



Mental Health Stigma and Suicide Risk Among Taiwanese Adolescents

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Introduction

1.1 Background

Mental health disorders are among the leading causes of disability and reduced quality of life worldwide (Tian et al., 2026), with many conditions first developed during adolescence, which is stated by the American Psychological Association as “the transitional phase of physical, cognitive, and psychosocial development between childhood and adulthood” (2018). Adolescence is a critical developmental period for brain development, specifically the frontal lobe (the largest brain region in the human brain that is in charge of impulse activities). Additionally, adolescence is also a stage for building social connections, which could be jeopardized when mental health distress exists.

1.2 Mental Health in Taiwan

Stigma is defined as a set of negative and unfair beliefs that a society or group of people have about something (Merriam-Webster, n.d.). In Taiwanese society, this stigma is especially visible in the way mental health is often placed in the gap between how people appear on the outside and what they actually experience internally.

In a culture that highly prioritizes academic excellence, evident in Taiwan’s rigorous education system with high-stakes assessments such as the Comprehensive Assessment Program (CAP) and the General Scholastic Ability Test (GSAT), students often face challenges in finding the balance between maintaining well-being and pursuing academic achievements (Chao et al., 2021). Additionally, Taiwanese adolescents often grow up in an environment where academic success is treated as a measure of personal worth. For instance, the idea of “other people’s kids”, in which parents invoke a higher-achieving peer as an implicit standard, often increases a child’s feeling of inadequacy while lowering their self-esteem (Lin & Wei, 2025). As a result, several longitudinal reports indicate that Taiwanese children score lower than international averages on measures of well-being, revealing growing concerns surrounding youth mental health (Child Welfare League Foundation of Taiwan (CWLF), 2024). Moreover, the Taiwan Youth Mental Health Survey conducted by CWLF, the findings demonstrate that over half of high school students feel distress and pressure about their academics and future (CWLF, 2025). This discrepancy underscores a broader cultural environment where emotional struggles are culturally implicit pressure to suppress to uphold values of filial piety and familial harmony (O’Donnell & Foran, 2024). Consequently, many students feel obligated to present a “perfect” image of themselves as high-achieving, capable, and emotionally unaffected, even if sometimes they are struggling internally.

This phenomenon has exacerbated over the past years, studies indicated. In recent years, several studies have examined the mental health and emotional distress among adolescents. A meta-analysis using the diathesis-stress model with a cross-sectional design

finds that the prevalence of suicide attempts among Taiwanese adolescents was 7.7 %, with rates of 6.1 % for boys and 9.4 % for girls (Chen et al., 2019). Another study conducted by Chen et al. discovers that in Taiwan, the lifetime prevalence of mental disorders among children and adolescents is about 30% to 32% (diagnosed with DSM-5) , which is led by anxiety disorders, attention-deficit hyperactivity disorder (ADHD), and sleep disturbances (2019).

The increasing risks in mental health and rates of suicidal rates in adolescents correspond to academic stress, family expectations, and social pressure, all of which are mediated by the enduring stigma surrounding mental illness in Taiwanese society.

1.3 Purpose of Review

The purpose of this study is to synthesize current empirical literature regarding the prevalence of emotional distress, mental health disorders, and suicidal ideation among Taiwanese youth. Additionally, this study aims to analyze the cultural mechanisms that exist in Taiwanese society and many other East Asian countries with a similar cultural background. Finally, to identify gaps in existing support structures and offer recommendations for culturally sensitive suicide prevention strategies and school-based mental health interventions in Taiwan.

Cultural Context of Mental Health in Taiwan

2.1 Saving Face and Social Expectations

The concept of saving face and surrounding social expectations hold significant roles in shaping attitudes toward mental health across many East Asian countries, including Taiwan. Broadly defined, saving face refers to the effort made to avoid losing respect or social reputation. According to sociologist Erving Goffman (1955), who proposed the dramaturgical analysis (i.e. states that people view everyday social interaction as a theatrical performance), "face" represents the positive public self-image individuals claim during everyday social interactions.

