

Voices of Wisconsin Students: A Photovoice Project

Sara Kohlbeck, MPH
Director
Division of Suicide Prevention
Medical College of Wisconsin

Tricia Monroe, MEd, CHES
Division of Suicide Prevention
Medical College of Wisconsin

Introduction

At the conclusion of 2021, the United States Surgeon General issued an advisory on the crisis of youth mental health, citing critical increases in mental health symptoms, including suicide rates among youth ages 10-24 between 2007 and 2018 (OSG, 2021). Pre-pandemic, students across Wisconsin experienced an increase in feelings of sadness or hopelessness, suicide attempts, and suicide ideation. Additionally, young adults, ages 18-24, experiencing any mental illness increased between 2015 and 2019 (OCMH, 2021). While the breadth of impact of living through the COVID-19 pandemic on the health and well-being of youth in addition to these mental health challenges is still being determined, recent insight from Wisconsin students highlight the repercussions of isolation and the increased anxiety related to health risks.

The Voices of Wisconsin Students Project: Learning, Coping, and Building Resilience During COVID-19 (VoWS), completed by the Wisconsin Public Policy and Service Research Partners, provided students across Wisconsin the opportunity to participate in focus groups to discuss and share thoughts relating to challenges and coping strategies during COVID-19 (Belton et al., 2021). Key themes from these conversations included increased levels of stress, anxiety, and depression, challenges of virtual learning, loss of connectedness and belonging, importance of supportive relationships, lack of knowledge of mental health resources, stigma around help-seeking, and the resilience of Wisconsin youth. Additionally, students recognized the benefit of sharing experiences within a group setting, and the significance of being heard.

In response to the VoWS project, multiple agency partners focusing on the mental health needs of students gathered to discuss potential next steps. The Wisconsin Office of Children's Mental Health, Department of Health Services Division of Care and Treatment Services, and the Bureau of Community Health Promotion identified the need for additional opportunities for the voice of Wisconsin students to be amplified, directly addressing the Surgeon General's call to better understand the needs of youth, from the youth themselves (OSG, 2021). Partnering with the Medical College of Wisconsin's Comprehensive Injury Center, this project aimed to provide Wisconsin students with a unique method to share their thoughts and experiences related to mental health and well-being.

Methods

This is a qualitative project, which leverages data from focus groups as well as photovoice data. Photovoice is a research process in which participants take photos of their everyday experiences, to record aspects of their life and their community, and then come together with others to discuss these experiences (Wang & Burris, 1997). Photovoice, as a research tool, has been demonstrated to enhance understanding of community contexts (Catalani & Minkler, 2010), and thus was leveraged in this project

to provide students a forum to depict their experiences with mental health and wellness in a way that increases others' understanding of these experiences.

Our study sample included Wisconsin students ages 14 to 26. Participants for this study were recruited via social media and other venues, including email listservs from the Office of Children's Mental Health. Upon agreeing to participate, students were provided with three prompts by taking photos that depict their daily experience:

- a. What does mental health and well-being mean to you?
- b. What stressors and supports do you encounter in your life?
- c. What does a safe and supportive relationship look like?

Upon completing the photo capture of these experiences, students participated in a focus group that included other participants. During the focus group, students shared their photos and responded verbally and with photos to the prompts above. Additionally, students were asked to describe their sense of belonging in their community, coping strategies they employ when they feel stressed out, and challenges that they face in their own mental health and well-being. Focus group sessions ended with an opportunity for students to share anything that they appreciated about their participation in this project. Participants were provided with a \$25 gift card as a token of appreciation for their participation. Also, participants were required to comply with a photovoice ethics agreement that ensured the privacy of others (e.g., participants were not allowed to submit photos that included faces or other identifiable features of other people).

Focus group transcripts were analyzed using a thematic analysis (Braun & Clarke, 2006) process. First, each transcript was read individually. A code book was developed based on the transcripts, and a first round was conducted by a member of the research team. The code book was then revised based on the initial coding, and a second round of coding was conducted by a different member of the research team. Once coding was complete, the codes were grouped into themes that reflect the essence of the focus group data. The coding process was inductive in that there was no pre-determined theory used to develop codes or themes. Qualitative data analysis was conducted using MAXQDA Plus 2022. All study activities were approved by the Institutional Review Board at the Medical College of Wisconsin.

