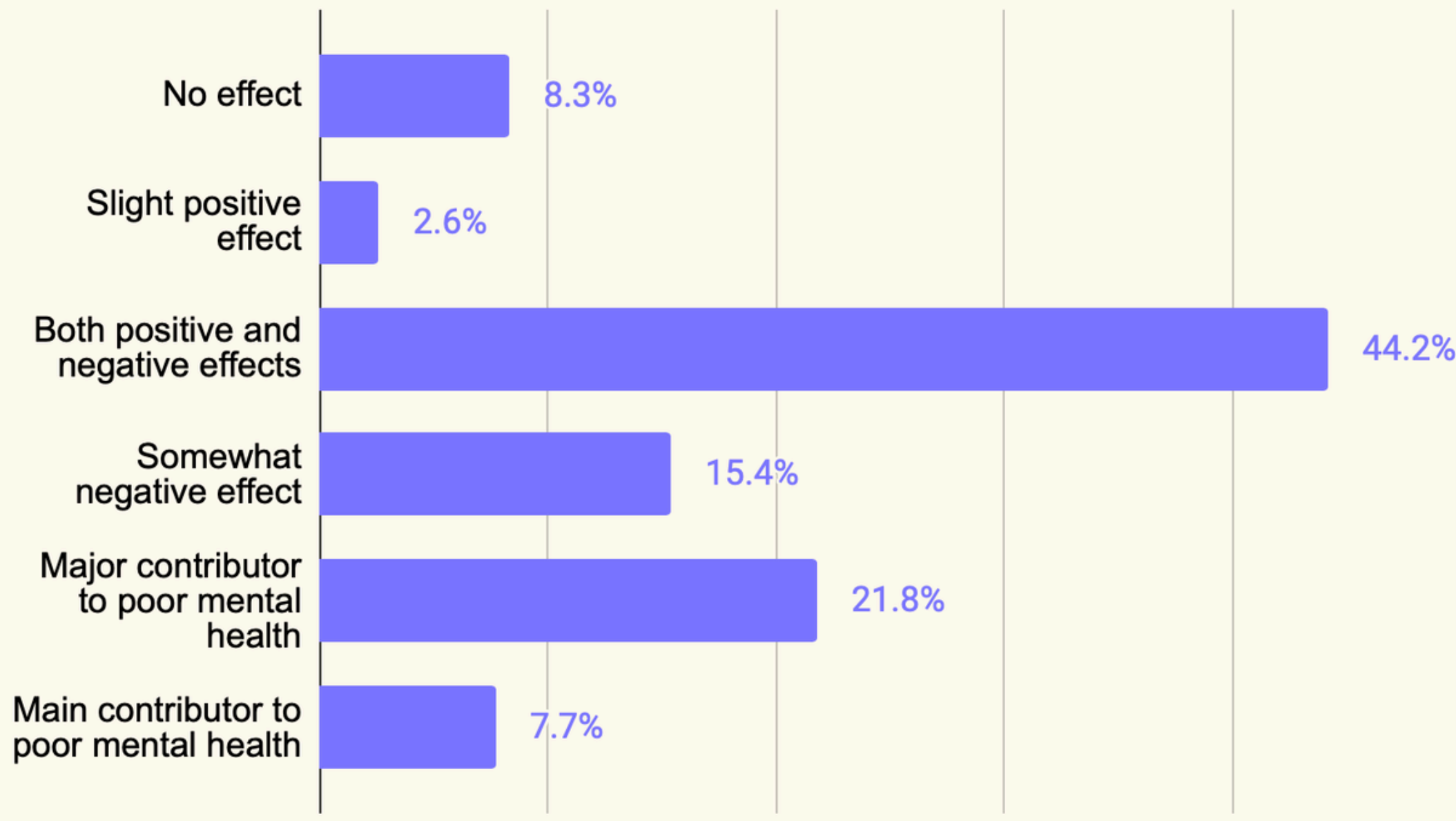
- 44.9% recognize social media as having an overall negative effect on youth mental health.

- 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.

No effect — 8.3%
Slight positive effect — 2.6%
Both positive and negative effects — 44.2%
Somewhat negative effect — 15.4%
Major contributor to poor mental health — 21.8%
Main contributor to poor mental health — 7.7%

POSITIVE IMPACTS OF SOCIAL MEDIA

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

Legend: No Impact ■ Minor Impact ■ Moderate Impact ■ Major Impact ■

Aspect	No Impact	Minor Impact	Moderate Impact	Major Impact
Fun/entertaining	9.6%	11.5%	38.9%	40.1%
Finding inspiration or motivation	10.3%	14.1%	44.2%	31.4%
Staying informed and educated on topics I am interested	12.1%	14.0%	42.0%	31.8%
Exploring self-expression and identity	13.7%	13.1%	44.4%	28.8%
Accessing mental health resources, awareness, or support	12.6%	19.9%	33.8%	33.8%
Making connections with friends and acquaintances	20.5%	16.0%	41.7%	21.8%
Being a part of online communities or support groups	18.1%	21.9%	40.0%	20.0%

