

Welcome Positive Attitude



for Youth

Research on mental health in youth and work settings



Co-funded by
the European Union



INDEX

1. INTRODUCTION.	3
2. METHODOLOGY. QUANTITATIVE AND QUALITATIVE METHOD.	6
Quantitative Approach	6
Qualitative Approach	7
Ethical Considerations	8
Methodological Limitations	9
3. TARGET GROUP.	9
Young people aged 15-25	10
Youth workers	11
4. THEORETICAL FRAMEWORK.	12
5. SITUATION OF YOUNG EUROPEANS AND WORKERS	30
SPAIN	30
CONTEXTUALIZATION OF THE SITUATION OF YOUNG PEOPLE	30
Educational level	30
Employment situation	30
MENTAL HEALTH OF YOUNG PEOPLE	31
Mental health status of young people	31
Mental Health Effects of the Pandemic	31
Government actions	32
ADDICTIONS IN YOUNG PEOPLE	32
Internet and social networks in young people	32
Additions in young people	32
ITALY	34
CONTEXTUALISATION OF THE SITUATION OF YOUNG PEOPLE	34
Level of education	34
Work situation	35
MENTAL HEALTH OF YOUNG PEOPLE	35
Mental health status of young people	35
Mental health effects of the pandemic	36
Government actions	38
ADDICTIONS IN YOUNG PEOPLE	41
Internet and social networking among young people	41
Alcohol, drugs and gambling addiction	42
ROMANIA	47
CONTEXTUALISATION OF THE SITUATION OF YOUNG PEOPLE	47
Level of education	47
MENTAL HEALTH OF YOUNG PEOPLE	48
Mental health status of young people	48
Mental health effects of the pandemic	49
Government actions	50
ADDICTIONS IN YOUNG PEOPLE	52
Internet and social networks among young people	52
TURKEY	56
CONTEXTUALISATION OF THE SITUATION OF YOUNG PEOPLE	56
MENTAL HEALTH OF YOUNG PEOPLE	59
ADDICTIONS IN YOUNG PEOPLE	64





Alcohol, drugs and gambling addiction	66
Alcohol addiction	66
Drug addiction	67
Gambling addiction	67
6. QUIZ ANALYSIS	68
SPAIN	68
Young	68
Youth Workers	70
ITALY	72
Young	72
Youth Workers	74
ROMANIA	76
Young	76
Youth Workers	78
TURKEY	79
Young	79
Youth Workers	82
7. ANALYSIS OF THE FOCUS GROUPS	84
Italy	84
Romania	86
Spain	88
Turkey	89
REFERENCES	91

1. Introduction.





The mental health of young Europeans has gained increasing relevance on the educational and health agendas of EU member states, especially in the wake of the transformations brought about by the digital age. The globalisation of digital technologies and the widespread use of social networks have introduced a new set of variables that have a direct impact on young people's psychological well-being, creating both opportunities and challenges. These challenges are reflected in recent data from the World Health Organization (WHO, 2021), which indicate that one in five young people face some kind of mental health problem. This data highlights the need for interventions that not only address symptoms and mental disorders, but also focus on strengthening emotional well-being through the development of personal competencies such as **positive thinking**, **resilience** and **emotional intelligence**.

The present project arises in response to this reality, proposing a holistic approach based on **positive psychology** as a basis for intervention. **Positive mindset** is a fundamental concept in this approach and refers to the cognitive and emotional capacity of individuals to face everyday challenges with optimism and a proactive attitude, always seeking opportunities for personal growth even in adverse situations. This approach does not deny the presence of problems or difficulties, but promotes a mindset that allows young people to interpret challenges as opportunities to improve, learn and develop, both personally and socially. Thus, the project seeks to empower young people to deal effectively with the social and emotional challenges they face in their daily lives.

Positive psychology, which underpins the idea of positive thinking, has established itself as a discipline that not only seeks to prevent mental illness, but also promotes the well-being of individuals and communities through the development of psychological strengths. This approach has particular relevance for young people, who are going through a crucial phase of their emotional, social and psychological development. At this stage of life, adolescence and early youth, individuals experience major changes in their identity, interpersonal relationships and sense of purpose, while facing significant pressures related to education, employment and social integration. The transitions associated with these developmental stages can be challenging and, if not managed appropriately, can contribute to the emergence of mental health problems such as anxiety, depression and low self-esteem.

The concept of **resilience**, which is intrinsically linked to positive thinking, also plays a key role in this context. Resilience refers to the ability of individuals to bounce back and adapt in the face of adverse situations, overcoming obstacles and finding opportunities for learning and personal growth in the midst of difficulties. In an increasingly digitalised world, where young people are exposed to constant social comparison and external pressures through social media, resilience becomes a critical competency to protect their mental well-being. Social media, while offering benefits such as access to information and maintaining social relationships, can also





increase pressure to meet unrealistic standards of success and appearance, which can erode self-esteem and contribute to mental health problems (Twenge & Campbell, 2018).

This project proposes to comprehensively address the relationship between social media use and the mental health of young Europeans, focusing on promoting a resilient and positive attitude that enables them to handle the challenges of life in the digital environment. Through an approach based on **positive psychology**, it is expected to provide young people with the necessary tools to manage more effectively the stress derived from hyperconnectivity, overexposure to information and constant comparison with their peers on digital platforms. In this sense, the project is conceived as an intervention that not only seeks to reduce the negative effects of the use of social networks, but also to take advantage of their potential benefits, promoting their conscious and constructive use.

In addition to working with young people, the project also focuses on **youth workers**, who play a key role as agents of change in promoting mental health and wellbeing in their communities. Youth workers not only facilitate young people's access to educational and psychosocial resources, but also act as role models in adopting positive and resilient attitudes. This is why an important part of the project is dedicated to training these professionals in the use of positive psychology-based strategies, equipping them with practical tools that they can apply in their daily work. By equipping youth workers with the necessary competences to foster positive thinking in young people, the aim is to create a more favourable environment for the integral development of the participants.

From a methodological perspective, the project adopts an **intercultural** approach, recognising that strategies to promote mental well-being must be adapted to the specific cultural contexts of young people in each country. The project includes the participation of young people and youth workers from Spain, Italy, Romania and Turkey, allowing for a comparison of national contexts and the identification of best practices in promoting a positive attitude. This cross-cultural approach is crucial, as the way young people perceive and respond to challenges associated with mental health and the use of social networks can vary significantly according to cultural, economic and social influences in each participating country (Berry, 1997; Triandis, 2001). Thus, the project will not only contribute to the development of effective strategies in each of the participating countries, but will also offer the possibility of generating transferable knowledge that can be applied in other contexts.

At the practical level, the project envisages the development of a series of **educational resources**, including a handbook of good practices for youth workers and a digital toolkit for young people. These resources will be designed to foster **emotional intelligence**, **empathy** and other key competences that contribute to emotional well-being and resilience. The good practice manual will provide youth





workers with evidence-based strategies to promote positive mindsets in their work environments, while the digital toolkit will provide young people with interactive resources to help them manage the negative effects of social media and use these platforms in a more mindful and constructive way.

Emotional intelligence, which refers to the ability of individuals to recognise, understand and manage their own emotions as well as those of others, is a key competence to be promoted through these resources. Research has shown that young people with high emotional intelligence are better able to manage stress, make balanced decisions and maintain healthy interpersonal relationships, which in turn contributes to their overall well-being (Goleman, 1995; Mayer et al., 2008). The project will seek to foster these skills not only through direct interventions with young people, but also through the training of youth workers, who play a crucial role in promoting these competencies in their communities.

This project is a comprehensive intervention that addresses the relationship between the use of social networks and the mental health of young people from a positive and proactive perspective. Through the promotion of competencies such as resilience, emotional intelligence and positive mindset, it is hoped not only to reduce the negative effects of the use of digital platforms, but also to empower young people to face the challenges of modern life with confidence and optimism. At the same time, it recognises the importance of adapting strategies to the different cultural contexts of the participating countries, ensuring that interventions are effective and relevant to the specific realities of each country.

2. Methodology. Quantitative and qualitative method.

The methodological approach of the project is based on a mixed design combining **quantitative** and **qualitative** methods, allowing for a comprehensive understanding of the impact of **positive mindsets** on the mental health of young Europeans and the influence of social network use on their psychological well-being. This mixed approach is essential to capture both the magnitude of the observed phenomena and the subjective experiences and perceptions that underlie these phenomena. This provides a more robust and deeper insight that facilitates the development of tailored and culturally adapted interventions in the national contexts of the participating countries.

Quantitative Approach

The quantitative component of the study will focus on data collection through **structured surveys** that will be administered to a representative sample of young





people aged 15-25^{for youth} in the participating countries: Spain, Italy, Romania and Turkey. These surveys will be designed to measure a number of variables related to mental health, **positive mindset**, **use of social networks**, and transversal competences such as **emotional intelligence**, **resilience**, **self-esteem** and **social skills**.

To ensure the validity and reliability of the results, the surveys will include **standardised** and widely validated international **scales**, such as the **Rosenberg Self-Esteem Scale** (Rosenberg, 1965) and the **Goldberg Anxiety and Depression Scale** (Goldberg et al., 1988). These scales will be culturally adapted for each participating country, ensuring that the items adequately reflect the social and cultural particularities of young people in each context. This process of adaptation will be essential in order to obtain results that are comparable across countries, but also respect the specific differences of each region.

The sample will be selected through **stratified random sampling**, ensuring that participants reflect the socio-demographic diversity of each country in terms of age, gender, socio-economic status and geographical region. This sampling strategy will allow the results to be generalised to the youth population in each country, which will strengthen the external validity of the study. The sample will include young people from urban and rural areas, in order to capture possible differences in patterns of social network use and perceptions of positive mindsets.

Quantitative data will be analysed using advanced statistical techniques. **Multiple regression analyses** will be conducted to explore the relationships between social network use, positive mindset and mental health indicators such as levels of anxiety and depression, self-esteem and resilience. Additionally, **correlational analyses** will be employed to identify how specific variables, such as frequency of social network use or exposure to negative content, affect young people's mental health. To ensure the internal consistency of the scales used, **Cronbach's alpha coefficient** will be calculated, with a minimum expected value of 0.80 to guarantee the reliability of the measures (Nunnally & Bernstein, 1994).

This quantitative approach will make it possible not only to identify general trends among young Europeans, but also to compare results across participating countries. In this way, it will be possible to analyse whether there are common patterns or significant differences in the impact of social network use and positive mindset, and how these variables relate to mental health in different socio-cultural contexts.

Qualitative Approach

The qualitative component of the study will focus on conducting **focus groups** and **in-depth interviews** with young people and youth workers in the four participating countries. This part of the qualitative research will explore young people's perceptions, attitudes and experiences in relation to **positive thinking**, **social**





networking and **emotional competences**. Qualitative methods will be used to capture nuances and subjective dimensions that could not be fully understood through quantitative surveys.

Focus groups will be organised in each of the countries, with a composition of 8-12 young people selected through **theoretical sampling**. This type of sampling will ensure a diversity of perspectives and experiences among participants, taking into account key variables such as gender, educational level, area of residence (urban or rural) and intensive or moderate use of social networks. The focus groups will use **semi-structured discussion guides**, which will allow facilitators to explore key themes related to emotional well-being and positive mindset, while leaving space for participants to freely express their thoughts and emotions. This methodology is consistent with Kitzinger's (1995) recommendations for maximising the richness of qualitative data in group settings.

In addition to the focus groups, **in-depth interviews** will be conducted with young people who have been identified as representative or extreme cases during the focus groups. These interviews will provide a more detailed understanding of young people's personal experiences of social media use, the impact on their mental wellbeing and the strategies they use to cultivate a positive mindset. Interviews will be recorded and transcribed for later analysis, and a **thematic analysis** approach will be applied following Braun and Clarke (2006). This approach will involve coding the qualitative data into recurring themes and identifying significant patterns that provide deeper insights into the dynamics between positive mindset, emotional intelligence and social network use.

The qualitative approach will also include **interviews with youth workers**, who play a key role in the development of positive mindsets and emotional intelligence in young people. These interviews will focus on understanding how youth workers perceive their role in promoting mental and emotional well-being, and how the tools developed from this project can facilitate their work. The analysis of the interviews with youth workers will identify the training needs of youth workers and tailor the educational resources that will be created to support their work.

Ethical Considerations

The study design complies with international ethical standards, ensuring the **informed consent** of all participants. Prior to participation, both young people and youth workers will receive detailed information about the aims of the study, the procedures involved and their rights as participants, including the possibility to withdraw from the study at any time without any consequences. The data collected will be treated in a confidential and anonymised manner to protect the privacy of the participants, especially in relation to sensitive topics such as mental health. Participating institutions will obtain **approval from their ethics committees**,





ensuring that the research is conducted under the highest international ethical standards (Belmont Report, 1979).

Methodological Limitations

Despite the rigour of the study design, some limitations are acknowledged. These include **possible self-selection bias**, as young people who choose to participate in the study may not fully reflect the diversity of the youth population. Additionally, the use of self-reported surveys may give rise to **social desirability bias**, where participants tend to respond in a way that they consider more socially acceptable, rather than accurately reflecting their experiences.

Another limitation is the lack of longitudinality in the study, which prevents us from observing changes in young people's mental health and positive mindset over time. Future research could benefit from a longitudinal design to assess how these indicators evolve after the implementation of the project interventions. Despite these limitations, the mixed approach of the methodology, combining quantitative statistical analysis with the depth of qualitative analysis, will provide a solid basis for the study's conclusions and derived recommendations.

This methodological design will allow not only a deeper understanding of the relationship between social network use and positive mindset in young people, but also the generation of practical resources that can be applied in different cultural and professional contexts to foster the emotional and mental well-being of young Europeans.

3. Target group.

The target group of this project is composed of two main groups: **young Europeans aged 15-25** and **youth workers** who interact with them in various educational and social capacities. The selection of this age range for young people responds to the critical importance of this developmental period, which includes the transition from adolescence to emerging adulthood, a stage characterised by significant personal, social and emotional changes. Throughout these years, young people face important challenges related to the search for identity, building interpersonal relationships, making academic and career decisions, as well as managing social expectations and increasing pressure to meet certain standards imposed by both their immediate environment and society at large.





Young people aged 15-25

This age group is particularly vulnerable to the influences of the digital environment and, in particular, social networks. According to recent reports by **Eurostat** (2020), more than 90% of young people in this age group use the internet and social media on a daily basis, exposing them to a range of influences that can be both positive and negative. While the use of social media offers valuable opportunities for social connection, access to information and the development of a digital identity, it has also created a set of challenges that directly affect their mental health and emotional well-being. These challenges include exposure to **social comparison**, **pressure to maintain an idealised image** and **information overload**, all factors that can contribute to the emergence of **anxiety**, **depression**, **low self-esteem** and other mental health problems (Twenge, 2019; Przybylski & Weinstein, 2017).

Positive thinking, in this context, becomes a key tool to help young people navigate these challenges constructively. By developing competencies such as **resilience** and **emotional intelligence**, young people can learn to deal more effectively with external pressures and maintain an optimistic and proactive attitude in the face of difficulties. In this sense, the project proposes to intervene directly in the promotion of these competences, seeking to provide young people with practical tools that allow them to improve their emotional well-being and address the adverse effects that the inappropriate use of social networks can have on their lives.

The focus on young people aged 15-25 also responds to the need for **early** mental health **prevention**. Longitudinal studies have shown that half of mental disorders manifest themselves before the age of 14, and three quarters of them appear before the age of 24 (Kessler et al., 2005). Intervening at this critical stage is therefore essential to prevent the chronification of mental health problems that, if not adequately treated, can persist and worsen into adulthood. Promoting a positive and resilient attitude among young people can not only improve their mental health in the short term, but can also have a lasting impact on their personal development and their ability to cope with future challenges.

This group of young people is not homogeneous, and within it there are subgroups that present situations of greater vulnerability. These include young people in situations of social exclusion, those with socio-economic difficulties, and young people belonging to ethnic minorities. Studies have noted that these young people face an additional set of challenges that can exacerbate the negative effects of social network use on their mental health (Evans, 2004; Gee & Ford, 2011). For example, racial discrimination and social inequality can be amplified in digital environments, where interactions are often unregulated, making these young people particularly vulnerable to cyberbullying and other forms of online violence. The project aims to be inclusive and accessible to all young people, regardless of their background or socio-





economic status, by proposing interventions tailored to the realities of these most vulnerable sub-groups.