Concerns about social judgement and loss of face (mianzi, 面子) in Taiwan primarily came from Confucian ideals of emphasizing social harmony and relational hierarchy (Wang & Heppner, 2022). Younger generations are expected to listen to the elders and fulfill the family name in traditional familial structures.

For adolescents, these social expectations may further lead to pressure to present them appear emotionally resilient despite experiencing significant psychological distress. This discourages open conversations about psychological well-being and delays help-seeking behaviors, thereby increasing the risk that mental health difficulties remain untreated (O'Donnell & Foran, 2024; Wu et al., 2020).

2.2 Existing Mental Health Stigma

Pervasive social perceptions and cultural biases around mental illness pose significant barriers to psychological well-being of Taiwanese youth. While progressive policy shifts, such as the Ministry of Health and Welfare's free youth counseling subsidies and the introduction of mental health leave in schools indicate a growing societal awareness, persistent public stigma continues to influence everyday life (Garcia, 2026; Ministry of Health and Welfare, 2024).

Modern adolescents commonly experience stigma in the form of subtle invalidation. Emotional distress is often dismissed by older generations or peers as simply “overthinking”, a lack of emotional resilience, or even a dramatic ploy for attention (Hsu, 2023). As a result, negative stereotypes related to psychiatric care continue to be prevalent in many young people’s minds, where those who disclose a mental health diagnosis fear social exclusion or damage to their academic and career prospects (Corrigan & Watson, 2002; Wu et al., 2020).

Sources of Psychological Stress Among Taiwanese Adolescents

3.1 Academic Pressure

Relentless academic expectations contribute to one of the most significant pressures Taiwanese adolescents face in its intense academic environment. This constant source of pressure and stress often compels students to place more value on school-related achievements over their own psychological health (Chao et al., 2021). The pressure is from the heavily loaded academics that define the primary Taiwanese school system.

For a typical Taiwanese student, the progression through secondary education is governed by sequential, highly competitive gateways: transitioning from junior high to senior high school, followed by the pursuit of higher education. Nationwide standardized assessments primarily consists of the Comprehensive Assessment Program for Junior High School Students (abbreviated as CAP; 國中教育會考) and the General Scholastic Ability Test (GSAT; 學科能力測驗) for High School students aiming to attend college or universities.

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High-stakes testing (HST) refers to “tests whose results have a major impact on the interests of an individual or institution” (Chao et al.,). This type of academic progression is prevalent and one of the most common admission pathways across Taiwanese students. This accumulation of stress is complicated by the cultural and familial structure. Underlying educational competition between peers further escalates academic stress to earn a higher score and in general, transforming the classroom setting to a more competitive and consequently, a stressful environment.

Private Schools that require more rigorous and systematic academic outcomes further exacerbates the academic pressure and increases risks of burnout among students. Increased academic testing in schools correlates with a higher prevalence of negative mental health outcomes, including testing anxiety and physical stress.

Even though the desire to succeed is a positive motivator, excessive pressure to achieve academic milestones or to meet unrealistic standards of perfection is increasingly damaging to mental health (Faiman & Strouse, 2025).

3.2 Family Expectations

Alongside the cultural belief of saving face, unbalanced family expectations could contribute to psychological stress among Taiwanese adolescents. In Taiwanese culture, parental investment in their child's education is often paired with conditional reward, where adolescents often perceive their personal worth and emotional acceptance within the family as contingent upon high academic marks (Lin & Wei, 2025). Although parental support can be a powerful incentive for students to work harder on studying, Taiwanese youth experience higher rates of internalizing distress and lower overall self-esteem with guilt in order to live up to their familial expectations. Furthermore, when adolescents face elevated academic workloads, intense parental demands could significantly exacerbate anxiety and associated depressive symptoms. This statement was proven positive by a cross-sectional study finding led by Luo et al., which determined the trivial relationship that parental expectations could lead to diminishing self efficacy and also increasing feelings of academic burnout (Luo et al., 2025; Faiman & Strouse, 2025).

