Adolescents’ mental health and emotional problems: a qualitative study in Switzerland

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Conflicts of interest

The authors have no relevant financial or non-financial interests to disclose.

Ethics committee approval

The study protocol was submitted to the Ethics commission of the canton of Vaud (CER-VD; protocol number 2021-00228) and given a waiver, as it did not need to be evaluated according to Swiss law.
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Abstract

Purpose: Mental disorders are the main cause of morbidity among 10-19 year-olds and current research indicates that youth mental health problems are rising, especially with the COVID-19 pandemic. This exploratory qualitative study aimed to gather the opinions of adolescents in Switzerland on the emotional and behavioural problems they may currently face.

Methodology: Our study included 28 participants aged between 12-19 years old. Four online focus groups separated by gender and age were performed between March and April 2021, during the third wave of the COVID-19 pandemic in Switzerland.

Findings: The concept of mental health was very vague for the participants. School was reported as a major source of stressors and may have negative effects on their mental health. This distress has been amplified with the COVID-19 pandemic and the perceived instability of their future. Furthermore, participants reported that poor body image was a major issue threatening the mental health of adolescents, especially among females and on social media. Finally, they considered that social relations, more particularly friendships, were one of the main protective factors for mental health, even if peer pressure was also considered as a stress factor. Given the fact that the concept of mental health was very abstract for the participants, increased levels of mental health literacy are needed.

Originality: This study collects adolescents' opinions on current emotional issues they may face without restricting the domains discussed and considering the particular pandemic and post-pandemic periods.

Keywords: Adolescents; Emotional Problems; Qualitative study; Mental Health; Youths.
Introduction

Adolescents undergo a significant period of physical, emotional and social changes that make them vulnerable to mental health issues (World Health Organization, 2021). Peer pressure and school stress are additional factors that may have an impact on risk behaviours and/or emotional disorders (Campbell et al., 2021). Mental disorders, and more specifically anxiety and depressive disorders, are the main cause of morbidity among 10-19 year-olds (Guthold et al., 2021). According to the World Health Organization (WHO) (World Health Organization, 2021), one in seven 10-19 year-olds suffer from mental disorders worldwide. Prevalence rates of mental health disorders are higher among females (Yu, 2018). In Switzerland, for example, a study led among 13-14 year-olds (Barrense-Dias et al., 2020) found prevalence rates of poor emotional wellbeing of 16.4% among males and of 34.6% among females. Another study lead among 15-24 year-olds at baseline (Barrense-Dias et al., 2019) found prevalence rates of poor emotional wellbeing of 14.8% among males and of 24.8% among females in 2019. This gender gap may be due to sociocultural factors, but also to an underreporting of poor mental health among males (Sigmon et al., 2005).

Current research indicates that youth mental health problems are rising (Mojtabai et al., 2016; Phillips & Yu, 2021; Sadler K, 2018). For instance, according to the Swiss Health Survey (Observatoire suisse de la santé, 2020), mild to severe depressive symptoms increased from 10.4% in 2012 to 13.5% in 2017 among 16-25 year-olds. This phenomenon seems to have amplified with the COVID-19 pandemic (Sprang & Silman, 2013). Indeed, pandemics and/or the measures to prevent them may cause mental health disorders for the population affected (Talevi et al., 2020). Regarding the youth population, evidence shows that school closure, quarantine and lack of social interactions may have detrimental effects on their mental health (Wang et al., 2020).
Childhood mental health problems have implications for adult mental disorders (Barrense-Dias et al., 2021). It is thus important to identify the risk factors for the mental health of adolescents, how the COVID-19 pandemic impacted them, and to use youths’ voice for the development of early intervention strategies. This exploratory qualitative study aimed to gather the opinions of adolescents (aged 12-19 years) in Switzerland on the emotional problems faced by people their age.