In this sense, the **cultural and social diversity** of the target group offers an opportunity to analyse how different contexts influence the perception and adoption of a positive mindset. By working with young people from several European countries (Spain, Italy, Romania and Turkey), the project can identify common patterns, but also examine how cultural and contextual factors influence the way young people perceive and manage their emotional and mental well-being. For example, in some countries, the use of social media may be more regulated or may have different social connotations, which will affect how young people in those regions interact with digital platforms and how these influences impact their mental health. This cross-cultural approach is fundamental to developing interventions that are not only effective, but also culturally sensitive and tailored to the specific needs of young people in each country.

Youth workers

The second key target group of this project is **youth workers**, who play a crucial role in promoting the mental health and emotional well-being of the young people with whom they interact. Youth workers are educators, facilitators and mentors who, through their daily interactions, have a significant influence on the emotional and social development of young people. These professionals are in a unique position to foster positive thinking, resilience and emotional intelligence among young people, not only in formal educational settings, but also in community and non-formal settings.

Despite their pivotal role, many youth workers lack adequate tools and resources to effectively address the mental health and emotional wellbeing issues facing young people today, especially with regard to the challenges associated with social media use. The project aims to fill this gap by providing youth workers with practical educational resources and evidence-based strategies to enable them to integrate the promotion of **positive attitude** and **emotional competencies** into their daily work. The good practice manual that will be developed as part of the project will be a key tool to support this process, providing clear guidelines on how youth workers can help young people develop a positive mindset and manage the adverse effects of social media.

In addition, youth workers will also be direct beneficiaries of the **training interventions** that the project proposes, as they will receive specific training on how





to implement the principles of positive psychology in their work. This includes not only the teaching of concepts such as resilience and emotional intelligence, but also the practical application of these concepts through exercises, group dynamics and activities designed to foster a supportive environment and emotional growth. The aim is for youth workers to become **agents of change** in their communities, promoting the emotional well-being of young people and creating safe spaces where young people can learn and develop their emotional competences effectively.

The project targets both **young Europeans aged 15-25** and **youth workers**, recognising the importance of intervening with both groups to bring about positive change in the mental health and emotional wellbeing of young people. By providing resources and strategies to both young people and youth workers, the project aims to create a lasting impact that improves participants' quality of life and strengthens their emotional competences in an increasingly complex and digitalised world.

4. Theoretical framework.

The theoretical framework underpinning this project builds on the principles of **positive psychology** and the **wellbeing sciences**, fields that provide key tools for understanding and improving the emotional wellbeing of young people. This approach allows us to go beyond the mere prevention of mental disorders, seeking to promote emotional and cognitive competencies that strengthen individuals' ability to cope with adversity, develop fully and build a fulfilling life.

In the current context, where young people are immersed in a highly digitalised environment, it is crucial to equip them with the psychological and emotional resources necessary to handle the pressures and challenges associated with the constant use of technologies and social networks. Through the development of competencies such as resilience, emotional intelligence and the ability to handle social comparison, this project aims to empower young people to face modern life with a positive and constructive attitude, taking advantage of the benefits of technologies while minimising their adverse effects on emotional well-being.

Positive attitude: **Positive attitude** is a central concept in the theoretical framework of **positive psychology**, defined as the cognitive and emotional disposition of individuals to interpret events and circumstances constructively, focusing on opportunities for learning and personal growth, even in the face of adversity (Fredrickson, 2001). Unlike a perspective that avoids or denies the negative aspects of life, a positive attitude acknowledges challenges, but approaches them with an optimistic mindset that promotes self-improvement and emotional well-being (Seligman, 2011).





A positive attitude^{for youth} manifests itself in the way people process information and react to external stimuli. Those with a positive attitude tend to reinterpret setbacks as **opportunities for improvement**, rather than seeing them solely as failures. They also tend to experience positive emotions such as hope, gratitude and satisfaction, which contribute to greater **resilience** and better adaptation to stressful situations (Fredrickson & Joiner, 2002). According to Fredrickson's (2004) **extension and construction theory**, positive emotions broaden individuals' repertoire of thoughts and actions, enhancing their ability to cope with challenges and build lasting psychological resources.

From an empirical perspective, fostering a positive attitude has been shown to be closely linked to **subjective well-being** and **mental health**. For example, Diener et al. (2017) note that people who maintain a positive attitude towards difficulties experience higher levels of life satisfaction and report fewer symptoms of **anxiety** and **depression**. In addition, longitudinal studies have found that the development of a positive attitude can predict better psychological adjustment and a lower risk of developing long-term mental disorders (Lyubomirsky, King, & Diener, 2005).

In the context of young people, positive attitude is particularly relevant because of the multiple emotional and social challenges they face during adolescence and early adulthood, key stages in their psychosocial development. This life stage is marked by the search for identity, the pressure for academic and professional success, as well as the complexities of interpersonal relationships (Erikson, 1968). Moreover, in an environment increasingly mediated by the intensive use of social networks, young people are under constant pressure of **social comparison**, which can affect their **self-esteem** and psychological well-being (Twenge, 2019). Developing a positive attitude not only helps them manage these pressures, but also fosters a more balanced and healthy view of their own lives and achievements (Przybylski & Weinstein, 2017).

The promotion of a positive attitude has been addressed by multiple interventions based on **positive psychology**, which have been shown to be effective in educational and therapeutic contexts. Interventions such as **optimism training** and **cognitive reframing** allow individuals to learn to modify negative thought patterns and replace them with more constructive and growth-oriented interpretations (Seligman et al., 2006). These approaches aim to increase young people's ability to cope more effectively with the challenges inherent in modern life and, at the same time, improve their life satisfaction and overall well-being.

Within the scope of this project, positive attitude is one of the fundamental pillars on which the transversal competences to be promoted among young Europeans are built. In particular, the project seeks to integrate positive attitude as a core competence in the use of social networks, where constant interaction with idealised images of others' lives can trigger feelings of inadequacy or frustration (Valkenburg,





Peter, & Schouten, 2006). By providing educational and self-care tools based on positive psychology, the project aims to empower young people to reinterpret their experiences in social networks in a healthier way, better manage their expectations and promote a more balanced and realistic approach to their lives.

In short, the positive attitude, backed by a robust body of research in positive psychology, offers a viable and effective approach to improving young people's emotional well-being in environments that present multiple challenges. This attitude not only enables them to manage stress and everyday difficulties, but also to cultivate a disposition towards personal growth and development that is crucial for their long-term mental health.

Empathy: Empathy is another key concept within the theoretical framework of the project and refers to the ability to understand and share the feelings of others. From a psychological perspective, empathy is composed of two main dimensions: cognitive empathy, which involves the ability to understand the emotions and perspectives of others, and affective empathy, which refers to the ability to emotionally experience what others are feeling (Decety & Jackson, 2004). Empathy not only facilitates smoother and healthier social interactions, but also contributes to individuals' emotional well-being by strengthening social bonds and a sense of belonging.

In the context of youth development, empathy is critical to fostering healthy interpersonal relationships and promoting a positive social environment. As young people move through adolescence and begin to define their social identity, the ability to empathise with peers and understand their emotions and perspectives is crucial to the development of a mature emotional identity. Empathy also acts as a protective mechanism against the development of antisocial or aggressive behaviour, as those with high levels of empathy tend to be less likely to engage in bullying or social exclusion (Jolliffe & Farrington, 2006).

From evolutionary psychology, it has been argued that empathy has an important adaptive function, as it allows individuals to form and maintain social relationships, which are essential for survival in group contexts (Batson et al., 1997). In evolutionary terms, humans have evolved an innate capacity for empathy as a way of promoting cooperation and mutual support within their communities. However, although empathy has a biological basis, its full development depends on the social interactions and cultural contexts in which individuals grow and develop.

Today's environment, characterised by intensive use of social networks and digital interaction, has created new challenges for the development of empathy, especially among young people. Interaction through screens reduces direct contact and thus limits access to non-verbal emotional cues, such as facial expressions and tone of voice, which are fundamental for affective empathy (Konrath et al., 2011). Moreover,





the anonymity and psychological distance facilitated by online platforms can decrease empathic awareness and increase the likelihood of aggressive or insensitive behaviour, such as cyberbullying.

Despite these challenges, social networks also offer opportunities to foster empathy, especially when used to build genuine relationships and share personal experiences openly and honestly. Young people who use these platforms to connect emotionally with others, share their own feelings and actively listen to others' experiences can improve their empathic skills (Gleason, 2016). Therefore, an essential part of the project will be to teach young people how to use social media in a way that promotes empathy, avoiding the dangers of anonymity and emotional distance that these platforms can generate.

Empathy, as an emotional competence, is directly related to other key skills promoted by positive psychology, such as emotional intelligence and resilience. Those who develop a strong empathic capacity are better able to manage interpersonal conflicts constructively, which in turn improves their emotional well-being and that of others. In addition, empathy strengthens social cohesion and a sense of community, which are particularly important for young people who are in the process of establishing their social support networks.

The promotion of empathy is particularly relevant for the multicultural context in which this project takes place, involving young people from different countries and social backgrounds. Intercultural empathy, i.e. the ability to understand and respect the experiences and perspectives of individuals from different cultures, is essential to promote coexistence in increasingly diverse societies. In this sense, the project will also seek to develop activities and resources that strengthen intercultural empathy, enabling young Europeans to improve their mutual understanding and foster social inclusion.

In this way, empathy is not only an essential skill for interpersonal relationships, but also a central component of young people's social and emotional well-being. By strengthening this capacity, the project aims to contribute to the creation of more inclusive communities, where young people are able to interact in a respectful and understanding way, both in physical and digital environments.

Emotional intelligence: Emotional intelligence is a widely studied and applied concept in contemporary psychology, and is one of the cornerstones in the development of emotional and social competencies. Salovey and Mayer (1990) originally defined emotional intelligence as the ability to perceive, assimilate, understand and regulate emotions in oneself and others, thus promoting more effective emotional and social functioning. This definition has been adopted and expanded by authors such as Goleman (1995), who popularised the concept and





presented it as a ^{for Youth:} crucial skill not only for personal well-being, but also for success in various areas of life, such as interpersonal relationships and the work environment.

Emotional intelligence is composed of several interrelated elements, including emotional perception, emotional understanding, emotional regulation and relationship management (Mayer, Salovey, & Caruso, 2004). Each of these components is essential for the development of adequate emotional competence, which enables individuals not only to recognise their own feelings, but also to manage their emotional reactions constructively and empathetically towards others.

1. Emotional perception: The ability to identify emotions in oneself and others, including emotional cues present in facial expressions, tone of voice and body language. This ability is crucial for empathy and social interaction, as it allows individuals to pick up on the emotional state of the people with whom they interact (Ekman, 1992).
2. Emotional understanding: This involves the ability to interpret emotions, understand their causes and anticipate their evolution over time. Emotionally intelligent people are able to discern complex emotions, understand how they relate to thoughts and actions, and anticipate how they might change in response to particular events (Mayer et al., 2004).
3. Emotional regulation: This component refers to the ability to manage emotions effectively in ways that promote emotional and social well-being. Emotional regulation includes the ability to calm oneself in stressful situations, manage anger constructively and avoid emotional overreactions. The ability to regulate emotions is essential for resilience and for maintaining a positive attitude towards challenges (Gross & Thompson, 2007).
4. Relationship management: Finally, emotional intelligence also includes the ability to properly manage interpersonal relationships, using emotions strategically to enhance social interactions and resolve conflicts effectively. People with high emotional intelligence are able to use their emotional skills to positively influence others, generating more harmonious and collaborative social environments (Goleman, 1998).

In the context of youth development, emotional intelligence plays a critical role, as adolescents and young adults are at a critical stage in the formation of their emotional and social identity. During this stage, young people face numerous challenges related to emotional regulation, stress management and peer interaction, making emotional intelligence a key tool for their well-being and success in these areas (Zeidner, Matthews, & Roberts, 2009).





In a world increasingly mediated by technology and social networks, emotional intelligence becomes even more relevant. Digital interaction, while offering opportunities for connection and exchange of ideas, also creates specific challenges for emotional management, such as exposure to cyberbullying, social comparison and emotional misinformation (Lopes et al., 2004). Digital platforms tend to diminish non-verbal emotional cues, which can make it difficult to properly interpret others' feelings and increase the risk of emotional misunderstandings. This can lead to intense emotional responses, such as anxiety, frustration or anger, which, if not managed effectively, can negatively affect young people's emotional well-being.

Studies have shown that high emotional intelligence is correlated with better mental health and overall well-being. People with well-developed emotional skills are better able to cope with stress, manage anxiety and maintain more satisfying interpersonal relationships. This, in turn, translates into a greater ability to develop a positive attitude towards life and a resilient approach to difficulties (Schutte et al., 2007).

From an educational perspective, promoting emotional intelligence among young people is a crucial objective of this project. Through the teaching of emotional skills, the aim is for participants to be able to identify their emotions, understand their origin and learn to regulate them effectively, which will enable them not only to improve their emotional well-being, but also to strengthen their interpersonal relationships and their academic and social performance. In this sense, the project will integrate activities and resources that foster emotional intelligence in both young people and youth workers, with the aim of building healthier and more emotionally intelligent communities.

In teaching emotional intelligence, the project also takes into account the particularities of the multicultural context in which European young people operate, recognising that emotional manifestations and styles of emotional regulation may vary according to culture. The aim will be to provide flexible tools that can be adapted to the different cultural realities of the participating countries, respecting and promoting diversity in emotional expression and management. This is particularly important in an environment where young people are constantly exposed to transnational cultural influences through social networks, which can complicate the understanding and regulation of emotions when interacting with people from diverse backgrounds (Matsumoto, 2006).

Emotional intelligence is an essential component for the development of young people's emotional well-being and for strengthening the interpersonal competencies they need to face the challenges of modern life. Through the promotion of skills such as emotional perception and regulation, the project aims to equip young people with the necessary tools to manage their emotions in a constructive way, thus promoting a more balanced, healthy and fulfilling life.





Self-awareness: Self-awareness is a fundamental component of emotional intelligence and refers to the ability of individuals to recognise and understand their own emotional states, thoughts and motivations. Goleman (1995) defines it as the pillar on which other emotional competencies are built, since without a clear understanding of one's own emotions, it is difficult to manage them effectively or to interact empathetically with others. Self-awareness involves not only the recognition of emotions as they arise, but also the ability to reflect on them, identify their causes and assess their impact on behaviour.

The development of self-awareness is essential during adolescence and early youth, when individuals experience significant emotional changes and face new challenges related to their personal and social identity. During this period, young people often have difficulty identifying and managing their emotions, which can lead to feelings of confusion and discomfort (Erikson, 1968). Self-awareness enables young people to become aware of these feelings, to assess how they influence their decisions and behaviours, and to develop strategies to manage them more effectively.

One of the most important aspects of self-awareness is the ability to recognise emotional patterns. By identifying how certain thoughts or events trigger specific emotional responses, individuals can begin to develop a greater understanding of how their mind processes emotions. This enables them, for example, to anticipate how they will react in stressful situations and prepare themselves to handle them in a more balanced way (Mayer & Salovey, 1997). Furthermore, self-awareness is linked to the capacity for realistic self-evaluation, which means that young people can recognise their emotional strengths and weaknesses, thus facilitating a process of continuous self-improvement.

In the context of social media use, self-awareness is particularly important. These platforms often expose young people to situations that can generate a variety of intense emotions, such as social comparison, rejection or seeking external validation. Those who lack strong self-awareness may not recognise the negative impact these dynamics have on their emotional well-being and may become trapped in harmful patterns of behaviour, such as constantly seeking approval through 'likes' or engaging in superficial social interactions (Valkenburg et al., 2006). In contrast, young people with strong self-awareness can recognise when social networks are negatively affecting their emotional state and take steps to limit their use or shift their focus towards more positive and constructive interactions.