Results

A total of 11 students participated in all study activities. Participants ranged in age from 17 years old to 25 years old. 67% of participants were female, 17% were male, and 16% identify as non-binary. 83% of participants were White, while 17% were individuals of color. 25% of participants were Hispanic/Latinx. In terms of county of residence, participants originated from one of four different counties in Wisconsin, and both urban and rural counties were represented in our sample.

Four themes were drawn out of the focus group transcripts and pictures that were submitted by participants. Those themes, along with photos and emblematic quotes to support each, are listed below.

Theme 1: Individual-level factors drive mental health and well-being

Participants spoke at length about how their own individual experiences impact their well-being. Several individuals noted that they are experiencing their own mental health challenges, whether those are

diagnosed mental health conditions or issues related to mood. One participant, a 17-year-old multiracial female, talked about the role that mental health issues have played in her life:

“Mental health is a big thing in my life, even without my diagnosis...I kind of found myself always thinking of how to better society because of mental health. It’s a big factor...”

This same participant discusses how her social anxiety has impacted her interactions with other people:

“I’ve always had social anxiety...I saw a doctor and a therapist, and it hit that I have mental illness...especially in these bigger situations. It makes me feel drawn out, I’m not there, life is just happening before me. It’s so loud, so many people...”

Another participant, a 25-year-old white female, talks about how symptoms of depression interfere with her well-being:

“When my mental health is worse, I wake up and I don’t want to get out of bed. I have a bunch of things to do, and I get cranky.”

Physical health challenges also present a source of stress for Wisconsin students. These physical health issues may be the result of an unintentional injury, as is the case for one student whose brain injury prevented her from wrestling, which was a form of stress relief for her:

“I’m trying to find a new thing, to let out my anger. I’ve done reading and writing, but nothing compares to wrestling. It was safe – a way to get my anger out. I had great coaches. They had a wrestling mat, letting me wrestle until I cry. It was really soothing...I wrestled for 9 years. I did get a brain injury and now I’m not allowed.”

One student, a 24-year-old White female, had a recent injury that caused quite a bit of pain and was a source of stress for her:

“I slipped and fell and hurt my hand and then broke my elbow”

Her picture displays her injury, which kept her from being able to engage in typical activities, like biking, that she enjoys:





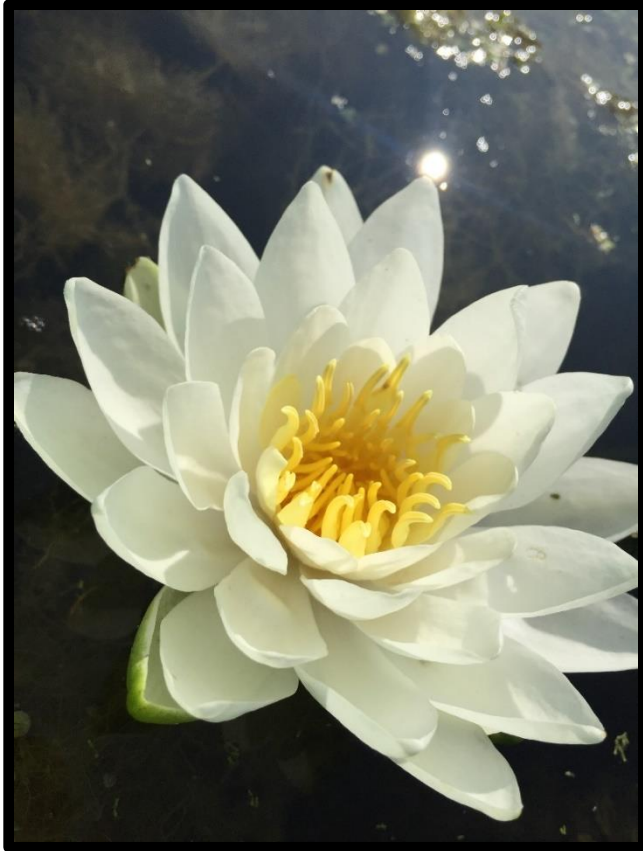
Sleep is important to both physical health as well as mental health, and several students discussed issues related to lack of sleep. One student, who is in medical school, took a picture of her sleep tracking app, which showed how little sleep she gets some nights:

“This is my sleep. I’m in medical school and that’s just what happens. I need to prioritize sleep but it’s hard to do.”

