

Youth Mental Health Literacy: Survey in the Third Year of the War

Обізнаність у сфері ментального здоров'я молоді: опитування на третьому році війни

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ABSTRACT

The purpose of this article is to make an empirical study of youth mental health awareness.

Methods of the research. Respondents provided their answers by filling out an electronic form with 5 open-ended questions. Quantitative and qualitative analysis of the responses was carried out, and the LIWC text analysis software was used.

The results of the research. In general, when describing the concept of "mental health", the respondents more often included words demonstrating a

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positive emotional attitude in their reactions, but among negative emotional reactions, they more often spoke about anxiety. Young people often talk about interpersonal interaction, conscious living. Also, most responses use words that describe space and focus on the present moment. Among young people, the most common ways to take care of their mental health are communication, rest, seeing a psychologist or specialist, walking, sleeping, playing sports, etc. Among the sources of information about ways to support mental health or get help in this area, the most common for the surveyed youth are: a psychologist, the Internet or artificial intelligence, and a friend.

Conclusions. *The empirical analysis of mental health awareness made it possible to argue about the need to expand psychoeducational and preventive measures for young people. After all, the majority of respondents stated a desire to learn more about mental health and ways to support it.*

Key words: *youth, mental health, associations, LIWC.*

Introduction

The relevance of studying young people's awareness in the field of mental health in the third year of the war is based on scientific evidence that literacy in this field determines early detection and help-seeking in cases of mental health problems. The term "mental health literacy" is conceptualized and defined in global scientific literature as *mental health literacy* (Jorm, et al., 1997a; Jorm, 2019), which is literally translated as "literacy in the field of mental health." Therefore, in our study, the terms "awareness in the field of mental health" and "mental health literacy" are used synonymously.

Understanding of "mental health literacy" has evolved from a tool for improving the recognition of mental disorders ("knowledge and beliefs about mental disorders that aid their recognition, management, or prevention") (Jorm, 1997a : 182) to a social determinant of health and an education-oriented intervention with demonstrated positive effects on health outcomes at both individual and population levels, as well as a means of addressing health inequalities (Nutbeam, 2008; Jorm, 2019). Accordingly, four distinct but interrelated components of mental health literacy have been identified:

(1) understanding how to achieve and maintain good mental health;
(2) understanding mental disorders and their treatment;
(3) reducing stigma associated with mental disorders;
(4) increasing help-seeking efficacy (knowledge of when, where, and how to obtain quality mental health care and developing competencies required for self-help) (Kutcher, 2016; Jorm, 2012).

Thus, mental health literacy provides a necessary foundation for mental health promotion, prevention, and care, integrating these important components into a holistic construct aimed at improving both mental health and mental-health-care outcomes, rather than merely promoting well-being.

In order to effectively address young people's mental health needs, mental health literacy must become a core focus of interventions in this field. Recent studies demonstrate that improving mental health knowledge and reducing stigma are two key components in promoting help-seeking and early detection of mental disorders (Gulliver, Griffiths, & Christensen, 2010). Since most young people attend school, schools have been recognized as an important setting for addressing students' mental health, with particular attention recently given to mental health literacy both in Europe and Canada (Wei, 2011; Skre, 2013).

In Europe, school-based mental health interventions have been implemented and examined. Researchers identified and analyzed over (...) school-based mental health interventions conducted in the United Kingdom, the Netherlands, Germany, Norway, and Belgium (Weare, & Nind, 2011). These interventions demonstrated small or moderate effects in improving student well-being, social and emotional learning, or safe and positive school environments; however, very few addressed all components of students' mental health and well-being. It is essential for schools not only to promote positive mental health but also to enable students to differentiate between normal psychological distress and mental health problems/disorders, reduce stigma,

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and encourage help-seeking and self-help strategies when mental-health support is needed. Another challenge was that interventions were often delivered by external service providers, preventing the development of sustainable school-embedded mental health literacy. Moreover, when external providers were used, interventions did not improve teachers' mental health literacy. Therefore, scholars recommend integrating mental health knowledge and literacy development into an existing whole-school approach, which includes teacher capacity-building and cooperation with parents and the wider community.

Similar approaches have recently been piloted in Europe with positive results. For example, in Portugal, a mental health literacy project was implemented in the Lisbon region. The results showed substantial and significant improvements in mental health literacy among teachers, student-service providers and nurses. Referrals from schools to mental health service providers increased, and participants reported high satisfaction with the intervention (Kutcher, 2016).