**Methods**

This project was part of a multinational study supported by UNICEF and coordinated by the John Hopkins Coordinating Centre of the Global Early Adolescent Study, which aimed to explore the mental health of young people in their communities around the world through focus groups (FG). We conducted an exploratory qualitative research on mental health in the French-speaking region of Switzerland. Our study included 4 FGs separated by gender (female/male) performed between March and April 2021, during the third wave of the COVID-19 pandemic. Group size ranged from 6 to 8 participants. The interviews were conducted by video conference using the secure professional version of the Zoom© platform due to the sanitary measures imposed by the COVID-19 pandemic. Participants were recruited through adolescent-oriented websites and offline postings (adolescent clinic, etc.), and through a snowball method. They were invited to participate in the study to share their general views and opinions on the emotional and/or behavioral problems of adolescents. Each FG lasted about 75 min and was moderated by a facilitator with expertise and training in conducting FGs (Y.B-D.) and an observer (L.C.) who took notes. Prior to each FG all participants received an online socio-demographic questionnaire on the secure REDCap®
application, which also included an information sheet about the study and signed an electronic consent form. According to the Swiss law, for adolescents under the age of 14, an information sheet and an electronic consent form were also distributed to their parents/legal guardians. Every recording was anonymously transcribed verbatim and then deleted. To ensure anonymity, all identification elements (first name, surname, address, etc.) were removed in the transcriptions. All the details of the recording including the transcription and anonymization were presented to the participants. A semi-structured interview guide was developed and validated by UNICEF and John Hopkins University according to the literature on adolescents’ mental health. It included questions about the definition of mental health, causes of poor mental health, risk and protective factors, coping behaviors, COVID-19 pandemic, and possible interventions. Discussions were triggered through the presentation of testimonies posted on a youth support website (www.ciao.ch) by young people facing a problematic situation regarding mental health. To avoid preconceived ideas, we started the discussion with the following large question: How do you define mental health? At the end of each FG, participants received a 30 Swiss Francs (~30 US$) gift card for a large department store as a way to thank them for their time. The study protocol was submitted to the Ethics commission of the canton of Vaud (CER-VD; protocol number 2021-00228) and given a waiver, as it did not need to be evaluated according to Swiss law. A safety net was intended for problematic cases that might come to the knowledge of the authors. Adolescents with personal difficulties could be referred to support institutions and care units if needed. This information was included in the information letter.

Participants
Participants inclusion criteria were to be aged between 12 and 19 years and fluent in French. A total of 28 participants took part in the study (15 females and 13 males). As the topic of mental health could lead to discussions on intimacy, females and males participated in same-gender groups. Moreover, gender homogeneity is often recommended for FGs with youths to avoid an adaptation of their speech or a discomfort due to the presence of another gender and to encourage the discussion through this common characteristic (Frith, 2000; Heary & Hennessy, 2002). In addition, females would suffer from higher prevalence rates of poor mental health than males (Yu, 2018). Such a separation by gender allowed us to conduct a group analysis. We also met the younger adolescents (12-15 years) and older adolescents (16-19 years) separately since both groups may be concerned by different types of problems and to facilitate the discussion among participants around the same age. Therefore, adolescents (mean age 16 years old) were separated by gender and divided into older (n = 7) and younger (n = 8) groups of females and older (n = 7) and younger (n = 6) groups of males. No adolescent of any other gender category contacted us.

Data Analysis

FG transcripts were transferred to the qualitative analysis software MAXQDA (version 2020). An inductive approach was used to perform a thematic content analysis which enabled to extract the different themes and dimensions brought up by the participants (Braun & Clarke, 2006; Clarke & Braun, 2014; Hsieh & Shannon, 2005). This method aims to focus on subjective interpretations and meanings of a social phenomenon by using a classification and categorization process. First, the first author read the transcripts several times to obtain a general overview of the collected data. Second, she created codes by labeling sections and defined quotes based on predominant and significant patterns. Third, she combined and merged similar codes to form overarching thematic
categories relevant to the research questions. The last author generated and defined the codes with definitions when they could be interpreted in different ways, analyzed the data and formed the broader themes. Based on coding definitions, the other authors reviewed the first analysis, highlighted divergences and identified additional themes. To ensure accuracy and consistency in the application of codes, they discussed divergences until reaching consensus. The first author translated the quotes used in this text from French into English, and translations were verified by the other authors.

**Results**

Based on the interview guide, three main themes emerged: the definition of mental health, the main causes of a poor mental health and the impact of the pandemic. The sub-themes were then developed from the discussions with the adolescents.

