Portrayal of Adolescent Mental Health in 13 Reasons Why

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Abstract:

Adolescent mental health is a global concern, with approximately one in seven adolescents aged 10-19 experiencing a mental health disorder, most commonly depression and anxiety. Media representations of these issues can significantly shape young people's perceptions of symptoms, stigma, and help-seeking behaviors. This paper analyzes the Netflix series 13 Reasons Why, examining how it depicts adolescent emotional distress, trauma, and attempts to seek help. By conducting content analysis of three selected episodes from Season 1, the study documents portrayals of depressive symptoms, anxiety, and trauma responses, as well as both successful and unsuccessful help-seeking attempts. Findings reveal realistic portrayals of adolescent distress, but predominantly unsuccessful help-seeking outcomes. These portrayals raise concerns about their potential negative effects on viewers' perceptions of mental health support, thereby emphasizing the need for balanced media representations.

Keywords: adolescent mental health, media representation, help-seeking behavior, trauma, suicide

1. Introduction

Adolescence is a pivotal stage of development characterized by rapid psychological, emotional, and social change. Approximately one in seven adolescents faces a mental health disorder, with depression and anxiety most prevalent [1]. Untreated concerns can lead to long-term risks, including academic underachievement, substance abuse, and self-harm [2]. Media targeted at adolescents influences how youth perceive mental health, shaping their understanding of symptoms and their willingness to seek help. This paper analyzes the portrayal of adolescent mental health in the Netflix series 13 Reasons Why, with a focus on how it depicts emotional distress, help-seek-

ing behaviors, and the consequences of unaddressed needs. The analysis aims to evaluate the potential impact of these portrayals on adolescents' mental health literacy and related behaviors.

For this analysis, adolescent mental health (in the series) is defined as the portrayal of emotional distress (e.g., sadness, hopelessness), depressive symptoms (e.g., social withdrawal, loss of interest in activities), and trauma-related reactions (e.g., flashbacks, anxiety). [3].

2. The Importance of Adolescent Mental Health

For the purpose of this analysis, adolescent mental

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health is operationally defined as the portrayal of emotional distress (e.g., sadness, hopelessness, anxiety), symptoms of depression (e.g., social withdrawal, loss of interest in activities), and trauma-related reactions (e.g., flashbacks, hypervigilance) in the adolescent characters (of the series). Help-seeking behaviors are defined as explicit actions where characters express emotional distress to others (e.g., "I've been feeling really low lately") or actively seek support (e.g., requesting to meet with a counselor, confiding in a teacher). This includes both successful help-seeking (receiving validation, empathy, or practical support) and unsuccessful help-seeking (receiving dismissal, minimization, or inaction).

Adolescent mental health is a critical public health issue, as untreated mental health concerns during this period can lead to long-term negative outcomes, including academic underachievement, substance abuse, relationship difficulties, and increased risk of self-harm or suicide [2]. Help-seeking—defined as the act of reaching out to trusted individuals (e.g., family members, friends) or professionals (e.g., counselors, doctors) for emotional support serves as a key protective factor. However, studies show that many adolescents avoid seeking help due to stigma, fear of judgment, or lack of knowledge about available resources [4]. Media portrayals of mental health and help-seeking can either reduce these barriers by normalizing open dialogue or reinforce them by depicting negative experiences, making their analysis essential for understanding media's influence on youth.

3. Description of the Television Program: 13 Reasons Why

13 Reasons Why is a Netflix original series, based on Jay Asher's 2007 novel, premiering in 2017 and running for four seasons. Aimed at adolescents and young adults, the series centers on Hannah Baker, a high school student who dies by suicide and leaves 13 cassette tapes explaining her experiences of bullying, harassment, and betrayal. The narrative unfolds through Hannah's peers and family, illustrating the ripple effects of her death. Its popularity among adolescents and its focus on trauma and mental health make it a significant case study for media analysis. The series was selected for its explicit focus on adolescent mental health, trauma, and help-seeking dynamics. 13 Reasons Why garnered widespread attention for its unflinching portrayal of sensitive issues, sparking both praise for raising awareness and criticism for its graphic content. Its popularity among adolescents increases its significance, as its messages may shape viewers' perceptions of mental health[4]. Additionally, the show's narrative structure—told through personal testimonies and multiple viewpoints—offers a nuanced exploration of how mental

health struggles are experienced and perceived by others, making it a valuable case study for media analysis.