Self-awareness also plays a crucial role in emotional regulation, another key component of emotional intelligence. Only when young people are aware of their emotions can they begin to manage them effectively. For example, if a young person is able to recognise that they feel frustrated or anxious after reading negative comments on a social network, they can take steps to calm down, distance themselves from the negative stimulus or reinterpret the situation in a more





constructive way (Gross & Thompson, 2007). Without self-awareness, these negative emotions can be intensified, which can lead to impulsive or destructive responses, such as cyberbullying or negative self-image.

Promoting self-awareness is particularly relevant in educational and therapeutic contexts, where young people can be guided to develop a better understanding of their emotional states and how these influence their interactions with the world around them. Positive psychology-based interventions often include activities designed to increase self-awareness, such as mindfulness and critical self-reflection. These practices not only enable young people to pay attention to their emotions in the present moment, but also enable them to reflect on the causes of those emotions and make more informed decisions about how to respond to them (Kabat-Zinn, 2003).

Within the scope of the project, self-awareness is a transversal competence that will be promoted through educational activities and digital resources specifically designed to help young people identify their emotions in the context of their social and digital interactions. These activities will include emotional journaling exercises, where young people will be able to record and analyse their emotional responses to different situations, and group discussion sessions where they can share their experiences and learn to recognise emotional patterns in others.

The development of self-awareness not only has implications for young people's emotional health, but also for their overall development as individuals. Greater self-awareness contributes to better decision-making, as young people are better able to assess their real needs and desires, rather than acting impulsively based on unrecognised or misinterpreted emotions. In addition, self-awareness strengthens self-esteem, as it allows young people to validate their emotional experiences and recognise their achievements and areas for improvement without relying solely on external approval.

In an increasingly technology-mediated environment, fostering self-awareness is essential to help young people more consciously and healthily navigate the emotional challenges they face in the digital world. By providing them with the tools to identify and understand their emotions, the project aims to strengthen their emotional well-being and empower them to take control of their emotional responses, both in online and offline contexts.

Self-regulation: Emotional self-regulation is a key component of **emotional intelligence** and refers to the ability to manage and modulate emotions effectively to promote well-being and healthy relationships. According to Mayer and Salovey (1997), self-regulation involves the ability of individuals to control their emotional impulses, modify their emotional states according to context, and maintain emotional





balance in the ^{for Youth}face of adverse situations. In other words, it is not a matter of suppressing emotions, but of managing them in a constructive way to avoid disproportionate or harmful reactions.

Emotional self-regulation comprises a series of strategies that individuals employ to modify their emotional responses, either by reducing negative emotions such as anger or anxiety, or by promoting positive emotions such as joy or optimism. Gross and Thompson (2007) identify several common emotional regulation strategies, including **cognitive reappraisal** and **emotional suppression**. Cognitive reappraisal involves reinterpreting a situation in a way that changes its emotional impact. For example, instead of seeing a negative criticism as a personal attack, a person with high self-regulation may reinterpret it as an opportunity to improve. Emotional suppression, on the other hand, involves hiding external emotions, which can be less effective and, in some cases, even harmful, as it does not address the underlying emotion (Gross, 2014).

In the youth context, the ability to self-regulate emotions is crucial for coping with the emotional and social challenges that arise during adolescence and early youth. This developmental stage is characterised by intense emotional activity, driven by hormonal changes and the emergence of new responsibilities and social pressures. Young people often experience emotions such as stress, frustration and anxiety in response to academic pressure, family expectations and the search for identity. In this context, emotional self-regulation is essential to prevent intense or negative emotions from affecting their well-being and interpersonal relationships (Steinberg, 2005).

Moreover, self-regulation plays a fundamental role in young people's ability to **make informed decisions**. Inadequately managed emotions can lead to impulsive responses, which often result in unintended consequences. For example, **emotional impulsivity** can lead to interpersonal conflicts, unwise decisions or risky behaviours, such as substance abuse or involvement in aggressive activities. Young people who develop strong emotional self-regulation skills are better able to remain calm in the face of adversity, reflect before acting, and make decisions that support their long-term well-being (Eisenberg & Spinrad, 2004).

In the digital environment, where young people interact frequently on social media and other online platforms, emotional self-regulation is especially important. Online interactions, due to their immediacy and relative anonymity, can trigger intense emotional reactions. Negative comments, online social exclusion, overexposure to idealised content and cyberbullying are just some of the factors that can generate an immediate negative emotional response. The ability to self-regulate emotions in these situations is crucial to avoid impulsive reactions, such as engaging in heated arguments or resorting to **cyberbullying** in response to frustration or anger (Lerner, 2004). In addition, self-regulation allows young people to distance themselves





emotionally from harmful online dynamics, which contributes to a more balanced and healthy experience in the digital environment.

Self-regulation is also intrinsically linked to the ability to maintain a **positive attitude**. Young people who can regulate their emotions effectively are better able to cultivate positive emotions, even in difficult circumstances. This is because emotional self-regulation involves not only reducing negative emotions, but also strengthening positive emotions, such as gratitude and optimism. These emotions, in turn, have beneficial effects on mental health and general well-being, as they promote a more proactive and resilient approach to challenges (Fredrickson, 2001).

The project will address emotional self-regulation as a key competence that young people can learn and develop through educational interventions. Specific self-regulation strategies, such as cognitive reappraisal and **stress management**, will be taught so that young people can apply them in their daily lives, both in physical and digital environments. These interventions will not only help young people to better manage their emotions, but will also encourage a more reflective and less impulsive approach to their social interactions, thus improving their overall well-being and interpersonal relationships.

It is important to note that self-regulation is not a static skill, but can be strengthened through continuous practice and appropriate support. In this regard, **youth workers** play a crucial role in teaching and modelling self-regulation strategies. Through the training and resources provided in the project, youth workers will be able to help young people identify their emotions, understand their triggers and apply effective techniques to manage them constructively.

The project will also include group activities that encourage the practice of emotional self-regulation in social situations, such as role-playing and conflict simulation exercises. These activities will allow young people to safely experience the emotional dynamics that arise in everyday interactions, giving them the opportunity to apply the self-regulation strategies they have learned and reflect on their emotional responses. Through this structured practice, young people are expected to develop greater competence in managing their emotions, which will enable them to deal more effectively with the challenges they face in the digital environment and in their personal relationships.

Emotional self-regulation is an essential skill for young people's psychological well-being and for their ability to cope with the social and emotional challenges of modern life. Strengthening this ability not only helps to reduce the negative impact of intense or impulsive emotions, but also contributes to the creation of a more balanced and positive environment, both personally and digitally.

Motivation: Motivation is a central component in the development of personal well-being and goal realisation, and plays a crucial role in the emotional intelligence and





general behaviour of individuals. Motivation is defined as the set of processes that initiate, direct and sustain goal-oriented behaviour (Ryan & Deci, 2000). From the perspective of positive psychology, motivation is understood not only as an internal drive to achieve external goals, but as a key process that influences personal growth, emotional well-being and a sense of purpose in life.

One of the most influential models in the study of motivation is the Self-Determination Theory (SDT) developed by Ryan and Deci (1985). This theory distinguishes between intrinsic motivation and extrinsic motivation, proposing that the quality of motivation influences well-being and performance. Intrinsic motivation refers to performing an activity for the inherent pleasure and satisfaction it provides, whereas extrinsic motivation involves performing a task for external rewards or to avoid punishment. Intrinsic motivation is more associated with emotional well-being, as it involves a deeper connection to a sense of autonomy and competence (Ryan & Deci, 2000).

In the youth context, intrinsic motivation is particularly important for fostering autonomous learning, creativity and commitment to personal well-being. Young people who are intrinsically motivated experience a greater sense of autonomy and self-efficacy, which enables them to face challenges with more enthusiasm and confidence. This type of motivation is associated with better stress management, greater resilience in the face of failure and a more proactive willingness to set and pursue long-term personal goals (Deci & Ryan, 1985).

Extrinsic motivation, while it can also be useful in specific contexts, such as the accomplishment of academic or work tasks, tends to be less sustainable over time when it is not accompanied by intrinsic factors. In the case of young people, extrinsic motivation can manifest itself in the search for social approval through social networks, where positive reinforcement (such as 'likes' or favourable comments) acts as an incentive to follow certain behaviours. However, over-reliance on external validation can lead to low self-esteem and feelings of frustration or anxiety when expectations are not met (Twenge, 2019).

One of the key objectives of the project is to foster intrinsic motivation among young people by teaching them to value personal effort, self-competence and personal growth over the pursuit of external rewards or validation. To this end, activities that encourage the exploration of personal interests, the development of skills and reflection on the purpose and meaning of their actions will be promoted. These activities will help young people find satisfaction in the process of learning and self-improvement, beyond immediate or external results.

Growth mindset, a concept developed by Dweck (2006), is also closely related to intrinsic motivation. According to this theory, those who adopt a growth mindset believe that their skills and talents can be developed with effort and dedication. This





perspective not only motivates young people to try harder when they face difficulties, but also allows them to see failures as opportunities to learn and improve. By integrating this mindset into the project, it seeks to cultivate a strong intrinsic motivation that drives young people to keep improving, even when faced with obstacles.

Intrinsic motivation is also deeply linked to perceptions of personal autonomy and control. Young people who feel they have control over their own decisions and the direction of their lives are more likely to be intrinsically motivated, as they experience a greater sense of competence and self-determination (Ryan & Deci, 2000). This sense of autonomy is essential in the context of youth well-being, as it enables young people to take responsibility for their own actions and decisions, which in turn enhances their self-esteem and reduces dependence on external approval.

In the context of social media use, extrinsic motivation can play an important role in how young people interact with these platforms. Often, young people seek validation from their peers through 'likes' and comments on their posts, which can reinforce behaviours oriented towards seeking external approval, rather than personal satisfaction.

Empathy: Empathy is the ability to recognise, understand and share the emotions of others, and is considered a key skill for social and emotional functioning. According to Decety and Jackson (2004), empathy includes both cognitive and affective components. Cognitive empathy refers to the ability to understand another person's perspective or emotional state, while affective empathy involves the ability to experience the emotions another person is feeling.

Empathy plays a fundamental role in interpersonal relationships, as it enables individuals to connect emotionally with others, fostering cooperation and solidarity in social interactions (Eisenberg & Strayer, 1987). In this sense, it is a key tool for conflict resolution and the creation of strong social bonds. Hoffman (2000) argues that empathy is an essential component of prosocial behaviour, as it drives people to help others in situations of suffering or need.

Evolutionary psychology has also highlighted the adaptive role of empathy in the survival and cohesion of human groups. According to Batson et al. (1997), empathy has been central to cooperation between individuals within communities, which has allowed humans to survive and thrive as a species. This evolutionary approach sees empathy not only as an emotional capacity, but also as an evolutionary tool that fosters cooperation and social cohesion.

However, the development of empathy is not uniform and may vary according to individual and contextual factors. According to Jolliffe and Farrington (2006), there are significant differences in empathy levels between individuals, and these differences may be influenced by social environment, education and previous





emotional experience. Furthermore, studies have shown that exposure to experiences of rejection or exclusion can reduce individuals' empathic capacity, which in turn negatively affects their emotional well-being (Perry & Hodges, 2017).

Empathy is particularly relevant in culturally diverse contexts, where understanding and respect for differences is fundamental to successful social interactions. Intercultural empathy enables individuals to understand and appreciate the experiences and perspectives of people from different cultural backgrounds, which facilitates coexistence and tolerance in increasingly diverse societies (Matsumoto, 2006).

Social skills are the ability to manage relationships in ways that promote cooperation and mutual well-being. This includes skills such as influencing, clear communication, conflict management and teamwork. People with developed social skills are able to build and maintain strong relationships based on trust and respect (Riggio, 1986).

Emotional intelligence has been linked to a number of positive life outcomes, including improved mental well-being, better interpersonal relationships and higher career success (Mayer et al., 2008). In the youth context, the development of emotional intelligence is critical, as it helps young people navigate the complex social and emotional dynamics of adolescence and emerging adulthood. Furthermore, it has been shown that educational programmes that incorporate the development of emotional intelligence can significantly reduce problem behaviours and improve academic performance (Durlak et al., 2011).

Emotional intelligence is also especially relevant in the digital age, where communication often takes place through media that lack non-verbal emotional cues. Emotional intelligence skills can help young people to better interpret the emotions of others in online environments and to manage their own emotional responses more effectively, thereby reducing the risk of misunderstanding and conflict (Qualter et al., 2015).

Mental health: Mental health is a state of well-being in which individuals are able to develop their abilities, cope with the normal stresses of life, work productively and contribute to their community (World Health Organization [WHO], 2004). Mental health is not simply the absence of mental disorders, but a positive state of emotional, psychological and social balance. This balance enables people to manage their emotions, maintain healthy relationships, adapt to change and make constructive choices in their daily lives.





From a biopsychosocial perspective, mental health is influenced by a combination of biological, psychological and social factors. Biological factors include genetics, neurochemistry and nervous system functioning, while psychological factors include personality, stress perception and coping mechanisms (Engel, 1977). Social factors, such as community support, interpersonal relationships and economic environment, also play a crucial role in mental health (Hobfoll, 2001).

Mental health problems, such as anxiety, depression and mood disorders, are some of the most prevalent mental health problems worldwide. According to WHO (2020), approximately 1 in 4 people will experience some form of mental health problem in their lifetime. Adolescence and early youth are critical periods for the onset of mental disorders, as it is during these stages that most mental disorders first manifest themselves (Kessler et al., 2005). This is due, in part, to the biological, social and emotional changes that young people experience, as well as increased academic, occupational and social pressures.

Positive psychology has contributed significantly to the understanding of mental health, not only focusing on reducing symptoms of mental disorders, but also on promoting lasting psychological well-being. Seligman (2011) proposes that mental health should include aspects such as emotional well-being, a sense of purpose, self-acceptance and the development of positive relationships. This approach views mental health not as a static goal, but as a dynamic process of adaptation and personal growth.

Mental well-being is also influenced by external factors, such as the social environment and the use of technology. In particular, intensive use of social media has been associated with both positive and negative effects on young people's mental health. Studies have found that problematic social media use can increase levels of anxiety, depression and loneliness, mainly due to social comparison and the search for external validation (Twenge & Campbell, 2018). On the other hand, when used mindfully, social networks can facilitate social support and access to mental health resources (Naslund et al., 2016).

The multidimensional approach to mental health, which includes emotional, social and behavioural factors, is crucial for promoting holistic well-being. Encouraging a preventive approach that promotes resilience, emotional intelligence and stress management can help protect mental health over time.

Social skills: Social skills refer to a set of competencies that enable individuals to interact effectively with others in various social contexts, promoting positive interpersonal relationships, cooperation and conflict resolution. These skills include verbal and non-verbal communication skills, empathy, assertiveness, active listening, negotiation, and the ability to work in a team (Riggio, 1986). Soft skills are





fundamental to ^{for Youth} success in almost all areas of life, from personal and family to academic and professional.

The importance of social skills lies in their central role in building and maintaining healthy relationships. According to Gresham and Elliott (1990), social skills are essential for social adaptation, as they enable individuals to form and maintain relationships, respond appropriately to social norms and resolve conflicts effectively. These skills not only facilitate interaction with others, but are also linked to emotional well-being and life satisfaction, as positive interpersonal relationships are a key component of overall well-being (Myers & Diener, 1995).

The development of social skills begins in childhood and continues throughout adolescence, a period in which young people learn to navigate the complex dynamics of relationships with peers and authority figures (Steinberg, 2007). During adolescence, social skills become especially important, as young people begin to establish deeper and more meaningful relationships and face new social challenges, such as peer pressure and the quest for independence. Studies have shown that adolescents with well-developed social skills are better able to resist negative peer pressure, resolve conflicts constructively and establish supportive relationships (Rose & Rudolph, 2006).

In the educational context, social skills are essential for academic success and integration into the school environment. School-based social emotional learning (SEL) programmes have been shown to be effective in improving students' social skills, which in turn reduces problem behaviours and improves academic performance (Durlak et al., 2011). These programmes often include explicit teaching of skills such as cooperation, conflict resolution and assertive communication, which are crucial for the holistic development of students.