Participants demonstrated that they engage in several forms of self-care in order to cope with stressors in their lives. This ability to manage stressors through self-care enables students to continue functioning in their daily lives. Several participants mentioned that they engage in physical activity to help cope with daily stress. A 25-year-old student took a photo of the gym, which represented a self-care activity to her:

“...another thing is to prioritize my physical health and exercising. My mental health is always better when I’m going to the gym and moving my body. Being in school, I don’t always have time to prioritize exercising. When I do, I feel better, I sleep better.”



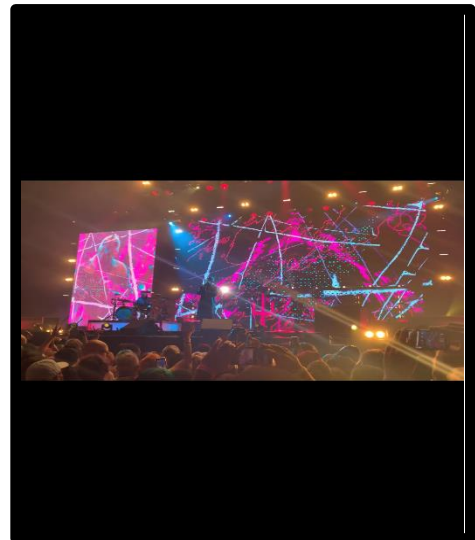


Another form of self-care for many students was going out into nature. Several students took beautiful pictures of the outdoors and talked about how being outside is beneficial to their overall well-being. One student, a 23-year-old White female, took a picture of the outdoors and talked about how mindfully observing the world around her helps her cope:

“I just really enjoy spending time in nature. I really like this photo, how close-up it is. I tend to focus on the details. When I am feeling stressed, it can often feel like there are so many things to do but slowing down in nature and focusing on tiny details can help me.”

A third student, a 23-year-old Hispanic demiwoman, discusses how attending live shows is a form of self-care when they feel stressed out:

“One picture was a concert I went to. I try to go to a handful every year. With COVID it’s more difficult. I’d like to do more. I wish I could do theater, but I like to go to performances.”



Similarly, another student discussed how music comforts her in times of stress:

“I listen to music a lot. I just bought a vinyl record player and bought records. I find a lot of support and comfort in listening to music.”

The photo this student submitted displays some of the new vinyl records she purchased to listen to help relieve stress.



Theme 2: The support of interpersonal relationships is crucial to Wisconsin students

Wisconsin students find support in strong, supportive relationships with others, whether that is friends or family or classmates. The ability to rely on others when times are difficult is important, as is the ability to feel a sense of belonging. One benefit of strong relationships with others is a sense of shared experience, which contributes to a feeling of belonging and community. This sense of belonging can be protective against negative health outcomes, including suicidal thoughts and behaviors.

This sense of shared experience and the support and validation it provides is highlighted by a 24-year-old student:

“Speaking to my classmates, we have a sense of belonging through shared struggles. We have a class chat, ‘Man, that was a really tough exam.’ My feelings are validated. And then not being afraid to ask questions, and having others being receptive to that. That makes me feel like a part of community.”

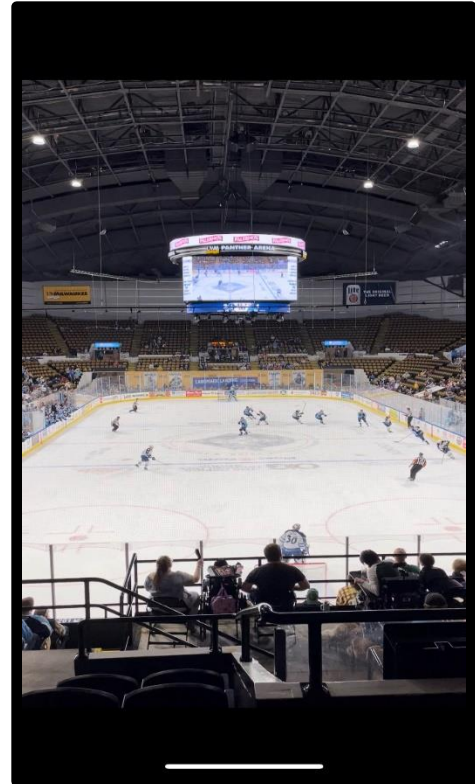
Another student, who is Hispanic, discussed how she feels a sense of belonging as part of a group for underrepresented students:

“A big sense of belonging for me is when I feel as though I have similarities with someone else and relate to them. When coming to [school], I joined the Latino Medical Association. I was able to relate to their stories of getting to this point [in our education], and being an underrepresented student.”

Students also discussed the support of family in the context of belonging. A 23-year-old Hispanic female student reported that family provides a strong sense of community, which is a source of support for her:

“And then my family is my biggest community, because they know me unlike anyone else, and we have many things in common.”

Friends also provide a source of support and coping for Wisconsin students in times of stress. One student, a 24-year-old White male, spoke of how his friend came to visit him during a particularly stressful time and took him to a hockey game to destress. His photo is an image of the game they attended together:



Significant others can also be an important source of support for students. Many students discussed the support they felt when sharing food with significant others, as was the case with one student, a 24-year-old male graduate student, whose significant other made dinner for him during a particularly stressful time:

“This is a dinner my partner made for me. I feel a supportive relationship can be expressed through food.”



Pets are also a source of comfort and support for Wisconsin students. Several students spoke of the importance of their pets in their lives, and many took pictures of their pets to share with other participants. A female Hispanic student talked about how her dog is able to sense her feelings and comfort her:

“I was able to go home this past week, and here is a picture of my dog...that is the definition of a supportive relationship. He knows when I’m stressed and happy, he’s able to sense my emotions on the spot.”

Another student, a 24-year-old Asian female, talked about how spending time with her cat helps her cope with stress, and she captured a photo of one of these moments:

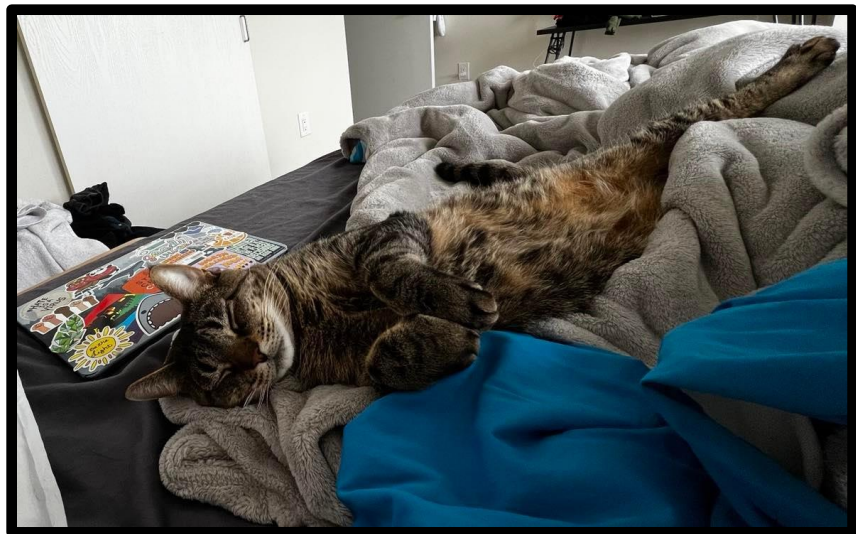
“This is something that makes me feel really good. My cat is not generally really trusting. I thought this was cute. It doesn’t happen very often, but it’s a huge stress reliever.”

Interestingly, while students overwhelmingly attested to the power of support from others, they also expressed feeling like a burden at times when relying on others for comfort and support. This is particularly true in the lives of busy and overwhelmed students with competing priorities. One student described this issue:

“A lot of my friends are in school, and we are all so busy and stressed. I don’t want to spend two hours of my time and their time venting.”

Another student echoed this sentiment:

“If I’m talking with my family and personal friends, I’m almost feeling like I don’t want to burden them [with my problems].”