*Understanding of mental health*

As the term 'mental health' is often used in prevention campaigns, to initiate the discussion about mental health issues among adolescents we were interested in what it meant to them. Overall, it seemed to be a very abstract concept for most of the participants, among both females and males, leading to some difficulties to know exactly what the term ‘mental health’ included. “*It is quite vague, it can be many things.*” (Male, 15). When asked how it could be defined, well-being was often addressed. “*I would say, for example, that mental health would be to feel good […]*.“ (Female, 15). The discussions went also briefly around emotions and self-control. “*It [mental health] is a mixture of emotions that makes us feel good, I don’t know, it is when we manage our emotions […].*” (Female, 15). But the participants demonstrated difficulties to imagine mental
health issues when they were not personally and directly affected. Only one participant, who was in the FG among younger males, mentioned depression as something related to mental health issues. Apart from associating poor mental health with not doing well, the other participants of the group were not able to develop further. “People with mental health problems are people who... I do not know but yeah... who are not well for example, or I do not know how to explain...” (Male, 15). In the same FG, another participant distinguished between mental and physical health, explaining that unlike the latter, mental health issues are poorly visible from an external perspective. “For me there is mental health and physical health, they are both important but mental health [...] is not necessarily noticeable from the beginning, and... if the person does not talk about it we cannot, we can but... hardly detect it.” (Male, 15).

Causes of poor mental health

In order to identify what impact they may have on their mental health, we asked the participants what the main and current adolescents’ problems or concerns were. Different causes of poor mental health were brought up during the discussions, categorized in four subgroups: school-related stress, social relations, poor body image, and climate anxiety.

School-related stress

One of the major problems reported by the participants was school-related stress. In particular, the constant burden of impending exams was generally considered as the root of stress. “I think that most of our stress comes from school because it is something that we experience every day [...] and that we have to deal with, and evaluations, tests, and so on are always complicated [...]” (Female, 14). This stress would also be due to a general and multidimensional pressure to succeed,
such as the one put by teachers and parents and/or between students. "Everyone will stress you out, the teachers, the parents, and even the students themselves will stress each other out. [...] Even if you get good grades you will still start to stress, [...] there is a lot of stress for nothing." (Male, 15). Moreover, a fear of being inferior would be felt by some adolescents due to the comparison between students. "I have always been afraid that I am not going to pass the year and all my friends are going to pass the year, and then to say to myself that there are others who are going to work harder than me, so it gives me stress to do less well than them and then the teachers compare us to these people and... to be less well than them is also the stress of the courses." (Female, 15). According to several participants, school stress would also be due to the need to choose a certain path in their studies while projecting into the future might be difficult due to the perceived instability of the world. "[...] I see myself working in an unstable world, so it is scary because you start thinking you are going to study so long for that [...]" (Male, 18). The school-related stress and difficulties to project into the future were amplified with the SARS-CoV-2 pandemic.

Social relations issues
Participants considered that social life and social integration were very important for maintaining good mental health. "Being accepted, especially socially, that is important too I think." (Male, 18). On the one side, they reported loneliness and/or social isolation as a situation that might have a negative impact on mental health. On the other, they might sometimes be preoccupied with friendships or first romantic relationships. "I also believe that there are relationships, first love, first boyfriend. [...] There are also relationships with friends [...] and they worry a lot about that, I think." (Female, 19). Moreover, some adolescents considered that financial issues could
sometimes lead to social exclusion and therefore impact indirectly adolescents’ mental health. “[…] If you do not have money for anything other than food and essentials, you can be rejected by friends.” (Male, 15). Furthermore, among the phenomena that are detrimental to adolescents' social life and might impact their mental health, participants identified different forms of discrimination, such as harassment and racism. “[…] There is racism, […] (there is) the cool student or the cool group of people, and if you are excluded from that, you feel lousy. I do not know how to explain it, but it is complicated for us after that to feel accepted and to be happy where we are.” (Male, 18). These forms of discrimination may nowadays be amplified with social networks and harassment, for example, may continue when students get home. “I think that if there is one thing that social networks […] have amplified, it is harassment. Because before, if we were harassed at school, we went home […] and now with such easy access […] it has clearly made the phenomenon worse.” (Female, 15). Certain categories of the population such as sexual minorities or females would be more affected by online harassment. “[…] But people hide a lot behind social networks and precisely to attack […]. Whether it is for our sexuality, our gender or whatever, and people are very affected by that. Especially people from the LGBT community I would say, and women especially […].” (Male, 18).