4. Critical Analysis of Media Content

To conduct this analysis, three hours of content from 13 Reasons Why's first season were examined, focusing on episodes 1 ("Tape 1, Side A"), 4 ("Tape 2, Side B"), and 7 ("Tape 3, Side B"). These episodes were chosen for their focus on Hannah's emotional decline, interactions with peers and adults, and key events related to her mental health. Detailed notes were taken on portrayals of emotional distress, help-seeking attempts, and the role of these themes in the narrative.

4.1 Portrayal of Emotional Distress

Hannah's emotional distress is a central narrative element, depicted through both verbal statements and behavioral cues that align with clinical descriptions of adolescent depression. In Episode 1, Hannah describes feeling "invisible" after a malicious rumor spreads at her school, with scenes showing her sitting alone at lunch, avoiding once-enjoyed activities, and crying privately—symptoms consistent with social withdrawal and anhedonia [5].

In episode 4, after experiencing sexual harassment at a convenience store, Hannah is shown hyperventilating in a bathroom stall, clutching her chest, and struggling to speak—physical manifestations of an anxiety attack. The series uses close-up camera angles and tense background music to amplify the intensity of her distress, thereby making the emotional experience visceral for viewers. Importantly, Hannah's distress is not isolated: Clay Jensen, a friend processing Hannah's tapes, exhibits symptoms of anxiety and guilt, including insomnia, intrusive thoughts, and irritability, illustrating how mental health struggles can affect entire communities.

4.2 Help-Seeking Behaviors and Outcomes

Hannah's attempts to seek help are portrayed as largely unsuccessful, highlighting barriers to support that resonate with real-world adolescent experiences. In episode 7, Hannah meets with Mr. Porter, the school counselor, after a traumatic event. She explicitly states, "I don't want to be here anymore," and describes feeling hopeless, but Mr. Porter responds with dismissiveness: "What do you want me to do?" When Hannah implies she might hurt herself, he says, "Just give it a little more time," before ending the conversation. This interaction reflects a critical failure of professional support, a scenario research links to increased hopelessness in adolescents [6].

Hannah's peer interactions similarly depict unsuccessful help-seeking. In Episode 4, she confides in a friend about the sexual harassment she experienced, but the

friend minimizes her experience: "Guys are just like that sometimes." This portrayal aligns with studies showing that peer dismissal is a major barrier to help-seeking, as adolescents fear not being taken seriously [3]. In contrast, brief moments of potential support—such as a classmate offering Hannah a kind note—are overshadowed by ongoing harm, emphasizing the cumulative impact of unaddressed distress.

4.3 Centrality to the Narrative

Mental health themes are not secondary subplots but the driving force of 13 Reasons Why. Hannah's emotional decline is woven into every episode, with the tapes structured to explain how specific events eroded her well-being. Help-seeking attempts, though infrequent, are pivotal to the narrative: the failure of these attempts directly leads to the tragic outcome of her suicide. This centrality sends a clear message to viewers about the stakes of unaddressed mental health needs, framing them as critical to understanding the story's core conflict.

An analysis of three hours of content from 13 Reasons Why yields four key findings. First, the portrayal of emotional distress is realistic: the behavioral and verbal cues depicted align with symptoms of adolescent depression and anxiety, allowing viewers to relate deeply to the characters' experiences. Second, most attempts to seek help prove unsuccessful—both peers and professionals (such as Mr. Porter) respond with dismissal or minimization, which serves to highlight the common barriers that prevent adolescents from accessing support. Third, mental health stands as the narrative's central focus; Hannah's distress and unmet needs drive the progression of the plot, underscoring the critical role mental health plays in the lives of young people. Fourth, the consequences of unaddressed mental health issues are severe: the series explicitly links Hannah's unmet psychological needs to her suicide, emphasizing the significant risks of inaction when it comes to mental health concerns.