Finally, since interpersonal relationships are such a critical source of support for Wisconsin students, isolation from others is a source of stress. For many students, the COVID-19 pandemic contributed to a sense of isolation from peers, which caused distress. One student described this:

“A big part [challenge] has been the pandemic. For me being around people helps take my mind off things. I’ve been a lot more isolated than I have ever been...feeling like I spend my whole life in this tiny apartment.”

Students may also isolate themselves from others when they are facing stressors. This was true for a 19-year-old student who is usually the person that friends rely on when they are facing their own issues:

“When I need support the most, I drop communication with people and just lay in my room. I think a challenge is reaching out when I need the support. ‘Cause with my friend group, I am usually the friend that everyone can talk to. I usually don’t have too many issues and challenges in my life, but when I do, it’s challenging for me to reach out to the people that should hear it the most.”

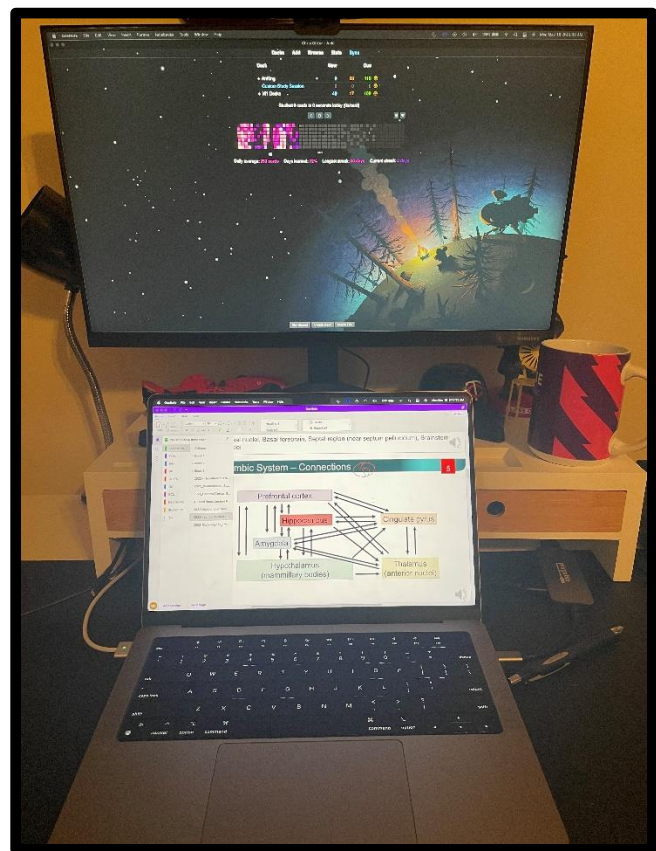
Additionally, being a student who is new to an area presents a number of challenges, including a sense of isolation. One student described this experience when asked what helps her feel a sense of belonging in her community:

“I am new to the area. I recently moved. So, in this community, I don’t really feel a sense of belonging.”

Theme 3: School-related issues are a predominant source of stress for Wisconsin students

Given that Wisconsin students spend many hours per week at school, it is natural that several stressors they experience are school-related. These school-related stressors range from academic stressors to issues related to the physical school environment. Many students discussed how their overwhelming workload contributes to their level of stress. One student captured a photo of their computer as an illustration of this. He said:

“I’m a student at [school], and a stressful photo is my computer with my notes and software that I use many hours a day, that I love to hate. That’s a lot of what my stress revolves around.”