Poor body image

Poor body image and/or the pressure to match some societal standards regarding body image threaten the mental health of some adolescents according to the participants. Both females and males assumed that this pressure would mainly weigh on females. “There is also perhaps more judgement on females’ bodies. […] If someone [including males] is fat, skinny, you always find something, but I have the impression that there is more towards females.” (Male, 15). In relation
to this issue, eating disorders were reported by some participants as a problem that may be experienced by many young females. “There are a lot of people who starve themselves just to try to lose weight, [...] It can become quite serious [...] in terms of starving yourself.” (Female, 18). In relation to body image, but also more globally, some participants reported that judgment of others, sometimes induced by jealousy, was very present and that adolescents should protect themselves from the fear of the gaze of others. Moreover, according to a participant, victims could themselves become perpetrators and judge other people. “I also think that there are people who judge because they themselves don't feel good, and are judged by other people.” (Female, 15). The same participant felt that as the years go by and they grow older, the judgment of others becomes easier to handle by improving self-confidence. “I also think that -well not in all cases but- the more you grow up the more you learn, [...] the more you grow up the more you gain self-confidence, which allows you to counteract a bit the gaze of others.” (Female, 15). Social media were identified by the participants as one of the possible factors that may increase the risk of having a negative body self-image. Some of them considered that social media could amplify the pressure on bodies, and generate a poor body image due to the social comparison. “[...] On social networks, we compare ourselves a lot to others, for example on our bodies and so on.” (Female, 18). Finally, puberty changes were also mentioned by some participants as making the adolescent years difficult in terms of body image. When asked if the teenage years were an easy time, a participant answered: "Well, no, there are the bodily changes.” (Male, 14).
Another element that might have an impact on the mental health of adolescents is climate change, which can cause climate anxiety. This was reported by older adolescents during the focus groups. “[Climate] is a very deep anxiety, the future [...] is it going to be alright actually for humanity? [...] We are nobody to talk about it, but I really think it is a very deep and anchored anxiety that stays in your head all the time.” (Female, 19). Several adolescents would feel anxious about climate change while, at the same time, feeling powerless. “I mean, we are talking about the future, [...] with the environment for example, [...]. What can we really do at our level? [...] It is a global pressure, it is the world, and the more I grow up the more I realize that the world, I am tiny next to it.” (Male, 18).

SARS-CoV-2 pandemic

We asked participants how the Covid-19 pandemic impacted their mental health. Several negative emotions or attitudes, such as anxiety or weariness, were reported when talking about this period. “There is a kind of permanent anxiety that is muted [...]. I think there is also a kind of weariness, resignation, [...] it is never a very positive emotion [...].” (Female, 19). Regarding the disease itself, adolescents were worried that a loved one caught it or was impacted by it. Anxiety was all the more difficult to manage because distractions such as sports or going out with friends were no longer possible due to restrictions. « [...] It is horrible, it takes away a lot of ways of dealing with stress that we have in everyday life as adolescents, a lot of ways that people used every day to try to deal with their stress, whether it is sports, the gym and so on that are closed, whether it is going out with friends [...].” (Female, 15). The social isolation induced by the lockdown had a negative impact on adolescents’ mood as social life had been identified as important to maintain good mental health. “ [...] The social side has a huge impact on us and it changes our mood so much I
think.” (Female, 18). Moreover, uncertainty was a feeling shared by some participants. More specifically, it was difficult to project oneself into the future. “There are also the consequences of the Covid, [...] the economic consequences, the crisis. Will there be other pandemics? Will it [covid] go away? Will it [covid] stay like this? [...]” (Female, 19). These difficulties of projection have amplified the stress linked to school felt by some adolescents. “Well, I had to start seeing a psychiatrist, because of the pressure I was starting to feel, because I was too worried about my future, I wondered too much what I was going to do, I was lost, I did not even know if I wanted to continue my studies at school [...] or if I wanted to go into computing, apprenticeship or whatever.” (Male, 18). More globally, many older adolescents felt a general lack of motivation due to all the restrictions imposed by Covid. “Growing up like this, spending our 16th or 18th birthday in this period where we are so stuck, it is demotivating. I thought when I was 18 [...] I was going to be able to go out, enjoy myself, do a lot of things that other people my age were doing at the time, but finally I am just stuck at home [...]” (Male, 18).

**Discussion**

This qualitative study presents the opinions of adolescents on the psychological and behavioral problems they may face and the perceived risk factors associated with them. Six main themes emerged with the analysis: vagueness of mental health definition and its understanding, school-related stress, projection into the future, social relations issues, poor body image and effect of SARS-CoV-2 on their mental health.