In Australia, a mental health literacy and action program called the Youth Education and Support (YES) program was implemented in secondary schools using a cluster-controlled trial. The program had previously proven effective in U.S. schools. It was developed by Professor Joanna Riebschleger over a 12-year period based on mental health literature, recommendations from mental health professionals, and youth perspectives. Although the YES program was initially designed to meet the needs of children whose parents have mental illness (COPMI), it is applicable to the general population as well (Riebschleger et al., 2019). The program was selected for adaptation to the Australian context due to its comprehensive development process involving key stakeholders such as youth, parents, psychologists, and social workers (Marinucci et al., 2021). A survey of Australian youth aged 12–25 assessing their beliefs regarding strategies for preventing depression, psychosis, social phobia, and post-traumatic stress disorder (PTSD) (Yap et al., 2012) showed that young

people consider physical activity, regular contact with family and friends, and relaxing activities as supportive for mental health. However, a significant discrepancy was noted between young people's and professionals' views regarding the strategy of avoiding stressful situations. Young people support its use, whereas professionals argue that avoidance is linked to the persistence of anxiety disorders.

Providing mental health education to youth through school programs generally equips them with knowledge on mental health prevention and disorders, reduces potential stigma, and thereby encourages help-seeking. Consequently, this may reduce the current prevalence of mental health disorders among young people, improve their quality of life, and lower the demand for medical and psychological services providing specialized care (Coughlan et al., 2024).

In Ukraine, a pilot project has been launched to integrate "Lessons of Happiness," based on the American social-emotional learning program *Well-Being*, which has been translated and adapted by Ukrainian psychology and education experts. The project includes teacher training, ensuring sustainable improvements in mental health literacy. The pilot is implemented within the national mental health program "How are you?" The educational manual *Lessons of Happiness, Grade 1* has been approved for use in the educational process (decision of the expert commission on pedagogy and primary education methodology, May 6, 2025, protocol No. 10). Additionally, the professional development program *Lessons of Happiness* for teachers in preschool and general secondary education institutions has been approved (Order of the Ministry of Education and Science No. 699 dated 07.05.2025).

With the advancement of modern technologies, digital tools are becoming increasingly important for enhancing youth mental health literacy by providing scalable and engaging platforms for knowledge dissemination, stigma reduction, and help-seeking. An analysis of 29 studies involving over 11,000 partici-

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pants showed that online interventions significantly improved mental health knowledge, reduced stigma, and increased help-seeking intentions, although maintaining these effects over time remains a challenge (Chen et al., 2024). Innovative approaches such as the IMpeTU intervention in Indonesia, co-designed with adolescents, function as a digital application for addressing depression and anxiety, incorporating interactive games and exercises to promote engagement and self-management strategies (Brooks et al., 2021).

In Canada, as one of the steps toward addressing the mental health crisis, a team of researchers developed a digital tool to improve mental health literacy among youth aged 11–18. Extensive two-way dialogue with key national partner organizations (Children’s Healthcare Canada, The Sandbox Project, and the Young Canadians Roundtable on Health) enabled researchers to incorporate youth perspectives at every stage of the research process. This allowed for the development of *Youth MindTrack*, an interactive digital tool designed to enhance youth mental health literacy. The application is currently undergoing pilot testing to assess usability, acceptability, and perceived effectiveness before broader implementation (Moss et al., 2025).

In our study, we focused on examining young people’s general understanding of the concept of “mental health” and ways to take care of it among youth in Volyn region. Thus, **the aim of the article** is the empirical investigation of youth mental health awareness.

Methods of the research

To achieve the research objective, 100 young people were surveyed. The survey took place on August 12, 2025, on International Youth Day at the “Future of Volyn Youth” Forum. Among the respondents, 79 ones were identified as female and 21 as male. The average age was 18.64 years.

Respondents provided answers through an electronic form including five open-ended questions:

1. *Mental health is...*
2. *The simplest way to take care of my mental health is...*
3. *Would you like to learn more about how to take care of your mental health?*
4. *If I need to learn how to support my mental health or seek help in this field, I will turn to...*
5. *How can mental-health awareness and psychological support for youth in Volyn be improved? Your suggestions.*

Questions 1, 2, and 5 were open-ended and thus required qualitative analysis. Question 3 offered three possible answers: yes, no, or maybe. Question 4 allowed multiple choices, offering the following options: psychologist, the Internet or artificial intelligence, friend, youth center, family, or *other* (allowing respondents to suggest their own option).

Results and their discussion

The analysis of survey responses was carried out separately for each question. Open-ended responses to "Mental health is..." were analyzed using the LIWC software. Overall, 849 words were obtained. Table 1 presents the analysis of the emotional component.