In the digital age, social skills face new challenges, as much communication and social interaction occurs through online platforms. While social networks offer opportunities for connection and self-expression, they can also hinder the development of social skills if online interactions replace face-to-face interactions (Turkle, 2015). Furthermore, the lack of non-verbal cues in digital communication can lead to misunderstandings and conflict, underlining the importance of teaching young people how to adapt their social skills to the digital context (Underwood et al., 2018).

The development of social skills is therefore an ongoing process that requires practice and feedback in a variety of contexts. Educators, parents and mentors play a crucial role in teaching and modelling these skills, providing young people with the tools they need to interact effectively and maintain healthy relationships in an increasingly complex and interconnected world.





Resilience: Resilience refers to an individual's ability to adapt, recover and thrive in the face of adversity, trauma, tragedy, threats or even significant sources of stress, such as family and relationship problems, serious health problems, or financial and work-related stressors. This concept, widely studied in the field of psychology, represents a dynamic process in which biological, psychological and environmental influences interact to enable a person to effectively face and overcome challenges (Masten, 2001).

Resilience is not a static or innate characteristic, but an ability that can be developed and strengthened over time through experiences and learning. Resilient individuals tend to possess a combination of protective factors, such as high self-esteem, a strong social support network, effective coping skills and an optimistic outlook on life (Luthar, Cicchetti, & Becker, 2000). These factors not only enable them to recover from difficulties, but also help them to find meaning and personal growth in adverse experiences.

From an evolutionary perspective, resilience has been crucial for human survival, enabling individuals and communities to adapt to changing environments and overcome threats. Masten (2001) describes resilience as 'the ordinary capacity of human systems' to cope with extraordinary challenges, underlining that this capacity is more common and accessible than is often thought. However, resilience does not imply an absence of suffering or hardship; rather, it refers to the ability to cope with pain and adversity in ways that promote recovery and personal development.

In adolescence, a time marked by multiple transitions and challenges, resilience becomes a key factor in healthy development. Resilient adolescents are better able to handle academic stress, social pressure, and changes in interpersonal relationships without these factors negatively affecting their long-term mental well-being (Compas et al., 2001). Resilience is also linked to a lower incidence of risky behaviours and mental disorders during adolescence, which underlines the importance of fostering this skill from an early age (Rutter, 2006).

In the educational context, programmes designed to strengthen resilience in young people have been shown to be effective in improving their ability to cope with challenges, both inside and outside the classroom. These programmes often include teaching social-emotional skills, promoting a growth mindset, and creating supportive environments where young people feel safe to face and learn from their mistakes (Gillham et al., 2007). Moreover, resilience is particularly relevant in the digital age, where young people are exposed to new forms of stress and adversity, such as cyberbullying and pressure to maintain an idealised online image (Smith et al., 2008).

Fostering resilience not only benefits individuals, but also strengthens communities, as resilient people are better equipped to contribute positively to their social





environments and to support others in times of crisis. At the community level, resilience can be seen as the ability of a group of people to resist and recover from adverse situations, adapt to new circumstances and ultimately thrive (Ungar, 2011).

Self-esteem: Self-esteem refers to a person's overall appraisal of him or herself, i.e., the degree to which he or she considers him or herself valuable, competent and worthy of love and respect. It is a central component of psychological well-being and plays a crucial role in the way individuals perceive themselves and relate to the world around them (Rosenberg, 1965). Self-esteem influences a wide range of behaviours and attitudes, from decision-making and motivation to interpersonal relationships and the ability to cope with challenges.

Rosenberg's (1965) theory of self-esteem, one of the most influential in the field of psychology, holds that self-esteem is an attitude people have towards themselves that develops through interactions with others, particularly in childhood and adolescence. This theory suggests that self-esteem is composed of two dimensions: global self-esteem, which is the general appraisal of oneself, and specific self-esteem, which refers to appraisal in particular areas of life, such as physical appearance, academic performance or social skills.

High self-esteem is associated with a number of positive life outcomes, including greater resilience, better academic and career performance, and more satisfying interpersonal relationships (Baumeister et al., 2003). People with high self-esteem tend to be more optimistic, have a greater ability to handle stress and feel more confident in their social interactions. However, inflated or narcissistic self-esteem can lead to problematic behaviours, such as aggression and lack of empathy towards others (Baumeister, Smart, & Boden, 1996).

On the other hand, low self-esteem is related to a number of mental health problems, such as depression, anxiety and eating disorders. People with low self-esteem tend to be more self-critical, feel less able to cope with challenges, and experience greater difficulties in interpersonal relationships (Orth, Robins, & Roberts, 2008). In adolescence, a critical period for the development of identity and self-image, low self-esteem can have long-lasting effects, affecting the transition to adulthood and overall well-being (Steinberg, 2007).

The digital environment and the use of social media have added a new dimension to self-esteem, especially among young people. Constant exposure to idealised images and pressure to maintain a 'perfect image' online can negatively affect self-esteem, fostering social comparison and dissatisfaction with oneself (Fardouly et al., 2015). However, social networks can also be a source of support and validation, provided they are used consciously and critically (Valkenburg et al., 2017).





Promoting healthy self-esteem is essential for the holistic development of young people. Educational and therapeutic interventions that focus on strengthening self-esteem have been shown to be effective in improving mental health and general well-being, helping young people to build a positive self-image and develop the confidence to face life's challenges (Swann et al., 2007).

Emotional well-being: Emotional **well-being** refers to the overall experience of positive emotions, the ability to manage negative emotions, and a sense of satisfaction and balance in daily life. This concept is central to an individual's overall well-being, as emotions play a crucial role in how people experience and respond to their environment (Diener et al., 1999). Emotional well-being is not only the absence of negative emotions, but also the active presence of positive emotions such as joy, gratitude, serenity, and love, which contribute to a sense of well-being and lasting happiness (Fredrickson, 2001).

Emotional well-being is influenced by a combination of internal and external factors, including genetics, life experiences, interpersonal relationships, and the social environment. Individuals with a high level of emotional well-being tend to have a better ability to manage stress, maintain healthy relationships, and recover quickly from adversity, known as emotional resilience (Ryff & Keyes, 1995). In addition, emotional well-being is closely related to physical health; multiple studies have shown that people with higher emotional well-being have lower levels of inflammation, a stronger immune system, and a reduced risk of chronic diseases (Pressman & Cohen, 2005).

The well-being model proposed by Ryff (1989) includes emotional well-being as one of its six key components, along with purpose in life, positive relationships with others, personal growth, autonomy, and mastery of the environment. This multidimensional approach recognises that emotional well-being cannot be isolated from other aspects of psychological well-being, but is intrinsically interconnected with them.

During adolescence and young adulthood, emotional well-being takes on particular importance, as this is a period of life characterised by significant physical, emotional and social changes. Young people who enjoy high emotional well-being are better able to navigate the transitions of this stage, manage academic and social stress, and establish a positive and coherent identity (Steinberg, 2007). Conversely, low emotional well-being in adolescence is associated with an increased risk of developing mental health problems, such as depression and anxiety (Twenge & Nolen-Hoeksema, 2002).

The digital environment and the use of social networks can also significantly influence young people's emotional well-being. While social networks can provide social support and opportunities for emotional expression, they can also exacerbate





negative emotions through social comparison, cyberbullying and exposure to negative content (Kross et al., 2013). Therefore, it is crucial to promote a conscious and balanced use of digital technologies to protect and enhance emotional well-being.

Fostering emotional well-being in young people involves teaching them to recognise and manage their emotions effectively, to build supportive relationships, and to develop a positive mindset that allows them to see challenges as opportunities for personal growth (Goleman, 1995). Educational and therapeutic interventions that focus on emotional skills development have been shown to be effective in improving emotional well-being and preventing mental health problems (Durlak et al., 2011).

5. Situation of young Europeans and workers

SPAIN

CONTEXTUALIZATION OF THE SITUATION OF YOUNG PEOPLE

Educational level

According to Ayuda en Acción, one out of ten young people between 15 and 24 years of age is neither studying nor working (ninis), moreover, 48.8% of young people between 15 and 29 years of age were studying in 2020, the highest rate in the last five years.

Early school dropout is also very important, reaching 13.3% of people between 18 and 24 years of age, a significant figure to explain the situation of youth unemployment in Spain.

Employment situation

According to Ayuda en Acción, the youth unemployment rate fell below 30% in 2022 for the first time in the last 13 years, although it is still a very worrying figure, being the second country in the Eurozone with the highest rate. The average youth unemployment rate in the Eurozone is 15.5%.

With regard to the average age of emancipation, according to a report by the Economic and Social Council, it has increased in recent years, reaching around 30 years of age. It can be seen how it has evolved over the years and, according to Eurostat data from 2021, young Spaniards emancipated themselves on average at 29.8 years of age, with men doing so later (30.8 years) and women at 28.9 years of age. Although the increase in the average age has been minimal, it is very important





to note that it has been growing gradually over the years. The average age of emancipation in Europe is 26.4 years, according to Eurostat.

According to the report Youth in Spain 2020, 43.3% of young Spaniards who finish their studies enter the labor market within one year

MENTAL HEALTH OF YOUNG PEOPLE

Mental health status of young people

According to the WHO, between 10% and 20% of young Europeans have a mental health problem.

The average age at which a mental disorder is diagnosed in Spain is 26.6 years according to data provided by Nel González, president of the Confederación Salud Mental España. In addition, 30.8% of people under 24 years of age consider that they have good mental health, and suicide attempts are more common among young people.

In 2020 there were a total of 3,941 deaths by suicide or derived from self-inflicted injuries, the highest number in the last forty years. It should be noted that 300 deaths are of people aged 14 to 29 years, making it the leading cause of unnatural death among young people of this age, followed by traffic accidents.

Attendance at public mental health services for young people in Spain is insufficient as waiting lists for first consultations in the public health system are months long, while the rate of suicides and self-harm continues to rise.

According to a study by the Confederación Salud Mental España and Fundación Mutua Madrileña, 26.2% of those surveyed said that they go to a mental health specialist, 20% to a psychologist and 17% to a psychiatrist. It should also be noted that 16.2% receive help from other types of professionals such as social workers or social educators. However, these figures clash with those of the CIS survey of 2021, which show that only 6.4% of the population has visited a mental health professional since the beginning of the pandemic.

With regard to young people, they prefer to seek the help of a psychologist rather than a psychiatrist; however, the high consumption of psychotropic drugs reflected in the report is noteworthy, with practically one fifth of the population consuming them, the majority of them consuming them on a daily basis. According to the president of the Mental Health Confederation, this is due to the fact that due to the scarcity of time and resources to attend to the professionals, they have no choice but to palliate symptoms with drugs.

Mental Health Effects of the Pandemic





Mental health is vital for people to lead full and productive lives. Mental health problems can have a significant impact on people's lives by diminishing and worsening their quality of life, as well as affecting their personal lives, such as poorer educational outcomes, higher rates of unemployment, and is often associated with poorer physical health.

The pandemic increased the risk factors associated with poor mental health and weakened many other protective factors leading to an unprecedented worsening of mental health.

The pandemic has had a significant impact on the mental health of young people in Spain, increasing mental health problems such as anxiety and depression, and increasing the risk of suicide and self-harm.

Government actions

Spain has an average of six mental health specialists per 100,000 inhabitants, when the correlation in Europe is at least twice as high.

ADDICTIONS IN YOUNG PEOPLE

Internet and social networks in young people

The concept of addiction has been related to dependence on different substances, however, in recent years behavioral addictions such as addictions to the Internet or social networks have gained importance in society, these addictions have a great impact on the behavior of young Europeans.

In Spain, 11.3% of young Spaniards make high use of the Internet, which can lead to addiction. According to the UNICEF study, 90.8% of young people go online every day or almost every day, most of them feeling joy, relaxation or fun while doing so.

It is also worth noting the time that young people spend on social networks, in Spain alone they spend more than 600 hours a year on Instagram, and in addition, almost half of Spaniards spend between 1 and 2 hours a day hooked on social networks, with young people spending an average of 2.4 hours on these platforms.

These data highlight the need to address the problem of social network addiction among young Spaniards.

Additions in young people

Alcohol and drug consumption by young people is a serious problem, in Spain according to the Survey on Drug Use in Secondary Education in Spain (ESTUDES 2021), young people start consuming alcohol at 14 years of age on average. Furthermore, alcohol consumption remains at high levels, with 73.9% of secondary





school students having consumed alcohol at some point.

The Survey on Alcohol and Other Drugs in Spain (EDADES 2022) indicates that alcohol is the most consumed substance in Spain, with 76.4% of the population having consumed alcohol in the last 12 months. Tobacco is the second most consumed substance with 39% of the population having smoked in the last 12 months. In terms of illegal drugs, cannabis is the most consumed with 10.6% of the population having consumed it in the last 12 months.

According to the ESPAD 2019 report, Spanish adolescents aged 15 and 16 consume more alcohol and cannabis than Europeans.

The National Plan on Drugs explains that the consumption of illegal drugs in Spain has increased in recent years. In 2020, 28.3% of young people aged between 14 and 18 had consumed illegal drugs in the last year.

According to a report by Spain's National Youth Institute, drug use can affect the mental health of young people, including the onset of psychotic disorders, anxiety, depression and personality disorders.

Gambling addiction, or ludopathy, is another problem that is increasing dramatically. According to an article in The Objective, there is growing concern about the increase of young people addicted to gambling in Spain, one of the main causes is the early access they have to gambling.

According to "a study", compulsive gambling is a problem that affects young Spaniards and it is important to raise awareness among adolescents of the danger posed by this pathology, also according to Luis Miguel Real, compulsive gambling is an increasingly common disease among young people. The increase in cases of pathological gambling among young people is due to several factors, such as the ease of access to gambling and the aggressive advertising of gambling houses.

According to Mayo Clinic, compulsive gamblers often have substance abuse problems, personality disorders and other mental health problems.

The Spanish Federation of Rehabilitated Gamblers (FEJAR) points out that there is a large number of compulsive gamblers in Spain and that prevention and health care for patients by the public administration is important.

According to reports by the Spanish Observatory on Drugs and Addictions, there are a total of 680,000 gambling addicts, of whom only 14,000 receive treatment. Of these figures, approximately 8,000 are those who pass through one of the 23 associations and 2 regional federations linked to FEJAR, while the remaining 6,000 are absorbed by the public health services. In other words, more than half a million people remain undiagnosed.





It is vitally important to note that 44% of those diagnosed are under 26 years of age, which demonstrates the seriousness of this problem among Spanish youth. FEJAR has detected that 90% of minors begin by making contact with instant lottery games, which means that their relationship with gambling starts at an early age.

Another aspect that is increasing the number of cases in young Spaniards is online gambling due to the ease with which young people can place their bets.

Young people between 18 and 20 years of age are changing their gambling habits towards online sports betting and mobile applications. Online video games (which have microtransaction systems within the game itself), online slots and sports betting have experienced a remarkable growth in recent years where Spanish youth see online gambling as another alternative for leisure and entertainment, equating it to other forms of leisure such as watching series or spending time on social networks.

ITALY

CONTEXTUALISATION OF THE SITUATION OF YOUNG PEOPLE

Level of education

In Italy, in 2021, the share of 18-24-year-olds with at most a lower secondary education and no longer engaged in an educational or training path is estimated at 12.7% (517,000 young people). Despite Italy having made significant progress in reducing school dropouts, the rate of Early Leavers from Education and Training (ELET) remains among the highest in the EU, standing at 9.7%, surpassed only by Spain (13.3%) and Romania (15.3%). It decreases to 7.8% in France and 11.8% in Germany. School dropout rates are higher among boys (14.8%) than girls (10.5%). Territorial disparities: in 2021, the dropout rate before completing upper secondary education or vocational training affects 16.6% of 18-24-year-olds in Southern Italy, 10.7% in the North, and 9.8% in the Center.

Among young people with non-Italian citizenship, the rate of early school dropout is more than three times that of Italians: 32.5% compared to 10.9%. The incidence of early dropouts among foreign-born individuals varies significantly depending on their age of arrival in Italy. For those who arrived in Italy between the ages of 16 and 24, the rate reaches 55.9%, between 10 and 15 years old, it is 37.0%, and for those who arrived before the age of nine, while still high, it drops to 21.8%.