The concept of mental health was very vague for the participants. Only a few participants were able to identify common mental disorders when they were asked to define mental health. The
difficulties to understand the concept of mental health might be due to the taboo surrounding mental health issues. Therefore, adolescents must be explained this concept, what issues may be related to it and what factors can influence it. Furthermore, it is important to promote exchanges about mental health at school, with family and friends and to provide spaces for discussion on these issues. In this line, increasing levels of mental health literacy are needed (Jorm, 2000; Tissera & Tairi, 2020). This has been recognized as an important measure to improve help-seeking behaviors and is one of the objectives targeted by the International Declaration on Youth Mental Health (Coughlan et al., 2013) to improve awareness about the determinants of mental health of young people.

As emphasized by literature (Kaczmarek & Trambacz-Oleszak, 2021; Nygren & Hagquist, 2017), our results show that school is for adolescents a major source of stressors, which may have negative effects on their mental health. The anxiety would be due to various forms of pressure such as high expectations from teachers or parents and competition between students. The school-related stress is also linked to the fact that some adolescents struggle to choose a certain path in their studies at such a young age and to project themselves into the future. This distress has been amplified with the SARS-CoV-2 pandemic and the perceived instability of the world, including climate change. Indeed, as shown in a recent international study on climate anxiety in children and young people (Hickman et al., 2021), our results demonstrate that adolescents are worried about climate change and have pessimistic beliefs about the future.

In line with other studies (Clay et al., 2005; Ganesan et al., 2018), participants reported that poor body image was a major issue threatening the mental health of adolescents, especially females. It
is noteworthy that the participants considered that peer pressure played an important role in body image disorders. To reach peer acceptance and conformity, some adolescents may modify their behaviors, clothes and/or speech. Furthermore, as suggested by literature (Vogel et al., 2015), social media were identified by the participants as putting the adolescents even more under pressure regarding body image. Campaigns and actions are needed to create a less shaming culture and to reduce stigma and discrimination. Furthermore, education programs should help adolescents develop a positive body image on the one side and to allow them to develop their critical thinking to counter the harmful effects of the media on body image on the other.

Participants considered that social relations, and more particularly friendships, were one of the main protective factors for mental health. The importance of social support and friendships has been felt even more during the restrictions due to the SARS-CoV-2 pandemic. As emphasized by literature (Achterbergh et al., 2020; Richard et al., 2017), our results show that social isolation and/or loneliness might have a negative impact on mental health. Furthermore, prevalence rates of loneliness increased among adolescents worldwide since the 2010s (Twenge et al., 2021). Effective interventions are needed to promote healthy friendships and relationships between adolescents and to reduce diverse forms of discrimination. Adolescents should also be provided sources of social support to prevent feelings of loneliness and to improve their mental health (Bauer et al., 2021).

The first strength of this study is to gather the opinions of adolescents on the current emotional problems they may face. Second, we considered mental health from a global/holistic perspective and studied adolescents’ mental health in different domains. Third, the interviews were conducted
during the Covid-19 pandemic. This allowed us to collect the adolescents’ voices on the direct effects that the pandemic and the restrictions may have had on their mental health. Finally, this exploratory study could pave the way to research on the emotional problems adolescents may face. However, some limitations need to be discussed. First, since data are collected based on respondents’ self-reports, there is a risk of self-censoring. However, we reduced it by asking general opinions and not personal problems and by forming gender and age homogeneity groups. Second, the snowball process, one of our recruitment methods, could have the bias of gathering participants who share the same characteristics and opinions. Third, the results of this study may not be fully generalizable due to the nature of the study, the small sample of participants and some of the issues may be related to the Swiss context. Finally, our sample only includes males or females. Given the fact that mental health issues may be different for other gender identity groups (Scandurra et al., 2019), they should be the subject of another research.

**Conclusion**

Several recommendations stem from this study. Given the fact that the concept of mental health was very abstract for the participants, increased levels of mental health literacy are needed. To do this, adolescents should be explained the concept of mental health and discussions around these themes with professionals should be organized. More globally, adolescents should be provided more spaces for discussion on these issues, in online platforms, in clinics, at school, at home and with friends. School was considered as a major source of stressors by the participants. First, adults such as teachers and parents should be made aware of this fact and trained to detect adolescents’ stress so that early interventions could be set up. Second, it seems important to rethink the current school system and to reduce the competition between students, the pressure put by adults and the
stress induced by school. Social support and friendships were major protective factors for mental health according to the participants. It is important to give opportunities to more isolated adolescents to settle in with adolescents’ groups through community-based activities and to talk about their loneliness to adults. Finally, there is a need for prevention programs and interventions to help adolescents develop a positive body image. These interventions should include all genders using a gender prism.
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