Table 1

Analysis of emotional reactions to the concept of "mental health"

Affective processes	Positive emotion	Negative emotion	Anxiety	Anger	Sadness
1.88	0.94	0.59	0.24	0.12	0.12

In general, when describing the concept of "mental health", the respondents did not often include words demonstrating emotions in their reactions, but if this happened, it indicated a positive emotional attitude, but among negative emotional reactions, anxiety was more often mentioned.

In general, when describing the concept of mental health, young people often talk about interpersonal interaction, conscious living. Also, most of the answers use words describing space and focus on the present moment.

Table 2

**Generalized results of the content analysis of reactions to
the concept of “mental health” by category**

Social processes	6.48
Cognitive processes	6.48
Biological processes	0.82
Present focus	1.88
Space	4.48
Work	2.59

In response to the second question “The easiest way to take care of your mental health is...” 239 words were received.

Table 3

**The most common ways to take care
of your mental health among young people**

Answer	Number
Communicate	22
Rest	24
Psychologist	11
Walk	18
Sleep	16
Sports	13

Among young people, the most common ways to take care of their mental health are communication, rest, seeing a psychologist or specialist, walking, sleeping, playing sports, etc.

71% of young people would like to learn more about mental health. 25% of respondents have doubts about this.

Among the sources of information about ways to support mental health or get help in this area, the most common for the surveyed youth are: a psychologist, the Internet or artificial intelligence, and a friend (Table 4).

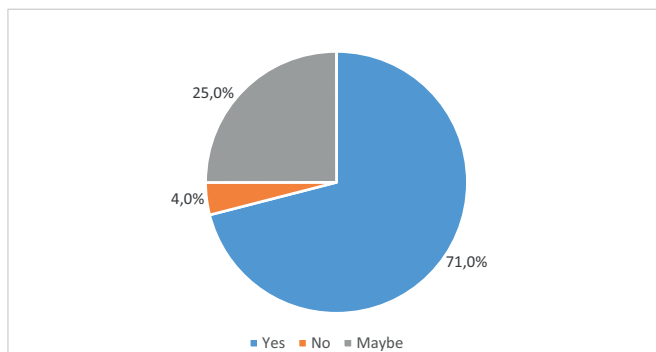


Fig. 1. Answers to the question “Would you like to learn more about how to take care of your mental health?”

Table 4

Answers to the question “If I need to learn about ways to support mental health or get help in this area, I will turn to..”

Answer	Number
Psychologist	71
Internet or artificial intelligence	60
Friend	48
Family	37
Youth center	14

Answering the fifth question, which concerns improving information and psychological assistance to young people in Volyn, respondents most often speak about the need to hold events, trainings, meetings, as well as a broad polarization campaign on social networks.

Conclusions

The empirical analysis of awareness in the field of mental health made it possible to state the need to expand psychoeducational and preventive measures for young people. After all, most respondents stated a desire to learn more about mental health and ways to support it.

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Коструба Наталія. Обізнаність у сфері ментального здоров'я молоді: опитування на третьому році війни.

Метою нашої статті є емпіричне дослідження обізнаності молоді про психічне здоров'я.

Методи дослідження. Респонденти надали свої відповіді, заповнивши електронну форму з 5 відкритими питаннями. Проведено кількісний та якісний аналіз відповідей, використано програмне забезпечення для аналізу тексту LIWC.

Результати дослідження. Загалом, описуючи поняття ментального здоров'я, респонденти частіше включали в свої реакції слова, що демонструють позитивне емоційне ставлення, але серед негативних емоційних реакцій частіше говорили про тривогу. Молоді люди часто говорять про міжособистісну взаємодію, свідоме життя. Також у більшості відповідей використовуються слова, які описують простір і фокусуються на теперішньому моменті. Серед молоді найпоширенішими способами піклування про своє психічне здоров'я є спілкування, відпочинок, побачення з психологом або фахівцем, ходьба, сон, заняття спортом, а серед джерел інформації про способи підтримки психічного здоров'я або отримання допомоги в цій сфері найбільш поширеними для опитаної молоді є: психолог, інтернет або штучний інтелект, друг.

Висновки. Емпіричний аналіз обізнаності про психічне здоров'я дозволив аргументувати необхідність розширення психо-освітніх та профілактичних заходів для молоді. Адже більшість респондентів заявили про бажання дізнатися більше про психічне здоров'я та способи його підтримки.

Ключові слова: молодь, психічне здоров'я, асоціації, LIWC.

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