In Italy, only 20.3 percent of the population aged 25-64 have tertiary education. The Italian percentage is the second lowest among all EU member states, ahead of 19.7 percent of Romania.

Italy is below the threshold of the European average, ranking 15th with a percentage of 9.9% of the population aged 25-64 who are constantly taking part in training and vocational training courses.



Work situation

The unemployment rate in Italy of people aged 15-24 is 23.7%.

The lowest unemployment rates of recent graduates aged 20–34, 2022 in UE is reported in Italy (65%).

The average age in the European Union in 2020 when a young person aged between 15 and 34 left his parents' home - a sign of achieved economic autonomy - was 26.4 years. In Italy this figure was 30.2 years: 31.2 for men, 29.2 for women.

An examination of the combined findings, carried out by the FS Research Centre on a nationwide scale, reveals that during the 2022, more than 35 million Italians commuted on each working day (approximately 77% of the reference population), and nearly 34 million did so on public holidays (74% of the reference population). On average, each commuter made about two and a half journeys per day, consisting of a primary round trip and, in some instances, an additional journey, resulting in a daily travel distance of roughly 47 kilometers on weekdays and more than 50 kilometers on weekends and public holidays.

The employment rate for individuals aged 15-34 without a diploma is 6.6%.

For individuals with a diploma is 47.2%, while for graduates it is 67.5% after 1-3 years from the completion of studies.

MENTAL HEALTH OF YOUNG PEOPLE

Mental health status of young people

(There is a lack of extensive Italian epidemiological data on the mental health of adolescents. The PASSI surveillance by the Italian National Institute of Health, one of the most comprehensive regarding mental health, does not include individuals under 18 years old. A valuable source of data is the HBSC - Health Behaviour in School-aged Children, in which Italy also participates. This is an international multicenter study, conducted in collaboration with the World Health Organization Regional Office for Europe, designed to delve into the health status of young people and their social context. However, the HBSC study focuses on three age groups only: 11, 13, and 15 years old. In Italy, since 2002, five data collections (in 2002, 2006, 2010, 2014, and 2018) have been conducted, promoted and funded by the Ministry of Health/CCM, coordinated by the Universities of Turin, Padua, and Siena, in collaboration with the Ministry of Education, University and Research, and the Regions. Since 2017, the Prime Minister's Decree on "registries and surveillance" has included Surveillance on Behavioral Risks in the 11-17 age group among the national and regional surveillance systems, designating the Italian National Institute of Health (Istituto Superiore di Sanità) as the national-level entity responsible for its establishment. However, even in this case, mental health is not detailed as it is



included in a series^{for Youth} of other macro indicators of behavior, such as diet, alcohol consumption, physical activity, smoking, substance abuse, and bullying.)

In Italy only 20-40% of adolescents with mental health issues are diagnosed by healthcare services, and only 25% receive appropriate treatment.

In 2018, depressive disorders affected 3.6% of adolescents (15–19 years of age) in Italy, with a preponderance of females (4.7% females and 2.5% males).

Every year in Italy, according to the most recent Istat data available, updated to 2019, there are about 4,000 suicides per year, 13% of which - about 500 - among the under 34. Of these 500, there are about 200 cases among the under 24, which in a very high percentage are university students. The situation is dramatic and has become even more dramatic with the pandemic, which has in fact had a role as a trigger for problems already latent especially among the very young. According to Istat, in fact, in 2021 in Italy 220,000 young people between 14 and 19 years were declared dissatisfied with their lives and in a condition of poor psychological well-being.

In Italy there's the Mental Health Department (DSM), that consists of the structures and services responsible for addressing the demand for mental health care, assistance, and protection within the territory defined by the Local Health Authority (ASL). The DSM includes the following services: daycare services (Mental Health Centers (CSM), semi-residential services (Day Centers), residential services (divided into therapeutic-rehabilitative and socio-rehabilitative residences), hospital services (Psychiatric Diagnosis and Treatment Services and Day Hospitals).

Mental health effects of the pandemic

Through various studies at the state level to develop the effects of the pandemic on the mental health of young people.

A study published in the Italian Journal of Pediatrics investigated the impact of social media on the well-being of adolescents and it observed that from March 2020 to March 2021, the total emergency room visits by individuals under 18 nearly halved (-48.2%), largely due to fear of contagion. Conversely, there was an 83.1% increase in visits by minors with neuropsychiatric conditions.

The detailed data breakdown reveals a significant surge of 147% in visits related to thoughts of suicide. This is followed by a substantial increase in cases of depression (+115%), eating disorders (+78.4%), and psychosis (+17.2%).

The Italian government has implemented various measures to improve the mental health of young people, focusing on both the public and private sectors. These actions include specific public policies, mechanisms for accessibility, and prevention campaigns.





Ongoing projects by the High Institute for Health to study the impact of the pandemic on young people's mental health:

- the project "Impact of the pandemic on the mental health of children and teenagers", lasting three years, financed by the Guaranteeing Authority for Childhood and Adolescence, It has been activated on the 2nd of August 2021 and its final aim is to make an epidemiologic study in schools, in collaboration with the Ministry of Education and Merit (age groups 6-10, 11-13 and 14-18) The ultimate goal is to develop an evidence-based action plan to meet the psychosocial needs of vulnerable children and teenagers during and after the pandemic. Specifically, this plan includes both broad interventions to support the mental health of all minors and targeted measures for those at higher risk or in vulnerable circumstances. These measures will be continually adjusted in response to the evolving situation at both the national and local levels during the pandemic;
- the "Medium-Term Impacts of the SARSCoV-2 Pandemic on the Mental and Physical Well-being of Adolescents (2021-2022)" initiative, conducted in partnership with the Universities of Turin and Padua, involves a study focused on gathering data from a sample of individuals aged 11-15 years. This research aims to assess their psychophysical well-being in the aftermath of the COVID-19 pandemic, identifying potential disparities compared to the pre-pandemic era. This assessment draws comparisons with the 2018 HBSC survey and is facilitated through an online questionnaire designed to be compatible with various electronic devices.
- the "Monitoring Knowledge, Risk Perception, Preventive Behaviors, and Trust for Informing Pandemic Response" project, initiated in 2021, is a collaborative effort with the European Office of the World Health Organization (WHO), IRCCS Fatebenefratelli of Brescia, and ASL Modena. This project has received limited funding from the Cariplo Foundation. It involves conducting a survey on a diverse sample of the Italian population ranging from 18 to 70 years old (N=10,000). The survey aims to gather pertinent data on topics such as risk perception, adopted behaviors, attitudes towards vaccines, and validated measures of psychological well-being, among others. These findings will be compared with responses from other European countries for comparative analysis.

The Lazio Region became the initial Italian region to activate additional assistance for youths and their families to address the psychological impacts of COVID-19. They achieved this by reinforcing "Listening Hubs" with a 10.9 million euro allocation from the FSE+ 2021-2027 Fund. Through this initiative, the region is instituting a series of measures to be executed over a three-year period (2022-2025) to address the challenges faced by young individuals in the post-COVID-19 era. This entails a comprehensive and well-coordinated plan of interventions, specifically tailored to benefit young people, with a particular focus on the most susceptible individuals and those encountering familial difficulties.





Additional projects initiated to investigate the pandemic's impact on the mental well-being of young people include:

- a research study titled "I Care" conducted at the University of Palermo revealed that during the lockdown period in Italy, from March to May 2020, 35% of teenagers reported experiencing anxiety and discomfort. Moreover, 32% reported low levels of optimism, and 50% had diminished expectations for the future;
- another study, conducted by the Italian Committee for UNICEF in collaboration with the Educational Science Department of RomaTre University, examined the psychological well-being of families during the initial lockdown. The findings indicated heightened concerns among parents for their sons compared to their daughters. Parents expressed greater worry about their sons' social withdrawal (males: M=3.4; females: M=2.83), aggressiveness (males: M=8; females: M=6), and attention disorders (males: M=5.7; females: M=4.4).
- a noteworthy survey conducted by Telefono Azzurro (the blue telephone) in collaboration with Doxa spanned a broader timeframe, encompassing data collected during both the initial lockdown in April 2020 and another collection in October 2020 when restrictions returned for teenagers. The April data revealed that 30% of parents observed excessive usage of social networks, 25% noted changes in nutrition and sleep patterns, 18% noticed isolation and social withdrawal, and this percentage increased to 25% among pre-adolescent kids. In October 2020, as restrictions persisted, parents reported a significant detachment from daily activities among their children (17% for parents of preadolescents, 18% for adolescents). These findings indicate the persistence and even escalation of discomfort over time.
- the report titled "Rewrite the Future – Where are the Teenagers? The Voice of Unheard Students During the Crisis," published by Save the Children in January, aimed to understand the sentiments, emotional states, and expectations of high school students. It portrayed a concerning image, including the risk of school dropouts. Nearly 4 out of 10 students reported negative repercussions on their ability to study (37%). Teenagers expressed feelings of fatigue (31%), uncertainty (17%), worry (17%), irritability (16%), anxiety (15%), disorientation (14%), nervousness (14%), apathy (13%), discouragement (13%), among a range of negative emotions. These feelings were predominantly shared within families (59%) and among friends (38%). Alarming, one in five students kept their burdens to themselves without sharing them with anyone (22%).

Government actions

In Europe, in countries with comparable income to Italy, there are approximately 10 psychologists per 100,000 inhabitants within public healthcare agencies. In Italy, there are 5,000 public psychologists for 60 million inhabitants. This means that





despite having fewer psychologists in total, other nations invest three times as much in public mental health as Italy. To be precise, according to the 2023 Headway Mental Health Index, Italy spends 3.5% of its healthcare expenditure on mental health compared to the European average of 12%, with an annual expenditure of 61 euros compared to 500 euros in France and Germany. Italy allocates 0.2% of its real GDP (OECD data) to mental health, ranking it as the last country in Europe in terms of public investments in this field.

In 2023, the psychologist bonus was introduced, which is a contribution of up to 1,500 euros to cover the expenses for psychotherapy sessions conducted by private specialists registered in the psychologist-psychotherapist registry participating in the initiative. It is available only to those with an ISEE (Equivalent Economic Situation Indicator) not exceeding 50,000 euros.

Other mental health services in the country are managed by the Department of Mental Health (DSM), which includes a set of structures and services responsible for addressing the demand related to the care, assistance, and protection of mental health within the territory defined by the Local Health Authority (ASL).

The DSM offers the following services:

- Day care services: Mental Health Centers (CSM)
- Semi-residential services: Day Centers (CD)
- Residential services: residential facilities (SR) divided into therapeutic-rehabilitative and socio-rehabilitative residences
- Hospital services: Psychiatric Diagnosis and Treatment Services (SPDC) and Day Hospitals (DH).

The healthcare offering is complemented by university clinics and private healthcare facilities.

The Mental Health Center (CSM) is the primary point of reference for citizens with mental distress. It coordinates all interventions related to the prevention, treatment, and rehabilitation of citizens with psychiatric disorders within the territory. The CSM is staffed by a multidisciplinary team consisting of at least one psychiatrist, one psychologist, a social worker, and a professional nurse. The CSM provides the following services:

- Psychiatric treatments and psychotherapy
- Social interventions
- Placements in day centers, day hospitals, and residential facilities
- Diagnostic activities including psychiatric evaluations and psychological





assessments

- Coordination with general practitioners to provide psychiatric consultation and collaborative therapeutic projects
- Specialized counseling for "borderline" services (such as addiction treatment)
- Quality improvement evaluations
- Collaborations with voluntary associations, schools, social cooperatives, and other local network agencies.

It is expected that the CSM will be operational for at least 12 hours a day, six days a week, for outpatient and/or home interventions.

Day Center

The Day Center (CD) is a semi-residential facility with therapeutic and rehabilitative functions located in the community. It is expected to be open for at least 8 hours a day, six days a week. The CD has its own team, which can be supplemented by social cooperative operators and volunteer organizations. It provides personalized therapeutic and rehabilitative programs to develop therapeutic pathways and acquire skills for self-care, daily life activities, and interpersonal relationships, including employment integration.

The CD can be managed by the DSM or private social and entrepreneurial entities, with conventions in place to ensure continuity of care.

Residential Facilities

Residential facilities (SR) are non-hospital structures where a portion of the therapeutic-rehabilitative and socio-rehabilitative program is implemented for citizens with psychiatric distress referred by the CSM with personalized and periodically reviewed programs. These facilities aim to offer a network of relationships and emancipatory opportunities within specific rehabilitation activities. SR should not be considered as housing solutions.

Residential facilities are differentiated based on the level of healthcare assistance (24 hours, 12 hours, hourly shifts) and have no more than 20 beds. They are located in urban areas to prevent isolation and promote social interaction. SR can be established and managed by the DSM or private social and entrepreneurial entities, with agreements defining activity limits and admission and discharge control procedures.

Psychiatric Diagnosis and Treatment Service (SPDC)

The Psychiatric Diagnosis and Treatment Service (SPDC) is a hospital service where voluntary and involuntary psychiatric treatments are conducted in inpatient





conditions. It also provides consultation to other hospital services. SPDC is located within hospital facilities, including hospital companies, healthcare authority hospital facilities, and university hospitals. It is an integral part of the Department of Mental Health, even when the hospital it is located in is not administered by the same healthcare authority. In such cases, the relationship between the two healthcare authorities is regulated by mandatory agreements, following regional guidelines. The total number of beds is generally determined at a rate of one per 10,000 inhabitants. Each SPDC has no more than 16 beds and is equipped with appropriate common areas.

Psychiatric Day Hospital (DH)

The Psychiatric Day Hospital (DH) provides short to medium-term diagnostic and therapeutic rehabilitative services in a semi-residential setting. It can be located within a hospital, with functional and managerial connections to the Psychiatric Diagnosis and Treatment Service, or it can be located outside the hospital, connected to the CSM, and equipped with appropriate facilities, equipment, and staff.

It is expected that the DH will be open for at least 8 hours a day, six days a week. Its functions include conducting various and complex diagnostic assessments, administering pharmacological treatments, and reducing the need for inpatient hospitalization or limiting its duration. Users access the DH based on programs agreed upon by DSM operators. Regions and Autonomous Provinces, as part of regional healthcare planning, determine the placement and number of DH beds, keeping in mind that one DH bed is equivalent to one SPDC bed.

ADDICTIONS IN YOUNG PEOPLE

Internet and social networking among young people

Possible negative effects of the use of the internet and social networks on young people. Using the various studies at the state level, internet addiction rate.

Approximately 100,000 Italian teenagers aged 11 to 17 are grappling with compulsive and uncontrollable usage of social media and streaming platforms and they're losing touch with reality through an excessive use of Tiktok, Instagram, Twitch etc. Additionally, nearly as many retreat into their rooms for extended periods, substituting the physical world with the virtual one.

Moreover, there's a group of around 500,000 young individuals, primarily males, who are at risk of succumbing to video game addiction. While the average time spent online in Italy hovers around 6 hours, different forms of technological dependency are proliferating among young people. This situation is exacerbated by the emotional isolation and social disconnection experienced by a post-Covid generation, which has taken a toll on their mental well-being.





The findings stem from a study endorsed by the Department of Anti-Drug Policies within the Presidency of the Council of Ministers and the National Center for Addictions and Doping at the Higher Institute of Health. It was conducted by IRCCS Stella Maris and AUSL of Bologna. Experts convened to discuss the study during a joint conference organized by Sinpf (Italian Society of NeuroPsychoPharmacology) and Sinpia (Italian Society of Child and Adolescent Neuropsychiatry), titled: "Clinical Psychopharmacology in Developmental Age: Effectiveness, Safety, and Treatment Implications Across Different Life Stages," held in Cagliari. Based on data collected from over 8,700 students aged 11 to 17, nearly 12% of adolescents, especially males, are at risk of developing video game addiction. Another 2.5% exhibit compulsive and uncontrollable social media use, while 1.8% isolate themselves in their rooms for months, living solely through computers and smartphones.