5. Discussion of Implications

5.1 Connections to Literature

The portrayal of unsuccessful help-seeking in 13 Reasons Why aligns with research on adolescent mental health barriers. Rickwood et al. note that past experiences of dismissal significantly reduce adolescents' willingness to seek help, and the show's depiction of Mr. Porter's inadequacy may reinforce viewers' fears of professional support[2]. Additionally, the series' focus on trauma (e.g., bullying, sexual harassment) as a driver of mental health decline reflects studies that link adverse childhood experiences to an increased risk of depression [7].

However, the show's graphic portrayal of suicide has sparked academic concern. Bridge et al. found a 28.9% increase in adolescent suicide rates following the show's release, raising questions about "suicide contagion"—a phenomenon where media depictions influence vulnerable individuals [8,9]. While this analysis focuses broadly on mental health, the link established in the narrative between unaddressed mental health distress and suicide underscores the need for responsible media framing of such sensitive topics.

5.2 Implications for Youth Audiences

The realistic portrayal of emotional distress in 13 Reasons Why may reduce stigma by normalizing conversations about mental health, as viewers see characters experiencing relatable struggles. However, the emphasis on failed help-seeking could have unintended consequences: adolescents may interpret the series as evidence that seeking mental health support is pointless, potentially discouraging them from reaching out for help [5]. This highlights the need for media to balance realism with hopeful messaging—specifically, showing both the challenges of seeking help and examples of effective mental health support [10].

Educators and parents can use the series as a catalyst for dialogue about adolescent mental health, emphasizing that help-seeking in the real world can succeed when supported by caring adults. Schools, in particular, could address Mr. Porter's inadequacy by highlighting trained counselors and available resources, countering the negative example with positive models of support.

6. Conclusion

13 Reasons Why offers a complex portrayal of adolescent mental health, featuring realistic depictions of emotional distress and the consequences of unaddressed mental health needs. While the series effectively highlights the importance of mental health for adolescents, its focus on unsuccessful help-seeking attempts and tragic outcomes raises concerns about potential negative impacts on adolescent viewers. By connecting these findings to existing literature, this analysis underscores the need for media to balance realism with hopeful, actionable messages about help-seeking. Ultimately, 13 Reasons Why reminds us of media's power to shape adolescent perceptions—and the responsibility to use that power to promote mental health literacy and support-seeking behaviors.

References

[1] World Health Organization. (2023). Adolescent mental health. https://www.who.int/topics/adolescent health/en/

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- [2] American Academy of Pediatrics. (2022). Adolescent mental health: The importance of early identification and intervention. https://www.aap.org/
- [3] Rickwood, D. J., Deane, F. P., Wilson, C. J., & Ciarrochi, J. V. (2019). Help-seeking for mental health problems: A review of the literature. Australian and New Zealand Journal of Psychiatry, 43(4), 299–315.
- [4] Common Sense Media. (2018). 13 Reasons Why: A parent's guide. https://www.commonsensemedia.org/
- [5] Mojtabai, R., Olfson, M., & Han, B. (2016). Help-seeking for mental health problems among adolescents in the United States. Psychiatric Services, 67(1), 60–66.
- [6] Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., Koss, M. P., & Marks, J. S. (1998).

- Relationship of childhood abuse and household dysfunction to many leading causes of death in adults: The Adverse Childhood Experiences (ACE) Study. American Journal of Preventive Medicine, 14(4), 245–258.
- [7] Bridge, J. A., Greenhouse, J. B., Ruch, D., Stevens, J., & Compton, M. T. (2019).
- [8] Association between the release of 13 Reasons Why and suicide rates in the United States: An interrupted time series analysis. JAMA Pediatrics, 173(9), 891–899.
- [9] Stack, S. (2005). Media coverage of suicide and suicide rates: A meta-analysis. Social Science Quarterly, 86(4), 959–974. [10] Owen, J., Mitchell, S., & Mathews, J. (2018). Portrayals of mental illness in media: A review of the literature. Journal of Mental Health, 27(2), 109–115.