Mental Health Stigma and the Cycle of Silence

4.1 Public Stigma

Public stigma surrounding psychiatric conditions and mental health issues creates a hostile environment for the currently distressed youth in Taiwan. Even though public awareness of mental health issues has improved in recent years, general attitudes continue to view mental illnesses and associate them with "personal weaknesses" or "dangerousness" (Loughman & Haslam, 2018). Perceived public stigma reinforces a culture of keeping mental health problems in secrecy. This further discourages adolescents from openly discussing their mental health and implicitly prevents early identification of signals of psychological distress for attention and related treatments (CWLF, 2025).

4.2 Stigma Produced by Self

Low self-efficacy can make it difficult for Taiwanese adolescents to recognize and address their mental health struggles. When young people internalize the negative attitudes toward mental health problems that they encounter from their families and community, public stigma can develop into self-stigma, causing them to view themselves negatively because of their mental health challenges (Corrigan & Watson, 2002).

4.3 Help-Seeking Behaviors

Adolescents in Taiwan experiencing mental health difficulties might face stigma and lack of access to services that deter them from seeking help. Though the Ministry of Health and Welfare has expanded subsidies that offer free counseling sessions for people between the ages of 15 and 45, several surveys indicate that many adolescents still do not make use of traditional mental health services (CWLF, 2025).

Nearly 40% of distressed Taiwanese teenagers reportedly choose not to talk about their struggles with parents, teachers, or counselors (CWLF, 2025). Instead, some adolescents may turn to activities such as gaming as a way to cope with stress or temporarily avoid difficult

emotions. While gaming can be a form of entertainment and relaxation, relying on it heavily as a coping mechanism may become problematic when it replaces other ways of dealing with stress. Research has also found a relationship between depression and Internet Gaming Disorder (IGD) among adolescents, suggesting that these issues can influence each other through factors such as social isolation and difficulties with emotional regulation.

Digital platforms have also become increasingly common as a possible source of support. Adolescents who are more comfortable communicating online may prefer conversational AI because it is immediately available and may feel less judgmental than speaking the matter to another real, living person. As such, a recent national survey found that among youth who seek help, 46.5% would choose to seek help via generative AI, compared to other methods such as meeting in school counseling offices (approximately 41%) and seeking help from licensed mental health professionals (approximately 31%) (CWLF, 2025). Although generative AI such as ChatGPT and Gemini, as well as other more emotionally appealing AI platforms are easily accessible and preferable by adolescents to express their emotions, their growing use of AI may also indicate a lack of trust in or access to traditional mental health services. The use of AI in treatment for mental health illnesses could be trivial, especially with the cases which generative AI led to more symptoms of depression and even suicidal thoughts when these emotionally heavy questions are prompted to AI that led to irreversible actions. When adolescents continue to avoid professional, human support, opportunities for early intervention decline and may be overlooked.

Viewing the Issue Through a Psychopathological Lens

5.1 Depression

Major depressive disorder in Taiwanese adolescents is the main psychopathology by which academic pressure and cultural isolation lead to serious clinical problems. Recent epidemiological evidence shows that the rate of depressive disorders among adolescents have been increasing steadily in East Asia, within the symptoms usually include a persistent feeling of sadness, a lack of interest in schoolwork, mental fatigue, and constant feelings of worthlessness (Chen et al., 2019; Tian et al., 2026). In Taiwanese schools, depressive symptoms are frequently disguised as physical responses made by the body, such as chronic headaches, insomnia, or gastrointestinal problems, since such physical symptoms are seen as more culturally acceptable than expressing emotional problems (O'Donnel & Foran, 2024). When a tendency toward high achievement and parental conditional approval come together with a depressive disorder, adolescents tend to suffer from a decline in their self-esteem. This could change temporary academic situations into a long term issue of emotional distress and academic burnout (Faiman & Strouse, 2025). Studies have shown that this trajectory greatly increases the risk of self-harm and suicidal behaviour (CWLF, 2025).