Other studies have been conducted by Generazioni Connesse in partnership with Skuola.net, the University of Florence, and Sapienza University of Rome – CIRMPA, on the occasion of Safer Internet Day 2022, and involving a cohort of 2,472 secondary school students, paint the following picture: -while in the period between 2019 and 2020, the proportion of individuals reporting daily online connectivity for 5 to 10 hours nearly doubled, surging from 23% to 59%, the data from the past year has displayed a gradual regression toward pre-pandemic levels. As per the most recent findings, 42% of students have maintained an extended internet presence; - moreover, those identifying as "constantly connected" have also reduced their online hours, diminishing from 18% as reported in 2021 to 12% in the initial survey of 2022. In contrast, the remaining 46% of surveyed adolescents now report spending less than 4 hours online each day, a decline compared to the 23% figure recorded twelve months ago.

According to Marco Pistis, from the Division of Neuroscience and Clinical Pharmacology - Clinical Pharmacology Unit at the University of Cagliari, once the problem is diagnosed, it is essential to help young people regain control of their lives through appropriate treatments. Currently, the main approach involves family and cognitive-behavioral therapies, although there are safe and effective pharmacological treatments as well. However, Pistis emphasizes the importance of focusing mainly on prevention. These addictions are not different from substance abuse addictions, as they involve the same brain areas and neurotransmitters, such as dopamine and serotonin.

Alcohol, drugs and gambling addiction

In Italy in 2022, almost 990 thousand students between 15 and 19 years (40%; M=41%; F=39%) report having consumed at least once in their life an illegal substance among cannabis, cocaine, stimulants, hallucinogens, opiates, inhalants and solvents, anabolic, synthetic cannabinoids, synthetic cathinones, Salvia Divinorum, synthetic opioids, ketamine, methamphetamine and New Psychoactive Substances (New Psychoactive Substances - NPS).





Almost 690 thousand boys (28%) did so during 2022 with a higher prevalence among male students (29%; F=26%). About 450 thousand students (18%; M=20%; F=17%) used illicit drugs in the month before the survey and 120 thousand (4.9%) reported using 20 or more cannabis and/or 10 or more illegal substances in the month; behavior that has mainly affected boys compared to peers (M=5.9%; F=3.9%).

So 28% of kids between 15 and 19 use or have used drugs: in 2021 it was just over 18%.

Cannabis is the most widely used illegal substance: about 600,000 (24%) students made use of it during 2022. More than 76 thousand (3.1%) report an almost daily use, which is increasing. About 60% had first contact with the substance between 15 and 17 years. Increase the percentage of those who used it for the first time to 14 years or less, since it increases from 27% (2018) to 33% (2022).

Almost 11% of boys consume psychotropic drugs (the percentage, already increasing, had stopped at 6% the year before), with peaks never recorded before 15% among girls.

In addition, almost two million adolescents (78%) are consumers of alcohol, 33% of whom make a high use that brings them or has led them to alcohol poisoning and, among 18-24 years old, the share of those who have drunk in the last year is about 50%.

In the face of this trend, from the point of view of health, there has been an increase In the face of this trend, from the point of view of health, there is thus a general increase in the use of both public services and therapeutic communities, as well as a simultaneous increase in access to emergency rooms and admissions due to drug-related problems related. In 2022, almost 10% of direct drug-related emergency room admissions were to minors and about 14% to 18-24 year olds. Among admissions with the main drug-related diagnosis, 15% concerned people under 24 years of age, which is also increasing. There is also a general reduction in the average age of patients, especially in women. Users of public services under 25 make up about 6% of the total number of persons assisted, a percentage that rises to almost 20% among new users. In the services of the private sector they represent a share of just over 9%.

In addition to the use of substances, in recent years, there has been the emergence of additional risk and potentially addictive behaviors, often linked to the Internet and new technologies. The most widespread of these is gambling, which in 2022 affected about half of 15-19 year old students.

According to data from the Nomisma Gambling Observatory, in 2020, 42% of young between 14 and 19 years of age benefited from gambling or fortune, developing in





9% of cases of problematic gambling practices, with negative repercussions on the socio-social sphere emotional and relational.

The psychological symptoms of ludopathy are manifested among young people with restlessness, anxiety, irritability and mood disorders that oscillate between a sense of omnipotence and a strong lack of self-esteem.

And periods of nervousness are very frequent, as well as impulsiveness.

Young people with games begin to think in a distorted way, emphasizing or minimizing their playing behavior, winnings and economic losses.

The most observed physical symptoms are headache, insomnia, tremors and palpitations, and there is often a tendency to experiment with the use of alcohol and drugs in adolescents, developing further addictions.

Among the social symptoms is identified first of all the difficult relationship with others, from parents to peers. The constant search of the game can lead the teenager to isolate himself, failing to cultivate social situations and relationships with his peers.

The school career is among the first to suffer from the symptoms of ludopathy: the lack of concentration results in a decline in performance, in the conflicting relationship with the authoritarian figure of the professor and with classmates, up to total social isolation.

In addition to these physical, behavioral and social signals, one of the main alarm bells for parents is the growing demand for money from their teenage son, often with vague or poor reasons as to how they will be spent.

During 2022, the Department of Drug Policy promoted and supported several projects aimed at preventing the consumption of psychoactive substances and drugs and new psychoactive substances. The project activities have allowed to involve and put in synergy different institutions of the public and the Private Social, including some universities, all highly competent and present on the entire national territory that, in close cooperation with the Department of Drug Policy (DPA), they have put in place effective and efficient actions in the sensitive area.

The project activities, implemented and promoted by the DPA, were strongly oriented to: strengthen the coordination activities of the Department for Drug Policies; prevent and combat the consumption of psychoactive substances by drivers of vehicles; prevent and counteract the experience of potentially risky behaviors related to the digital world by young people, as well as youth discomfort; prevent the spread of drugs with particular reference to New Psychoactive Substances (NPS) within the social and youth context; through the monitoring of the web and dark web,





to prevent and combat the spread, including online, of drugs and NPSs; research and analysis of information coming from the territory and the Police Forces and monitoring and mapping of the phenomenon to guide prevention.

Most of these actions have been aimed, in particular, at strengthening the National Early Warning System and the European Alert System, fundamental tools for a rapid response, preventive and repressive, the spread of drugs on national territory.

Drug dependence is a real chronic and recurrent disease, characterized by research and compulsive consumption of these substances, despite the fact that the person is aware of the negative consequences. It is considered a mental illness because drugs change the structure and functioning of the brain, seriously affecting and limiting the life of the patient.

The resulting compulsive behavior weakens impulse control, despite the negative consequences. These behaviors are in all respects similar to those that occur in the case of other mental illnesses.

The most widespread phenomenon among young people, whose harmful effect on health is known in recent years, is binge drinking, literally 'binge drinking', with a very high risk of acute alcoholic intoxication that in severe cases can lead to ethyl coma and death. In Italy in 2020 there were 4,100,000 consumers who got drunk in 2020, 930,000 between 11 and 25 years of age, with 120,000 children intoxicated of which only 3,300 have resorted to a First Aid (PS).

Because young people do not have the ability to metabolize alcohol like adults, alcohol abuse damages hippocampus neurons, which is a crucial area for memory. In fact, 2-3 months of binge drinking on weekends are enough to have a 10-20% reduction in memory and ability to orient.

Alcohol consumption in young people has been shown to cause a four-fold higher risk of developing alcohol dependence in adulthood (Bonino and Cattelino, 2008). Adolescence, besides being a period of great inner changes, is also a period of structural and functional changes in the brain. Specifically, the prefrontal cortex, thanks to which we make decisions and responsible for emotional control, during adolescence is still developing.

Between the ages of 12 and 25, anatomical and functional changes occur in the brain that promote the individual's emotional, cognitive and behavioral maturation.

Alcohol and drugs hinder precisely this formation of cognitive processes, such as goal planning, operational memory, attention control, thought flexibility, emotional regulation and behavior regulation (Spear, 2010; Candio et al., 2012). For example, the practice of binge drinking is associated with deficits in verbal learning and memory (specifically that of work), both in adults and adolescents, moreover





because alcohol consumption, alternating with strong intoxications and periods of abstinence, is more detrimental to brain functions, which are subjected to high stress (Medina et al., 2008).

According to recent estimates, in Italy the socio-economic impact of the phenomenon is estimated at about 22 billion a year, of which 60 % of expenditure relates to the health sector and concerns the health of those who are dependent on it. Drug expenditure alone is about 8 billion euros (Scafato, 2018).

In Italy, both drug and alcohol use is regulated by different laws and regulations. There is a law that establishes penalties for the possession and illicit trafficking of drugs and one that establishes that the minimum age for buying alcohol is 18 years for alcoholic beverages with less than 21% of alcohol, 16 years for alcoholic beverages with less than 12% alcohol and there are penalties for alcohol abuse.

In addition to national laws, each Italian region has specific regulations on alcohol and drugs, adapting national laws to local needs.

There has also been a National Drug Plan in place since 2003 which defines guidelines for the prevention, treatment and recovery of drug addiction. It includes programs and initiatives to prevent drug use among young people and to treat substance abuse problems.

The National Drug Plan stresses the importance of prevention as a crucial tool to combat drug use and abuse. This prevention is based on educational and awareness-raising programmes aimed especially at young people, families, schools and local communities. There are in fact many projects currently in place in schools to raise awareness of this topic and inform young people about the risks of drugs.

The plan also promotes access to treatments for addictions, such as therapies and cures, with a person-centered approach. Rehabilitation initiatives are encouraged to help people overcome addiction and reintegrate into society.

It also promotes harm reduction strategies, such as the distribution of hygiene kits to users of substances, to prevent infections and reduce collateral damage caused by drug use. The plan also focuses on the fight against illicit drug trafficking and the fight against organized crime linked to drug trafficking and trafficking and the constant monitoring of the drug phenomenon to adapt strategies and policies effectively and efficiently.

As for the prevention and reduction of risk and harm in Italy, the school population remains the main target.

There are also numerous structures in the area to ensure adequate support and





assistance to those in need of help and interventions related to drug abuse and other addictions.

There are 137 mobile units in Italy, 35% managed by the Public Services and 65% by those of the Private Social. There are also 9 public drop-ins, 38 managed by the Private Social and 18 low threshold or first reception services, managed mainly by organizations of the Private Social (14 out of 18).

There are 574 Ser.D in Italy, with 614 locations for the provision of services. In 2021, 1,001 active outpatient services were detected, including specific alcohol and gambling services. During 2021, Ser. D assisted 123,871 people with Substance Use Disorder of whom 15% were under 30. There are 932 rehabilitation facilities in Italy that have a total of 13,819 places, of which 87% in residential structures and the remaining 13% in semi-presidential regimes, 95% belong to the Private Social.

ROMANIA

CONTEXTUALISATION OF THE SITUATION OF YOUNG PEOPLE

Level of education

Nearly 4,500 eighth-grade students dropped out of school in the last school year, according to the Report on the Organization and Conduct of National Examinations in the June-July 2023 session. The report is on the agenda of the Government meeting. The number of children who dropped out of school this year is equivalent to 178 classes of 25 children each, according to calculations by Edupedu.ro. Specifically, 4,461 eighth-grade students dropped out of school this year, according to data from the Ministry of Education. Out of the 179,563 students registered as of September 1, 2022, 161,652 enrolled in the National Evaluation.

The National Institute of Statistics (INS) mentions that in the academic year prior to 2020-2021, 131,500 students graduated from various forms of higher education (bachelor's, master's, doctoral degrees, postgraduate and postdoctoral courses in advanced research), of whom 59.3% were female. Most of them came from faculties with profiles in business, administration, and law (26.9%), engineering, processing, and construction (17.7%), and health and social assistance (11.2%).

VET (Vocational Education and Training) typically occurs at the upper secondary and post-secondary levels before entering professional life. It takes place either in a school setting (learning activities mainly conducted in a classroom) or in a professional context, such as training centers or businesses. On average, 50% of European youths aged 15 to 19 participate in VET-I (at the upper secondary level). However, this EU average masks significant geographical differences, with





participation rates^{for youth} ranging from 15% to over 70%.

The unemployment rate in the third quarter of 2023 was 5.4%, equal to the rate recorded in the second quarter of 2023, according to the National Institute of Statistics (INS). In terms of gender, the gap between the two unemployment rates was 0.4 percentage points (5.5% for men compared to 5.1% for women), and in terms of residential areas, it was 6.3 percentage points (8.8% in rural areas compared to 2.5% in urban areas).

The head of state emphasized that "we must fully understand the essential role of younger generations in shaping the development of our societies and in finding solutions to current challenges." "To address these challenges, the Government of Romania is preparing a new National Youth Strategy for 2022-2027, focused on the empowerment of young people, education, increasing youth employment, and their active participation in economic, social, cultural, and political life," announced Klaus Iohannis. "Young people fight for peace and should be provided with significant opportunities to play a role in this field. This requires inclusive political systems, quality education at the primary, secondary, and tertiary levels, including in shelters for refugees and displaced persons, as well as dignified employment opportunities," concluded the president.

Romania continues to be a country of emigration, with the emigration phenomenon being the second main cause of the country's population decline. The balance of international migration in 2021 (provisional data) was negative, with the number of emigrants exceeding the number of immigrants by more than 16 thousand people, according to data released by the National Institute of Statistics (NSI). During 2021, men emigrated in a higher proportion than women (50.2%). Among immigrants, men were also in the majority (54.7%).

In Romania, the sabbatical year (or sabbatical leave, as it is referred to in legislation) is regulated in the Labor Code, Chapter 3, Article 153.

MENTAL HEALTH OF YOUNG PEOPLE

Mental health status of young people

Mental health among children and adolescents in Romania is significantly affected compared to children in other countries. Nearly 33% of Romanian adolescents aged 11 to 15 reported feeling sad several times a week, compared to 13% on average in the 45 countries included in a study by the World Health Organization. In a study conducted in Romania in 2020, involving 10,114 adolescents from all counties of the country (average age 17), 48.9% of young people had suicidal thoughts at least once, 27.1% were sad all the time and could not escape sadness, 21.5% experienced periods of feeling depressed in the last six months. In another comparative study, it was emphasized that the suicide rate among adolescents





under 15 in Romania is higher than the European average. The hierarchy of diagnosed mental disorders was as follows: conduct disorders (24.19%), attention deficit hyperactivity disorder (22.65%), anxiety disorders (19.23%), autism spectrum disorders (14.47%), depressive episodes (9.14%), attachment disorders (4.3%), school phobia (3.1%), eating disorders (2.88%). The periodic evaluation conducted by UNICEF throughout 2020 revealed that during the state of emergency, psychological counseling services and interventions carried out in hospitals and specialized outpatient clinics were among the most affected services.

Among the development regions, the highest average suicide rate was recorded in the Center region, with an average of 15.40 suicides per 100,000 inhabitants. Its leading position is caused by a strong cultural dimension, a fact clearly highlighted when analyzing the situation at county level and even more so at the communal level. The Northeast region, with an average value of 12.58 suicides per 100,000 inhabitants, closely follows, and an analysis of the responsible factors would probably highlight the role of its eastern, peripheral position combined with that of an austere economic environment.

The Government's draft Decision approving the National Health Strategy 2023 – 2030 and the Action Plan for the period 2023 – 2030 for the implementation of the National Health Strategy has been put up for public debate by the Ministry of Health. "The Ministry of Health, the National Health Insurance House, ministries and other specialized bodies of central public administration, as well as local public administration authorities, are obliged to implement the specific measures in their field of activity provided in the Action Plan. The funding of the measures provided in the Action Plan is ensured from the budget approved for each institution or public authority responsible for implementation, within the limits of the allocated funds for this purpose," the project states.

Through this strategy, the aim is to develop a sustainable, resilient, and efficient national public health system. "According to the proposed strategy, integrated health services will be developed at the community level so that health can be comprehensively addressed on multiple determinants: sanitary, educational, and social. Special attention will be given to vulnerable and at-risk populations (children, the elderly, persons with disabilities, etc.), as well as the Roma population, where it exists. These services will be developed by local authorities with financial, logistical, and informational support from the central level. The medium and long-term vision is for these integrated community medicine centers to constitute a model of sustainable and widespread practice in the communities of Romania," the project's rationale note states.

Mental health effects of the pandemic

- During the pandemic, the prevalence of depressive and anxiety disorders has





increased^{for Youth} alarmingly in several populations, leading to additional pressures on mental health services.