NEGATIVE IMPACTS OF SOCIAL MEDIA

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

Legend: ■ No Impact ■ Minor Impact ■ Moderate Impact ■ Major Impact

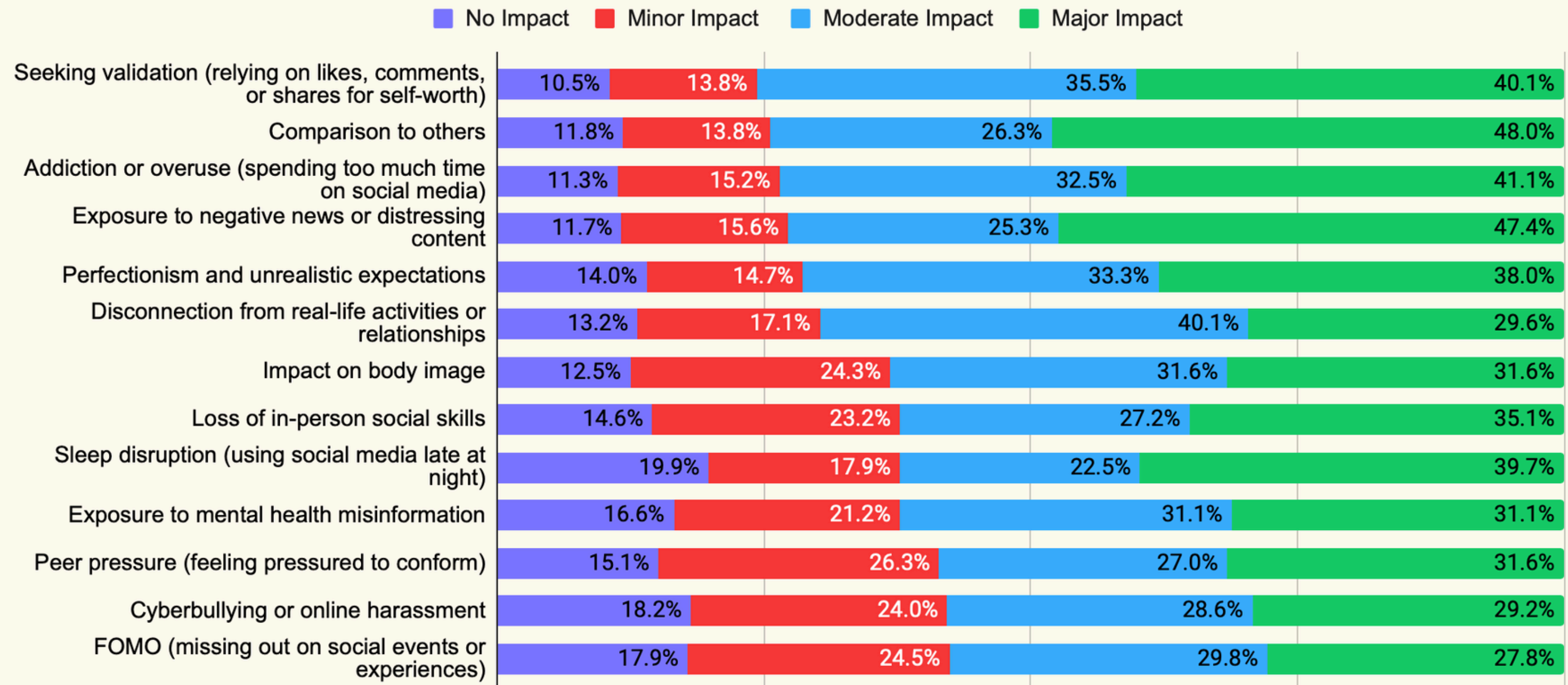| Aspect	No Impact	Minor Impact	Moderate Impact	Major Impact
Seeking validation (relying on likes, comments, or shares for self-worth)	10.5%	13.8%	35.5%	40.1%
Comparison to others	11.8%	13.8%	26.3%	48.0%
Addiction or overuse (spending too much time on social media)	11.3%	15.2%	32.5%	41.1%
Exposure to negative news or distressing content	11.7%	15.6%	25.3%	47.4%
Perfectionism and unrealistic expectations	14.0%	14.7%	33.3%	38.0%
Disconnection from real-life activities or relationships	13.2%	17.1%	40.1%	29.6%
Impact on body image	12.5%	24.3%	31.6%	31.6%
Loss of in-person social skills	14.6%	23.2%	27.2%	35.1%
Sleep disruption (using social media late at night)	19.9%	17.9%	22.5%	39.7%
Exposure to mental health misinformation	16.6%	21.2%	31.1%	31.1%
Peer pressure (feeling pressured to conform)	15.1%	26.3%	27.0%	31.6%
Cyberbullying or online harassment	18.2%	24.0%	28.6%	29.2%
FOMO (missing out on social events or experiences)	17.9%	24.5%	29.8%	27.8%

THANK YOU FOR BEING HERE

If you have any questions, please contact **Mariana@AIMymh.org**