

# Mental Health First Aid Research in the United States



Mental Health  
FIRST AID

from NATIONAL COUNCIL FOR  
MENTAL WELLBEING

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**Mental Health First Aid (MHFA)** is a skills-based training that teaches people how to



**identify**



**understand**



**respond**

to signs and symptoms of mental health or substance use challenges in adults 18 and older and youth ages 12-18. [Global research](#) and [evaluation](#) of these programs have contributed to a robust evidence base, which is crucial to highlight strengths and gaps across the program and to inform future program developments.



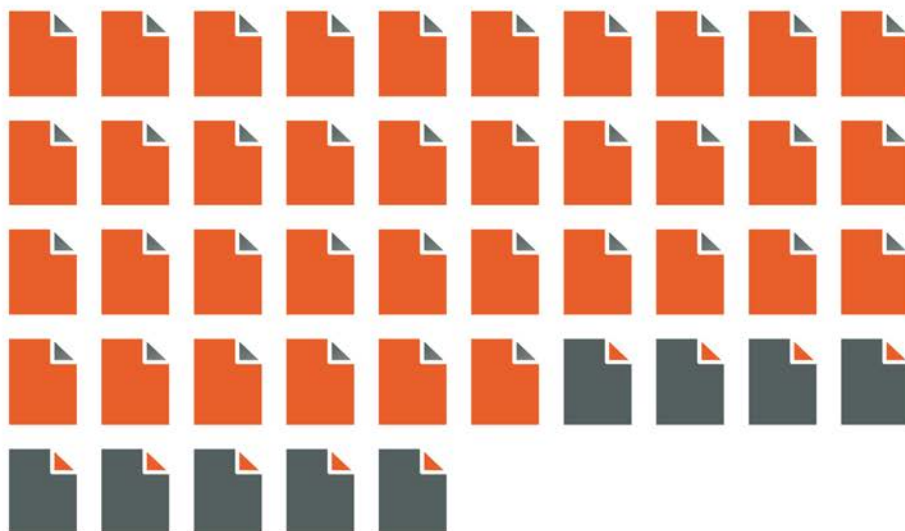
Over the past decade, there has been a growing body of research on the efficacy of MHFA in various populations across the United States.

## Overview

A total of **45** peer-reviewed articles have been published over the past **10** years.

**36** were empirical research studies.

**9** were scoping reviews, systematic reviews or meta-analyses which included studies from the United States.





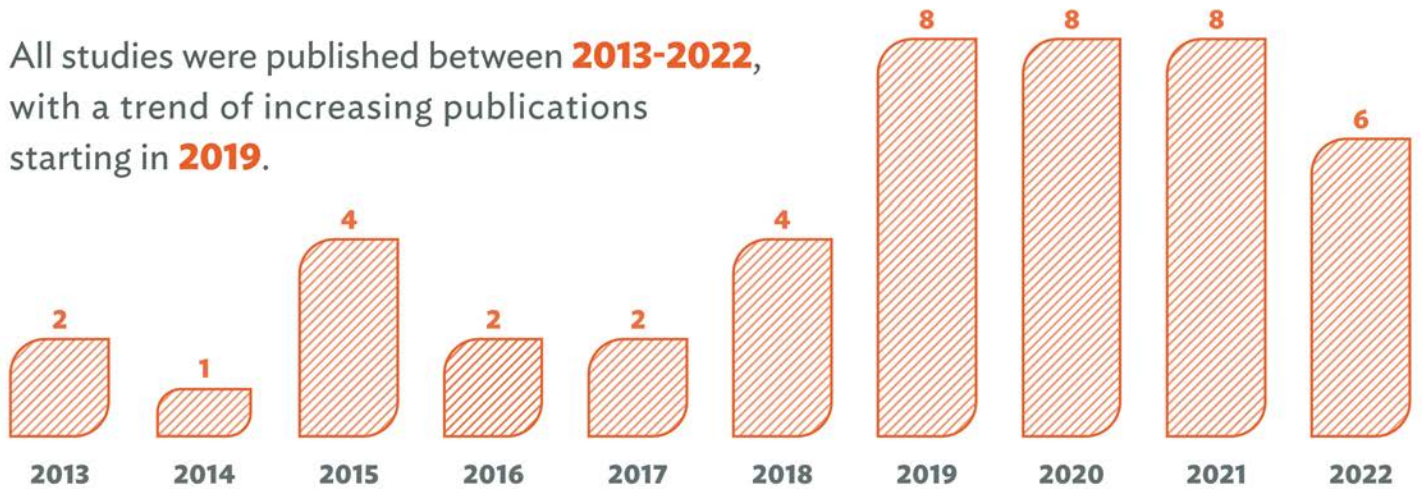
**Scoping reviews** systematically map published literature on a topic by identifying key concepts, theories, and sources of evidence, often to determine gaps in the literature.