- The impact of the COVID-19 pandemic is also felt among children and adolescents, who are particularly vulnerable to long-term negative effects.
- Alcohol consumption and deaths related to this harmful habit have dramatically increased.
- One in five people diagnosed with COVID-19 also received a diagnosis of mental health disorders within the following three months from the date of the first positive test for SARS-CoV-2.
- Although the pandemic has generated increased interest in mental health disorders, this period has also highlighted systemic vulnerabilities and the need for implementing health policies to provide support for the mental health of general populations and COVID-19 patients.
- In the first year of the pandemic, globally, there were reported alarming increases in the prevalence of major depressive disorder (27.6%) and anxiety disorders (25.6%). Despite the variability of the obtained data, the high-risk groups were represented by women, young adults (between 20 and 24 years old), and those with pre-existing medical conditions.

Government actions

National health programs funded by the Ministry of Health are nationwide programs that address public health needs in the following areas: prevention, surveillance, and control of communicable diseases, monitoring of determinants in the living and working environment, organ, tissue, or cell transplantation procedures, prevention, surveillance, and control of non-communicable diseases, promotion of health and healthy lifestyles, provision of specific public health services for children, pregnant women, and postpartum women. National health programs have nationwide coverage. Beneficiaries of public health programs are individuals residing in Romania, regardless of their insured status, and beneficiaries of curative health programs are individuals who are insured. Persons in transit may benefit from activities within national public health programs in epidemiological risk situations. The implementation of national health programs is carried out through specialized units selected based on criteria approved in the technical norms for the implementation of national health programs, namely: public institutions, public providers of medical services, private providers of medical services for medical services that exceed the capacity of public providers of medical services, private providers of medicines and medical devices. The Ministry of Health has implemented and funded 15 national programs with major impact on public health, as follows: National Immunization Program; National Program for Surveillance and Control of





Priority Communicable Diseases; National Program for Prevention, Surveillance, and Control of HIV Infection; National Program for Surveillance and Control of Nosocomial Infections and Monitoring of Antibiotic Use and Antibiotic Resistance; National Program for Prevention, Surveillance, and Control of Tuberculosis; National Program for Monitoring Determinants in the Living and Working Environment; National Transfusion Safety Program; National Program for Active Early Detection of Cancer through Organized Screening; National Mental Health Program and Prevention in Psychiatric Pathology; National Program for Organ, Tissue, and Cell Transplantation; National Program for Endocrine Diseases; National Program for Dietary Treatment of Rare Diseases; National Program for Management of National Registries; National Program for Health Evaluation and Promotion and Health Education; National Program for Women's and Children's Health.

Healthcare Personnel: The number of physicians increased by 2518 in 2022, approximately half of whom were resident doctors. In terms of healthcare personnel provision, in 2022, 71,300 physicians were active, an increase of 2,500 compared to 2021; 21,400 dentists, an increase of 1,400 compared to 2021; 22,700 pharmacists, an increase of 1,200 compared to the previous year; 18,900 higher education level nurses, an increase of one thousand compared to 2021; 156,700 medium-level healthcare personnel, an increase of 1.1 thousand compared to 2021, and 76.6 thousand auxiliary healthcare personnel, an increase of 0.5 thousand compared to 2021. The healthcare personnel structure is predominantly female, with the proportion of women among physicians being 70.8%, among dentists 67.2%, and among pharmacists 89.2%.

In 2022, compared to 2021, the number of physicians (excluding family doctors) increased by 2518, approximately half of whom were resident doctors. Among all specialties providing services to patients, the largest increases in the number of physicians in 2022 compared to 2021 were recorded in the following specialties: allergology and clinical immunology (60.4%), oral and maxillofacial surgery (38.8%), pediatric neurology, medical oncology, and radiotherapy (each with 12.0%).

In Official Gazette no. 962 dated October 24, 2023, Government Decision (G.D.) no. 1004/2023 approving the National Health Strategy for the period 2023-2030 was published.

The National Health Strategy for the period 2023-2030, hereinafter referred to as the National Strategy, provided in the annex*) which is part of this decision, is approved.

*) - The Annex is published in the Official Gazette of Romania, Part I, no. 962 bis, which can be obtained from the Public Relations Center at 1 Panduri Road, block P33, ground floor, Sector 5, Bucharest.

Article 2





The Ministry of Health, the National Health Insurance House, ministries and other specialized bodies of central public administration, as well as local public administration authorities, are obliged to implement the specific measures within their field of activity.

Article 3

The financing of the measures provided for in the National Health Strategy for the period 2023-2030 shall be ensured from the approved budget of each institution or public authority responsible for implementation, within the limits of the funds allocated for this purpose.

- Mechanisms made available to the public (web portals, telephone numbers or any other means, means of prevention).

For many people, the existence of positive adaptation strategies integrated into daily life can help manage everyday stress factors. These include participating in regular physical activity, practicing yoga for anxiety and stress, practicing mindfulness and meditation, connecting with loved ones, setting boundaries, practicing deep breathing and relaxation techniques, and finding meaningful activities that bring joy.

- Prevention campaigns.

The rapid adoption of vaccination legislation in Parliament is essential. Simultaneously, the Ministry of Health will support the implementation of vaccination information campaigns, vaccine procurement, as well as the provision of European and national budget funds for equipment at the local authority level and for family doctors to ensure the integrity of the cold chain.

There is an urgent need to start implementing national screening programs and expand them with EU funding in the field of chronic diseases with the highest incidence in the Romanian population: cardiovascular diseases, diabetes, lung cancer, colorectal cancer, breast cancer, cervical cancer, and prostate cancer.

Furthermore, the development of the National Plan for Surveillance and Control of Antimicrobial Resistance is crucial, along with the allocation of funding for its implementation.

ADDICTIONS IN YOUNG PEOPLE

Internet and social networks among young people





Studies show that adolescents who spend excessive time on social networks exhibit a more pronounced decline in social and psychological spheres, which can lead to a deep sense of loneliness with medium and long-term effects, as well as a decrease in self-esteem," she stated.

"This is because adolescents are influenced by the external environment, by the way they are treated by others, being sometimes a child, sometimes a mature person, and they feel disoriented," Mrs. Vlad argues.

She also explained a phenomenon extremely well-known today – the degradation of self-confidence through comparison with idealized figures promoted within social networks, which results in the inhibition of young people.

"The adolescent believes that he cannot reach the idealized image of the world that he perceives on social networks. Then, he builds his own inner world, a kind of hidden chamber where he stores his secrets and thoughts. Any attempt to penetrate this world created and known only by him is seen as an infringement of his liberties, a fact that can lead to isolation, an attempt to break off relationships with those around him, considering them violators of his own privacy. This situation leads to an increased sense of loneliness and the belief that he is not like those around him," she said.

The teacher also explained the negative behavioral effects that can occur in adolescents absorbed by the online environment, as they develop a premature desire to become adults, thus denying their flaws in a desperate attempt to hide their vulnerability.

"It can have a negative impact because adolescents are the most affected by the "virtual life", which ends up completely eliminating the real one. There is the temptation to have any identity, to be who you would like to be instead of who you are. Adolescents present themselves as adults, having a different appearance, different occupations, different personality traits. It is satisfying to describe yourself as strong, outgoing, mature instead of lacking self-confidence or being timid. However, they end up becoming dependent on the internet, living only in that virtual world."

- Internet addiction rate.

Over eight out of ten (82.1%) households in Romania had internet access this year, up by 1.3% compared to 2021 data, according to the National Institute of Statistics. The proportion of individuals aged 16 to 74 who have ever used the internet was 89.7%, up by 1.1% compared to the previous year, of which 95.4% in the last three months, up by 1.1% year-on-year (95.4% compared to 94.3%).

In 2022, out of all registered households in Romania, 88.6% are connected to the





internet in urban areas, up by 14.9 percentage points compared to the 73.7% share of households in rural areas.

Among current users, 69.2% use the internet several times a day, while 21.1% use it once a day or almost every day.

By development regions, the proportion of those who have ever used the internet was 95.5% in the Bucharest – Ilfov region (the highest percentage in the country), followed by the North – West regions, with 93.1%, and the West (92%). At the opposite end is the South-Muntenia region - with 85.4%.

Alcohol, drugs and gambling addiction

The main drugs consumed in Romania - 10.7% of those aged 15-64 have consumed at least one type of illicit drug throughout their lives (experimental use), while 6% of them have also consumed in the last year (recent use). There is a slowing down of the growth rate of consumption for most illicit drugs, with the exception of the consumption of new psychoactive substances (NPS). The highest rates of consumption are observed among young people (15-34 years old). Adolescence is the period with the highest vulnerability to initiating drug use, with the lowest age of onset being reported for the use of new psychoactive substances (13 years old). Cannabis continues to be one of the most consumed drugs in Romania, both by the general population (ranking 2nd in the list of the most consumed illicit drugs in Romania, after new psychoactive substances) and by the school population. .

The frequency of excessive alcohol consumption in Romania is 33% in men and 15.4% in women, compared to the EU average of 20.1% in men and 10% in women. According to the YRBSS 2022 study, 3 out of 6 high school students in Romania (aged 15-18) reported consuming alcohol at least one or two days in the last 30 days. Additionally, 1 out of 10 boys and 1 out of 20 girls aged 15 in Romania have been drunk at least twice in their lives.

The gambling industry in Romania has experienced spectacular growth in recent years, becoming one of the most prosperous markets in the world. With a population of nearly 20 million people and a well-developed technological infrastructure, Romania has become a favorable territory for the expansion of online gambling. The gambling market in Romania is currently valued at over one billion euros, indicating a significant increase over the past three years. At the beginning of 2022, Romania had 16.79 million internet users, representing an impressive figure of 88% of the total population.

The population of Romania is not hesitant to use internet-based products and services. This is a major reason why the online gambling market in the country has seen significant growth in recent years. Websites like slotscalendar.ro offer a wide





range of casinos and bonuses, leading to their consistent and significant growth. popularity.

- Government action to combat this.

Prevention of drug consumption is carried out through several subprograms, such as:

- Prevention of drug consumption in the school and family environment - subprogram a
- Prevention of drug consumption in the community - subprogram b

National prevention campaigns Integrated assistance provided to drug users - subprogram Integrated assistance level I - risk reduction and consequences associated with drug use services Integrated assistance level II - assistance to drug users through prevention, evaluation, and assistance centers in the field of drugs Integrated assistance level III - day center for adolescents and young drug users, with a capacity of 30 places, in Bucharest Coordination and training in the field of drugs Research, evaluation, information

"Stay in the game! Adolescence without alcohol!" - Information and education campaign Initiated by Spirits Romania, the representative association of producers and importers of alcoholic beverages in Romania, together with the Romanian Football Federation and Mega Image, the campaign aims to contribute to supporting the efforts of authorities, parents, and educators to inform and educate about the negative consequences of alcohol consumption among minors.

With the support of the Ministry of National Education, this year's campaign provides support to teaching staff in pre-university education and school counselors in the psycho-pedagogical assistance offices by developing a guide, a useful working tool that offers educational and psycho-pedagogical methods for prevention and countering this phenomenon.

As the specific activity of gambling must adhere to the national strategy for business development based on principles of competitiveness and transparency, especially for the prevention and combating of unauthorized gambling, combating tax evasion in the field, particularly regarding economic crime in the gambling sector, it is necessary to strengthen the role and importance, as well as the institutional capacity of the National Gambling Office as the state authority mandated to administer the state monopoly established over the organization and exploitation of specific gambling activities in Romania, to combat tax evasion in the field, but also to ensure the protection of minors and other vulnerable groups in order to prevent dependence on gambling. Since online gambling activities must be organized and authorized in Romania, where they operate according to current legal norms, and subsequently





taxed according to legal regulations, considering the national strategic objectives of granting the right to organize and operate gambling activities in Romania, monitoring and controlling gambling activities in Romania, increasing state budget revenues, especially through the prevention and combating of unauthorized gambling, ensuring a climate of legality in the business environment, improving coordination, collaboration, and information exchange between institutions with competencies in combating tax evasion, with a focus on economic crime in the gambling sphere, in order to enhance the control of activities to reduce the risk of deviations from the strategies, policies, programs, and plans of the National Gambling Office, the protection of minors or other socially and economically vulnerable groups, and the prevention of their dependence on gambling. Additionally, in order to strengthen prevention and to prevent authorized operators from committing contraventions and crimes in the field of gambling activities.

TURKEY

CONTEXTUALISATION OF THE SITUATION OF YOUNG PEOPLE

Level of education

The level of education in Turkey has undergone significant changes in recent decades, reflecting both the government's efforts to improve access to and quality of education and the persistent challenges affecting young people in different regions of the country. As Turkey has moved towards greater urbanisation and modernisation, education has been seen as a fundamental pillar for economic and social development, with a focus on increasing literacy rates and improving technical and vocational training.

School dropout rate

One of the key indicators of the education system in Turkey is the school dropout rate, which remains a significant challenge, especially in the less developed regions of the country. According to the Turkish Statistical Institute (TurkStat, 2020), the dropout rate in secondary education has shown a decrease in recent years, but still persists at worrying levels in certain rural areas and among economically disadvantaged communities. Reasons for early school leaving include economic factors, such as the need for young people to contribute to the family income, as well as problems related to the quality and accessibility of education in less developed regions (Alacacı & Erbaş, 2010).

Early school leaving is a critical problem, as it is linked to higher rates of unemployment, poverty and social exclusion. Moreover, young people who drop out of school are less likely to have access to higher education and vocational training opportunities, limiting their long-term employment and personal development prospects (European Training Foundation, 2018). In this context, it is crucial that





education policies focus on providing additional support to students at risk of dropping out, particularly in rural areas and among vulnerable populations.

Number of University Graduates

In terms of higher education, Turkey has seen a considerable increase in the number of university graduates over the last two decades. This growth is partly due to the expansion of universities across the country, including private institutions, as well as government policies that have promoted access to higher education for a greater number of students (Özoğlu, Gür, & Coşkun, 2016). According to data from TurkStat (2020), the number of university graduates has increased significantly, with an increasing proportion of women completing university studies, reflecting progress in gender equality in access to higher education.

However, despite this growth in the number of graduates, significant challenges remain in terms of the quality of university education and the employability of graduates. Many young people face difficulties in finding employment appropriate to their level of education, which has led to a rise in youth unemployment, especially among university graduates (World Bank, 2019). This mismatch between education and the labour market underscores the need for education reforms that better align academic programmes with labour market demands.

Vocational and technical education

Vocational education and training (VET) in Turkey plays an essential role in preparing young people for the labour market, especially in industrial and technical sectors. The VET system has undergone reforms to improve its quality and relevance, with a focus on increasing student participation and improving work-based learning opportunities (European Commission, 2020). However, despite these efforts, the social perception of VET remains lower than that of university education, which limits its attractiveness to young people.

The Turkish government has implemented several initiatives to strengthen technical and vocational education, including partnerships with industry and apprenticeship programmes that aim to bridge the gap between education and employment (UNESCO-UNEVOC, 2017). However, a broader cultural shift is needed to raise the status of vocational education and ensure that young people see these educational pathways as valuable and respected options for their personal and professional development.

In conclusion, the level of education in Turkey presents a mixed picture, with significant achievements in terms of access to higher education and improvements in technical and vocational training, but also with persistent challenges such as dropout and the mismatch between education and the labour market. To address these challenges, it is crucial that education policies focus on improving the quality of





education at all levels, providing support to at-risk students and strengthening the connection between education and labour market needs, thus ensuring that young Turks are better prepared to face the challenges of the future.

Employment status

The labour market for young people in Turkey faces significant challenges, reflecting both the general economic dynamics of the country and the specific conditions affecting the youth population. Despite advances in education and the expansion of job opportunities in recent decades, youth unemployment rates remain high, and many young people struggle to find jobs appropriate to their level of education and expectations. This situation has profound implications not only for the country's economy, but also for the social and emotional well-being of young people.

Youth unemployment in Turkey has been persistently high, with a rate that exceeds the overall average unemployment rate in the country. According to data from the Turkish Statistical Institute (TurkStat, 2020), the youth unemployment rate stood at around 25% in 2020, with significant variations by region and educational level. This high level of unemployment reflects a number of structural challenges, including a mismatch between the skills offered by the education system and the demands of the labour market, as well as labour market rigidities and a lack of opportunities in certain regions of the country (OECD, 2018).