5.2 Anxiety Disorders

Main symptoms of the anxiety disorder include excessive anxiety, worry, fear, and avoidance (China Medical University Hospital, 2026). This list of indications could be seen in

Taiwanese youth, where academic stress could implicitly prompt symptoms of anxiety. Constant exposure to stress or academic burnout could also lead to generalized anxiety disorder (GAD), which is a mental illness characterized by long-term, excessive anxiety and worry (China Medical University Hospital, 2026). Diagnostic surveys show that other than generalized anxiety disorder, social anxiety disorder and high-stakes test anxiety make up the most common psychiatric conditions affecting Taiwanese students (Chen et al., 2019).

People are saying that the current younger population is more “sick” than ever. Studies have evaluated these emerging mental health problems that did not seem to be as prevalent compared to the last generation, and found that there are rising conditions in mental health issues, particularly depression and anxiety (Bersi, 2025). The reason behind this mainly attributes to media exposure (i.e. use of social media and unhealthy social media comparison) and academic stress (i.e. high pressure academic environments, particularly with high-stakes test taking and accumulation of stress).

Alongside generational differences, anxiety pathologies are exacerbated when severe behavioral or emotional dysregulation is seen purely as a disciplinary issue rather than an onward psychiatric condition. For instance, longitudinal and observational studies found that unaddressed neurodevelopmental or mood dysregulation issues often lead to disruptions at school, shifting the original purpose of schools to provide educational values to children (Hsu, 2024). Being physically bullied or experiencing social difficulties also increases risk of developing anxiety disorders (Tran, 2025). Excessive episodes with anxiety disorders could further lead to future risks for more serious physical and mental illnesses for adolescents.

5.3 Suicidality

Suicidality and existing suicidal thoughts among Taiwanese adolescents reflect the unaddressed psychopathology and underlying severe distress in everyday people. It also exposes the potential systematic barriers to reach emotional support and professional health. National surveys and epidemiological reports indicate a concerning trend in adolescent suicidal ideation.

According to a recent survey conducted by the Child Welfare League Foundation and reported by FocusTaiwan, around 22% of Taiwanese teens report suicidal thoughts. As to the data provided, girls reported stronger feelings compared to boys. These findings could be explained with psychological models of suicide, particularly the Interpersonal Theory of Suicide. The Interpersonal Theory of Suicide allows individuals to look at the etiology of suicide. It states that adolescent suicidality typically develops with the two interpersonal constructs – levels of thwarted belongingness (social isolation) and perceived burdensomeness toward one's family (Joiner, 2005; Wang & Heppner, 2002; Orden et al., 2010). When an individual experiences high occurs of these two constructs, they would develop a desire for suicide and their lives due to stress that they are incapable of bearing and enduring (Orden et al., 2010). Especially with the youth population, since teens and adolescents are still emotionally and mentally immature, so their capacity to enduring interpersonal constructs may be lessened.

In Taiwan's cultural context, youth who internalize self-stigma often come to believe that their mental health struggles impose an unwanted emotional or financial burden on their parents (Wu et al., 2020). When these accumulation of distress occur in a context where over 40% of distressed teens feel unable to reach out to adults or professionals, suicidal ideation could potentially progress to cases of irreversible incident, damaging mental health among Taiwanese adolescents. Therefore, suicidality, a major issue exhibited at Taiwan and many other East Asian countries as well, is a pressing public health concern that requires immediate action.