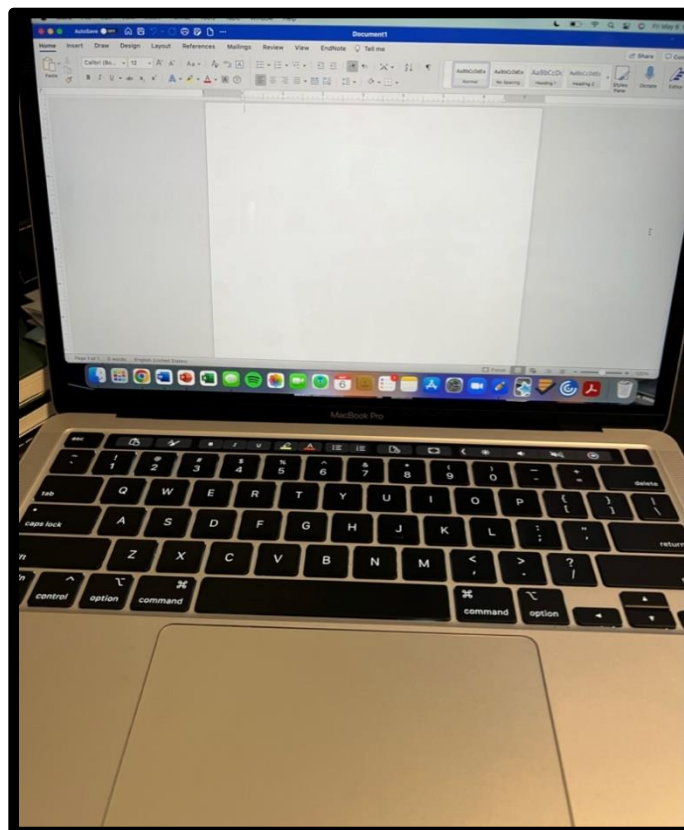
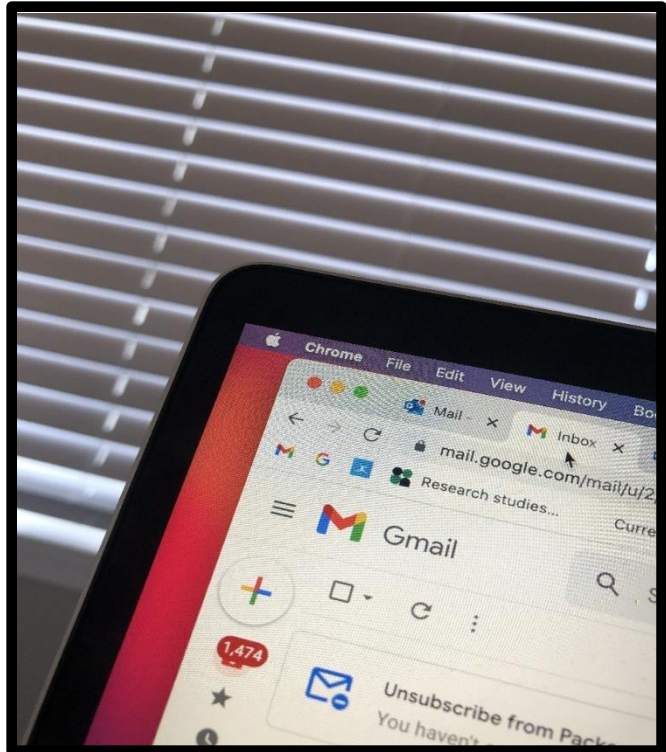


Another student captured a photo of her school email inbox, and discussed how the ever-accumulating emails and notifications are a source of stress for her:

“There was one [photo] that showed my emails and the number of notifications. It’s a source of stress for me. Seeing the number go up and up and working to balance out...email can bring me a lot of stress and I spend a lot of time on it. The time it takes to write up an email, thinking that I’m spending too much time on this.”

Students also discussed stress related to big exams or projects at school. One student captured a photo of a blank document to illustrate how difficult it was for her to get started on a daunting school project:

“The past couple of weeks have been stressful with school. This photo shows a blank Word document, I’m trying to find the motivation to start this research project. It’s so stressful to do it and so stressful to begin.”



Participants discussed how they feel a need to participate in extracurricular activities to stand out amongst their peers. Participating in extracurricular activities can provide an outlet for stress relief, but at the same time, participation adds another task to a student's plate, which can lead to an inability to prioritize other activities. One student talked about how juggling these multiple priorities causes stress in her life:

"I have a pile of clothes that will pile up. I find this stressful. When I have a lot going on, I can't frequently clean up. I hate it, but with so much going on, I can't prioritize cleaning up."

This was echoed by another college student, who said:

"I have a lot of responsibilities and a lot to get done regularly. The tasks are piling up. That is inevitably stressful. So many hours, commitments with school, and extracurriculars to do to stand out."