**Systematic reviews** collect and summarize all available published evidence on a specific research topic.



**Meta-analyses** use statistics to summarize all available published evidence on a specific research topic.

All studies were published between **2013-2022**, with a trend of increasing publications starting in **2019**.



Of the **36** empirical studies:

 **24** studied **Adult MHFA**
 **12** studied **Youth MHFA**
 **1** studied both **Adult and Youth MHFA**



Of the **9** reviews/meta-analyses,

 **2** covered **Youth/teen MHFA**  
 and **7** covered **Adult MHFA**.



 **3** meta-analyses,

 **7** systematic reviews

 **1** scoping review



# Findings from Adult MHFA Studies in the United States

Adult MHFA studies focused on a variety of populations and demographics, including:



Adults living in urban and rural areas <sup>4, 7, 10, 12, 38, 43-44</sup>



Students and higher education staff <sup>16, 26, 30</sup>



Medical professionals <sup>3, 16, 30, 46-47</sup>



Community-based workers <sup>24, 39</sup>



Refugee communities <sup>19, 42</sup>



Military communities <sup>33</sup>



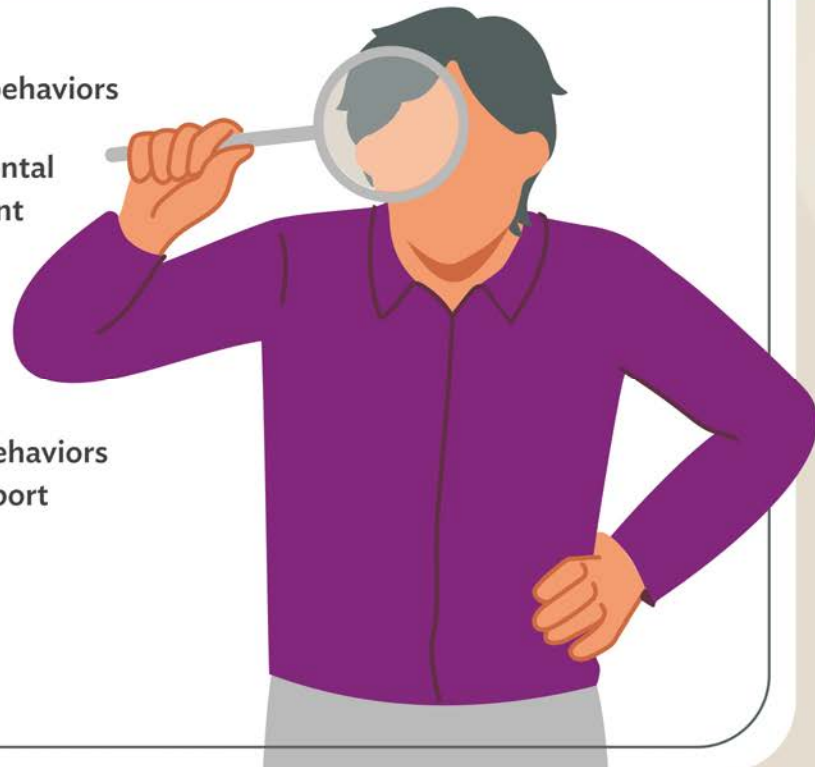
Church members and leaders <sup>9</sup>



MHFA Instructors <sup>11, 27, 31</sup>

Adult MHFA studies tracked a variety of measures, including:

- Mental health literacy
- Confidence
- Self-efficacy
- Attitudes toward mental illness
- Stigma and empathy
- Course satisfaction
- Recognition of mental health issues
- Use of MHFA behaviors
- Seeking out mental health treatment
- Training engagement
- Identification of assistance behaviors treatment/support resources



# Major findings for Adult MHFA

## FINDING:

### Increased mental health literacy, including<sup>4, 7, 9-10, 12, 19, 24, 26-27, 32-33, 38, 42-43</sup>

- Knowledge of signs, symptoms and risk factors of mental health and substance use challenges.
- Ability to identify appropriate types of professionals and self-help resources for individuals with a mental health or substance use challenge.