Current Interventions and Future Directions

6.1 Improving Mental Health Literacy

Improving mental health literacy in educational settings as well as community environments is an important measure to detect psychological distress in the early stages of progression in the Taiwanese youth. This will prevent further progression of mental illness. The traditional approaches applied in Taiwan's education systems focus on academics. Therefore, educators and learners are not in position to spot the early signs of mental disorders (Lin et al., 2021). To address these systemic challenges, current school measures have been trying to integrate social-emotional learning (SEL) in the standard curriculum. This aims to enable adolescents to differentiate between normal stress and the clinical signs of depression or anxiety (CWLF, 2024). It is equally essential to conduct campaigns among parents since raising their awareness will be helpful in dealing with youth emotional distress as a health issue. More understanding and support would create environments where people can communicate openly and encourage open dialogue to seek help when needed (Lin et al., 2021).

6.2 Expanding Accessible Mental Health Care

Structural access to professional psychological assistance becomes extremely important in terms of bridging the identified gap between identifying psychological issues and providing clinical interventions. Due to the increase in the number of psychological problems among youths in Taiwan, the government has decided to expand the program of its mental health assistance by offering free counseling sessions that will be funded to prevent any possible obstacles in receiving help (Ministry of Health and Welfare, 2024). Moreover, in case of a mental health crisis, one can call hotlines that are available 24/7 in order to receive support. There are hotlines such as "1925", which in Chinese sounds like "Still Love Me", "1995", which in Chinese sounds as "Please Save Me", and "1980" which in Chinese sounds as "Still Helping You". On an institutional level, many secondary schools in Taiwan started introducing the policy of taking mental health leave policies and introduced the presence of full-time campus guidance (Garcia, 2026). Also, many schools invite various speakers in order to promote mental health awareness and ways of building resilience. Professional diagnosis and treatment as well as talking to medical professionals about anxiety disorders is crucial in treating mental illnesses effectively. By allowing direct and accessible portals to psychological care ensures that vulnerable students receive intervention before acute emotional distress later turns into psychiatric crises (CLWF, 2025).

6.3 Reducing Cultural Stigma

As suggested above, there could be an expectation on the part of people to seem emotionally resilient even when faced with a great deal of psychological turmoil. According to Surzykiewicz et al., one approach to this problem would involve making adolescents' perception of social support within their immediate academic and domestic environments. If youth can feel well-supported and not judged by their peers, teachers, and family, the psychological threat involved with losing face is avoided. Consequently, the setting becomes one in which asking for help seems adaptive. Moreover, public education efforts, the promotion of positive media images regarding the use of mental health services, and community de-stigmatization programs are critical in shifting cultural norms from emotional repression toward open communication (Hsu, 2023; Wu et al., 2020).

Limitations of the Current Literature

Despite the growing number of academic studies focused on youth well-being in East Asia, empirical literature on the topic of mental well-being of Taiwanese adolescents is associated with several important methodological problems. Firstly, a rather big part of the recent empirical literature on the topic is based on the use of cross-sectional surveys, which allow establishing a correlation between academic stress and psychological distress, but not establishing its causation. Moreover, the presence of cultural stigma and social desirability bias leads to the underestimation of the number of cases of the manifestation of the studied phenomenon. Current empirical studies show a significant geographical bias toward Taipei, whereas other regions and poorer population segments are understudied. Finally, the terms self-stigma and family stigma used in different works differ significantly.

Conclusion

Increasing numbers of mental health crises and suicide cases among Taiwanese youth cannot be attributed solely on academic stress or the exam-focused educational system. Instead, the continuous academic and social stress caused by the culture-driven mechanism of family honor, filial piety, and "saving face" causes public, family, and personal stigmatization of the Taiwanese people. This combined form of stigma creates a continuing cycle of silence that forces the stressed teens to hide their pain using the means of avoidance, such as internet gaming or generative artificial intelligence.

In order to mitigate this critical public health problem, an institutional and societal shift from punishment and discipline to mental health care must be implemented. Although the current policy is a constructive advancement, the barriers created by the system must also be reduced. The experience of Taiwan could be viewed as a great example for other successful societies around the globe as to how to protect teenagers from harm by lessening the cultural stigma that prevents them from seeking help.

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