Finally, some students described how the physical school environment, which can be crowded and noisy, is a source of stress. One high school student talked about how she feels anxious and overwhelmed in the school hallways:

"For me in the hallways, that overstimulation and all those people...I think also, after COVID, I get anxious that people in the hallway aren't being safe...general COVID concerns."

This statement illustrates the overlapping stressors of feeling overstimulated in crowded hallways and feeling concerned about one's health due potential exposure to COVID-19 in situations where many people are present.

Theme 4: Policies, culture, and systems influence the wellbeing of Wisconsin students

The fourth theme revolves around larger, structural issues that influence the mental health and wellbeing of Wisconsin students. These systemic forces can be barriers to help-seeking, and often policies, culture, and systems are at the root of stressors that students face. Many students discussed issues with stigma, which are often rooted in a culture of disapproval or shame at the societal level. Sometimes, students described this stigma as intergenerational. One student, a Hispanic female, talked about how intergenerational stigma influences her interactions with her parents when it comes to issues of mental health:

"My personal perception is that a lot of people my age are open and willing to talk. I think there is a stigma between my generation and our parents'. We're open to talking but our parents are not. And

we're at the age where we still need to talk with our parents...So, I think there is stigma in talking with parents, but not with my peers."

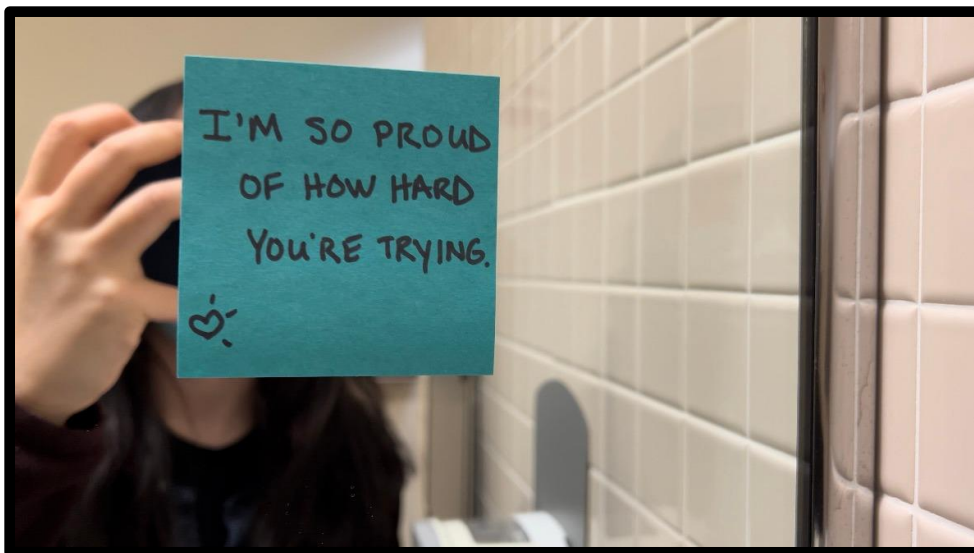
Cultural and societal beliefs also impact how students feel about their own mental health issues. This can result in self-stigma, in which a student blames themselves for their own mental health problems. One non-binary high school student described this:

"I think that maybe I'm my biggest challenge. I happen to have situations where I self-blame and invalidate myself and my experiences. I have to sit down and think if my best friend was telling me this, what would I tell them? If I would tell my best friend something [supportive], then I have to treat myself the same way."

Despite the pervasiveness of stigma around mental health issues, students reported that they feel as though this is less of an issue among their peers. One 24-year-old student noted:

"My personal perception is that a lot of people my age are open and willing to talk."

This openness to discussing issues related to mental health among young people was captured in a photo one student took of a post-it note that was posted on a school bathroom mirror.



Another stressor mentioned by students that has roots in distal factors was the price of gas. Our focus groups were conducted at a time when gas prices in Wisconsin were over \$4 per gallon in many places in Wisconsin, and this caused significant financial stress for students. One student noted that:

"The cost of gas is very stressful in my everyday life. I have to drive and go places, and this is definitely a stressor for me."

This student captured a photo from the dashboard of her car to illustrate this point.