## FINDING:

### Increased confidence/self-efficacy and likelihood to help an individual in distress.<sup>4, 7, 12, 16, 26-27, 33, 38, 42, 44, 46</sup>

## FINDING:

### Reduced stigma and increased empathy toward individuals with mental health challenges.<sup>9, 16, 24, 27, 30, 43-44</sup>



## FINDING:

### Use of MHFA skills after training.<sup>39, 46-47</sup>

## FINDING:

### Increased likelihood to seek therapy or mental health care for themselves.<sup>26</sup>



## FINDING:

### Correct application of MHFA skills during a simulation.<sup>36</sup>



# Findings from Youth MHFA Studies in the United States

Youth MHFA studies focused on a variety of populations and demographics, including:



Social work students <sup>40</sup>



School personnel <sup>14, 18, 20, 37</sup>



Parents <sup>23, 28, 45</sup>



Youth workers <sup>45</sup>



Social services employees <sup>1, 5, 14, 20</sup>



Mental health professionals <sup>20, 37</sup>



Juvenile justice employees <sup>2, 5, 14, 37</sup>

Youth MHFA studies tracked a variety of measures, including:

- Mental health literacy
- Confidence
- Self-efficacy
- Attitudes
- Stigma
- Awareness of treatment resources
- Program satisfaction
- Behavioral intentions
- Recognition of cues to perform MHFA
- Performance of MHFA actions



# Major findings for Youth MHFA



## FINDING:

### **Increased mental health literacy, including** <sup>1, 4-5, 14, 18, 20, 23, 28, 40, 45</sup>

- Knowledge of signs, symptoms and risk factors of mental health and substance use challenges
- Ability to identify appropriate types of professionals and self-help resources for youth with a mental health or substance use challenge.

## FINDING:

### **Increased confidence/self-efficacy and likelihood to help a young person in distress.** <sup>1, 4-5, 14, 23, 20, 28, 40, 45</sup>



## FINDING:

### **Reduced stigma and increased empathy/acceptance toward youth with mental health challenges.** <sup>9, 16, 24, 27, 30, 43-44</sup>

## FINDING:

### **Use of MHFA skills after training.** <sup>2, 37</sup>



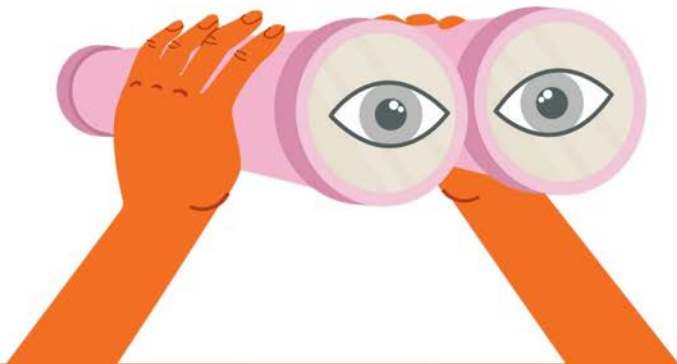


# Findings from teen MHFA Studies in the United States

Starting in Fall of 2018, the National Council for Mental Wellbeing engaged a group of researchers at the Johns Hopkins Bloomberg School of Public Health to conduct a series of research trials. These trials aimed to evaluate the impact of tMHFA in schools across the U.S. The findings from the U.S. tMHFA trials were similar to those found by Laura Hart and colleagues in Australia,<sup>21-22</sup> including:

## FINDING:

**Increased mental health literacy among teen participants after the training.**



## FINDING:

**Increased identification of helpful and harmful behaviors when assisting a peer in need.**

## FINDING:

**Decreased mental health stigma in teen participants after the training.**



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