Policies can also create barriers to help-seeking for Wisconsin students, specifically as it related to access to needed mental health services. One access-related issue is time. Some students reported that they don't have time to access mental health services that are made available to them at school because they are too busy with schoolwork. One student noted:

"I have access, I don't feel ashamed, it's normalized. I just don't have time to access [services]. I could spend two hours in counseling or spend two hours on schoolwork."

This is an issue that could be resolved with policy change at the school level.

Another access issue is related to money. Many students reported that they had access to a limited number of counseling sessions through their school but didn't feel that this was adequate to fully address the mental health issues they face. One student said:

"I think we get five free sessions. I think it would be beneficial to have more sessions at a regular place [e.g., professional counseling office] and I don't have the money to do that."

A final access-related issue mentioned by students involves aging out of the child welfare system and - therefore losing access to services, including mental health services. One 17-year-old student, who is about to age out of the system, described this issue:

"I'm struggling with the fact that my therapist won't be able to take me any long at 18, so parting with her will be really hard. I've worked with her for five years. So, trusting someone else will be hard...I'm not ready for that."

Implications

Wisconsin students described stressors and supports across all levels of the social ecological spectrum – individual, interpersonal, school/organizational, and policy/systems levels. This suggests that there are points of intervention to improve students’ mental health and wellness across this spectrum as well:

Individual level:

- Promote and encourage healthy coping strategies, such as exercise and mindfulness-related strategies
- Emphasize the importance of good sleep for mental health

Interpersonal level:

- Create opportunities for connection among students and their peers
- Ensure that students have opportunities to connect with peers who share similar experiences (e.g., students from underrepresented groups) to facilitate a sense of belonging
- Facilitate conversations between students and important adults in their lives around mental health and well-being
- Increase the mental health literacy of adults who interact with students, including caregivers, teachers or faculty, and primary care doctors
- Promote messaging that friends should reach out and check-in when they are concerned about one of their peers

School/Organizational level:

- Review policies and curriculum to prioritize whole student learning (Learning Policy Institute, 2022)
- Provide students with quiet moments to relax and reflect during the school day
- Schedule breaks between school hours and the start of extracurricular activities to allow students to complete schoolwork before moving on to other activities
- Ensure learning environments are safe and supportive of all students
- Create spaces that are soothing and promote focus and learning
- Work with community-based mental health providers to facilitate connections to community resources when needed

Policy/System/Cultural level:

- Actively combat stigma by advocating for students with mental health issues and providing space for sharing of mental health challenges
- Ensure that appropriate screening and referral protocols are in place to assist students who have a mental health crisis or are at-risk for suicide
- Establish processes to support transitions in and out of care (e.g., transitioning out of child welfare system) that includes early collaboration across agencies and elevates the voice of the young person
- Actively engage students when reviewing or developing new policies and programs

References

1. Belton et al. (2021). The voices of Wisconsin students: Learning, coping, and building resilience during COVID-19. High School Report. *Wisconsin Institute for Public Policy and Service Research Partners*. <https://wipps.org/wp-content/uploads/2021/04/Voices-of-Wisconsin-Students-High-School-Report-FINAL-4.19.2021-1.pdf>.
2. Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101. <https://doi.org/10.1191/1478088706qp063oa>.
3. Catalani, C., & Minkler, M. (2010). Photovoice: a review of the literature in health and public health. *Health education & behavior : the official publication of the Society for Public Health Education*, 37(3), 424–451. <https://doi.org/10.1177/1090198109342084>.
4. Learning Policy Institute. (2022). *Whole Child Policy Toolkit*. <https://doi.org/10.54300/785.225>.
5. Office of Surgeon General. (2021). Protecting youth mental health: The U.S. Surgeon General's advisory. <https://www.hhs.gov/sites/default/files/surgeon-general-youth-mental-health-advisory.pdf>.
6. Wang, C., & Burris, M. A. (1997). Photovoice: concept, methodology, and use for participatory needs assessment. *Health education & behavior: the official publication of the Society for Public Health Education*, 24(3), 369–387. <https://doi.org/10.1177/109019819702400309>.
7. Wisconsin Office of Children's Mental Health. (2021). OCMH Wisconsin child well-being indicators dashboard. https://children.wi.gov/Documents/ResearchData/OCMH%20Annual%20Report%202021_Dashboard.pdf.