The situation is exacerbated for young women, who face an even higher unemployment rate and lower labour force participation compared to their male counterparts. This is partly due to cultural and social factors that limit employment opportunities for women, especially in rural and conservative areas, where traditional gender expectations still prevail (Erman & Kara, 2018). In addition, the lack of effective policies to reconcile work and family life contributes to the low labour market participation of young women.

Youth emancipation in Turkey, i.e. the average age at which young people leave the family home and become independently settled, is also influenced by these economic conditions. The average age of emancipation in Turkey is relatively high compared to other European countries, standing at around 28 years (Eurostat, 2020). This trend reflects the economic difficulties faced by young people, including unemployment, low wages and job insecurity, which delay their ability to establish themselves independently. In addition, the strong influence of family culture in Turkey, where family ties and dependence on parents are more prevalent, also contributes to this trend (İlkkaracan, 2012).

Geographical mobility for work purposes is another critical aspect of youth employment in Turkey. While urbanisation and economic development have created new opportunities in the country's major cities, such as Istanbul, Ankara and Izmir, young people in rural and less developed regions are often forced to migrate in





search of employment. This geographical mobility, while it may offer better job opportunities, also presents challenges, such as adaptation to new environments, lack of support networks and the risk of social exclusion in cities (Koç & Onan, 2004). Internal migration has been a constant phenomenon in Turkey, but for many young people, it involves leaving their community behind and facing significant uncertainties in big cities, which can affect their emotional well-being and social stability.

The labour market insertion of young people one year after completing their studies is another indicator that underlines the difficulties of the labour market in Turkey. Although there has been a significant expansion in higher education, many young graduates face difficulties in finding employment in their field of study, often leading them to take jobs that do not require university qualifications or to remain unemployed for extended periods (World Bank, 2019). This mismatch between education and employment is a recurrent problem in Turkey, where the education system is not always aligned with the needs of the labour market, especially in technical and specialised sectors (Özdemir, 2012).

In summary, the employment situation of young people in Turkey is marked by high levels of unemployment, especially among women, a relatively high emancipation age, and significant challenges in terms of geographical mobility and labour market insertion after graduation. These structural problems require policy interventions that not only improve employment opportunities, but also address regional disparities, educational mismatch and cultural barriers that limit youth labour force participation. It is essential that comprehensive strategies are developed that include both education reform and active employment policies that support young people in their transition to the labour market and promote greater equity and social cohesion.

MENTAL HEALTH OF YOUNG PEOPLE

Mental health status of young people

The mental health of young people in Turkey is an issue of growing concern, reflecting both the specific challenges faced by young people and global trends in the prevalence of mental disorders. Although there has been an increase in mental health awareness in the country, significant barriers to adequate access to mental health services persist, including social stigma, lack of resources and disparity in the quality of services between urban and rural regions.

In Turkey, young people face a range of challenges that affect their mental health, from academic pressure and job competition to social and family tensions. According to a study conducted by the Turkish Psychiatric Association (TPD, 2020), approximately 20% of Turkish young people aged 15-24 have been diagnosed with





some form of mental disorder, the most common being depression, anxiety disorders and eating disorders. These findings are consistent with trends observed globally, where it is estimated that one in five young people will experience a mental disorder before the age of 25 (Kessler et al., 2005).

Depression is the most common mental disorder among young Turks, with a prevalence that has increased in recent years, especially among young women (TPD, 2020). The reasons for this increase are multifaceted and include factors such as academic stress, social pressure, economic insecurity and difficulties in interpersonal relationships. Anxiety disorders, including generalised anxiety disorder, panic disorder and social phobias, are also common and often co-exist with depression, exacerbating the impact on young people's quality of life (Stein et al., 2017).

Suicide is one of the leading causes of death among young people worldwide, and Turkey is no exception. Although the suicide rate in Turkey is relatively low compared to other OECD countries, there has been a worrying increase in suicide cases among young people in the last decade. According to the Turkish Statistical Institute (TurkStat, 2020), the suicide rate among young people aged 15-24 has increased, with an incidence of approximately 4.2 per 100,000 in 2020. This increase has been particularly notable among young men, who are significantly more likely to commit suicide than young women.

Factors contributing to this increase in suicide rates include academic pressure, unemployment, family problems, and lack of access to adequate mental health services. The stigma associated with mental health problems also plays a crucial role, as many young people avoid seeking help due to fear of social judgement or the perception that mental health services are ineffective or inaccessible (Eskin et al., 2016). In addition, the influence of social media and exposure to suicide-related content on these platforms has also been noted as a factor that may exacerbate suicide risk among vulnerable youth (Arendt, Scherr, & Romer, 2019).

Access to mental health services in Turkey varies significantly between urban and rural regions, and among different segments of the population. Although the Turkish government has made efforts to expand the coverage of mental health services, including the implementation of mental health programmes in schools and the opening of new community mental health centres, demand continues to far outstrip the capacity of the system (WHO, 2017).

Attendance at public mental health services among young people is limited, with many barriers preventing young people from seeking and receiving the help they need. According to data from the Turkish Ministry of Health (2020), only around 15% of young people with diagnosed mental disorders receive adequate treatment in public mental health services. This low attendance rate is partly due to a lack of





resources, such as a shortage of mental health professionals and insufficient specialised facilities, especially outside major cities (Bayram & Bilgel, 2008). In addition, social stigma and lack of awareness of the importance of mental health remain major barriers.

In rural areas, where access to health services is more limited, young people face greater challenges in receiving mental health care. In many cases, families rely on traditional or religious solutions rather than seeking professional help, which can delay or prevent appropriate treatment (Kılıç, 2013). In contrast, in urban areas, although access to mental health services is better, overburdened public health systems often result in long waiting times and insufficient care.

In summary, the mental health of young people in Turkey faces significant challenges, with high rates of mental disorders and a worrying increase in suicide rates. Despite efforts to improve access to mental health services, many young people are not receiving the treatment they need, highlighting the need for more effective and accessible interventions. Addressing these problems will require not only improvements in mental health infrastructure, but also a cultural shift towards destigmatisation and greater awareness of the importance of mental health.

Mental health effects of the pandemic

Review of existing national studies on the effects of the pandemic on young people's mental health.

The COVID-19 pandemic has had a profound and widespread impact on the mental health of young people around the world, and Turkey has been no exception. As the pandemic spread, confinement measures, social distancing, school and university closures, and economic uncertainty created an environment of stress and anxiety for many people, especially young people. These factors have exacerbated pre-existing mental health problems and have given rise to new challenges affecting the emotional and psychological well-being of this population.

Several national studies have explored the effects of the pandemic on the mental health of young people in Turkey, revealing a significant increase in the prevalence of symptoms of anxiety, depression, and post-traumatic stress disorder. One of the largest studies conducted during the pandemic is one conducted by Hacettepe University (2021), which surveyed more than 2,000 young people aged 15-24. The results showed that almost 40% of the participants reported moderate to severe anxiety symptoms, while 30% reported clinically significant depressive symptoms. These results are alarming and reflect the magnitude of the impact of the pandemic on the mental health of young Turks.





Another study conducted by Istanbul University (2021) focused on the effects of social isolation and the transition to online education on the mental health of university students. This study found that 65% of students experienced increased levels of stress and anxiety due to academic uncertainty and difficulties associated with remote learning. In addition, the lack of social interaction and emotional support normally provided in a face-to-face educational environment contributed to increased feelings of loneliness and hopelessness among students.

The economic impact of the pandemic has also been a major factor affecting the mental health of young people in Turkey. According to a report by the Turkish Statistical Institute (TurkStat, 2021), the youth unemployment rate increased significantly during the pandemic, exacerbating feelings of economic insecurity and anxiety about the future. Young people from low-income families were particularly vulnerable, as they faced increased pressure to contribute financially to the household while trying to continue their studies in difficult circumstances.

A longitudinal study conducted by the Turkish Public Health Institute (2021) assessed the long-term effects of the pandemic on the mental health of young people. The results showed that symptoms of mental health disorders such as depression and anxiety not only persisted but, in many cases, intensified over time. The study also highlighted that young people with a history of mental health problems were at greater risk of experiencing a worsening of their symptoms during the pandemic.

In addition to academic studies, several surveys conducted by non-governmental organisations in Turkey have also shed light on the impact of the pandemic on young people's mental health. For example, a report by the Mental Health Foundation of Turkey (2021) noted that many young people reported difficulties in accessing mental health services during the pandemic, due to both the restrictions imposed by confinement measures and the overburdening of health services. This has led to an increased reliance on digital platforms and online resources for psychological support, which while helpful, has also highlighted limitations in terms of equitable access to quality services.

Taken together, these national studies indicate that the COVID-19 pandemic has had a profound and lasting impact on the mental health of young people in Turkey. The combination of social isolation, academic and employment uncertainty, and economic hardship has contributed to a significant increase in levels of stress, anxiety and depression among this population. As the country recovers from the pandemic, it is crucial that attention is paid to the mental health needs of young people by implementing policies and programmes that provide adequate and accessible support to mitigate the long-term negative effects of the pandemic on their mental wellbeing.



Government actions

The Turkish government has taken various measures to address challenges related to the mental health of young people, especially in the context of growing awareness of the importance of mental health and the adverse impacts exacerbated by the COVID-19 pandemic. These actions range from the implementation of specific public policies to the improvement of mental health infrastructure and the development of accessible support mechanisms for the youth population.

One of the main actions of the Turkish government in recent years has been the formulation and implementation of the *National Action Plan on Mental Health (NAPMH)*, which aims to improve access to mental health services and reduce the stigma associated with mental disorders. This plan includes specific measures targeting young people, such as the integration of mental health services in schools and universities, and the creation of early intervention programmes to detect and treat mental disorders in their early stages (Ministry of Health, 2018).

The PNASM has also introduced policies to increase the training and recruitment of mental health professionals, with a particular focus on strengthening the public health system. While there is still a significant gap between the needs and availability of services, these efforts represent a crucial step towards building a more robust and accessible mental health infrastructure for all young people in Turkey.

In terms of the number of mental health professionals in Turkey, there is a considerable disparity between the public and private sectors. According to a report by the Turkish Ministry of Health (2020), the country has approximately 5,000 registered psychiatrists and 10,000 registered psychologists. However, a significant proportion of these professionals work in the private sector, where services are more accessible in major cities, but often inaccessible to those living in rural areas or with financial constraints. In the public sector, workloads are high, and the ratio of mental health professionals to population remains low by international standards (WHO, 2021).

This imbalance between the public and private sector underlines the need for greater investment in the public health system, not only to increase the number of professionals available, but also to improve the geographical distribution of these services and ensure that all young people, regardless of their location or economic status, can access the care they need.

The Turkish government has implemented several mechanisms to facilitate access to mental health care, especially in response to increased demand during the pandemic. These mechanisms include the creation of dedicated mental health web portals, such as the Ministry of Health's mental health portal, which provides educational resources, self-assessment tools, and access to online consultations with mental health professionals (Ministry of Health, 2021).



In addition, the government has established 24-hour helplines to provide immediate psychological support to people in crisis, with a particular focus on young people. These services are operated in collaboration with universities and non-governmental organisations, and have become a crucial tool for reaching those who need urgent support but cannot access face-to-face services (Turkish Psychological Association, 2020).

In terms of prevention, the government has launched several public awareness campaigns on mental health, specifically targeting young people. One of the most prominent is the 'Gençlik ve Ruh Sağlığı' (Youth and Mental Health) campaign, which aims to educate young people about the signs and symptoms of mental disorders, encourage help-seeking, and reduce the stigma associated with mental health. This campaign includes social media materials, workshops in schools and universities, and the distribution of leaflets and other educational resources (Ministry of Youth and Sports, 2019).

The Turkish government has recognised the importance of prevention in mental health management, especially among young people, and has launched several nationwide preventive campaigns. One of the most important initiatives is the 'Senin İçin Buradayız' (We are Here for You) campaign, which focuses on preventing youth suicide and promoting emotional resilience among young people. This campaign has been implemented in collaboration with the World Health Organization and other international entities, and focuses on education and awareness raising, as well as the creation of community support networks (WHO, 2020).

Another significant campaign is 'Ruh Sağlığını Korum' (Protect your Mental Health), which aims to prevent mental disorders by promoting healthy habits and reducing stress in educational and work environments. This campaign has been supported by the Ministry of Education, which has integrated mental health components into the school curriculum, and by the Ministry of Labour, which has launched programmes to promote emotional well-being in the workplace (Ministry of Health, 2020).

In summary, the Turkish government has taken important steps to improve the mental health of young people, from strengthening the mental health infrastructure to implementing awareness-raising and prevention campaigns. However, significant challenges remain, such as the need to increase the number of professionals in the public sector and to ensure that all young people, regardless of their socio-economic status, have access to the mental health services they need. Moving forward, it is essential that these policies and programmes continue to evolve and adapt to the changing needs of Turkish youth.

ADDICTIONS IN YOUNG PEOPLE

Internet and social networks among young people





The use of the internet and social media has significantly transformed the lives of young people around the world, and Turkey is no exception. These platforms offer countless opportunities for communication, entertainment and access to information, but they also present considerable risks, particularly when their use becomes excessive or uncontrolled. In recent years, internet and social media addiction has emerged as a growing concern in Turkey, negatively affecting the mental health and general well-being of young people.

Young Turks are avid users of the internet and social media. According to the Turkish Statistical Institute (TurkStat, 2021), approximately 90% of 16-24 year olds use the internet on a daily basis, and most of them spend several hours a day on social networks such as Instagram, Twitter, Facebook and TikTok. Internet access is widespread, even in rural areas, thanks to the expansion of digital infrastructure and the accessibility of mobile devices. However, this almost unlimited access has also led to an increase in the prevalence of addictive behaviours related to the use of these technologies.

Internet and social media use among young Turks is driven by several factors, including the need to socialise, the desire for entertainment and the search for information. However, excessive use of these platforms can lead to psychological dependence, characterised by the inability to control usage time, emotional discomfort when not accessing the internet, and interference with daily activities, such as study, work or personal relationships (Young, 1998).

Internet and social media addiction has become a significant problem among young people in Turkey. This addiction manifests itself in behaviours such as compulsive need to be online, use of the internet to escape emotional problems, and loss of control over time spent online. A study conducted by Hacettepe University (2020) found that around 15% of Turkish youth can be classified as internet addicts, with an even higher percentage showing signs of problematic use.

The negative effects of internet and social media addiction on young people are numerous. These include mental health problems such as anxiety and depression, sleep disruption, decreased academic performance and deterioration of interpersonal relationships (Kuss & Griffiths, 2011). Furthermore, social media addiction is associated with low self-esteem, body dissatisfaction and exposure to risky behaviours such as cyberbullying and exposure to inappropriate content (Andreassen, 2015).

In the Turkish context, social pressure and digital culture also play an important role in exacerbating these problems. Young people often feel pressured to maintain a constant online presence and to present an idealised image of themselves on social networks, which can lead to addictive behaviours and increased emotional stress (Fardouly et al., 2015). Furthermore, the lack of adequate regulation and poor





education on responsible internet use exacerbates the situation, leaving young people vulnerable to the negative effects of excessive use of these platforms.

Recognising the growing concern about internet and social media addiction, the Turkish government and various non-governmental organisations have begun to implement programmes and campaigns to address this problem. One of the key initiatives is the 'Dijital Dengeli Yaşam' (Balanced Digital Life) campaign, launched by the Ministry of Youth and Sports in collaboration with the Technology Foundation of Turkey (TTGV). This campaign focuses on educating young people about the risks of excessive use of the internet and social media, and promoting balanced and healthy usage habits (TTGV, 2021).

In addition, programmes have been set up in schools and universities to teach students about the importance of self-control and regulation of screen time. These programmes include workshops and seminars that address topics such as digital health, time management and the development of coping skills to manage the stress associated with social media use (Ministry of Education, 2020).

In the health sector, specialised services to treat internet and social media addiction are being developed and promoted. This includes the training of mental health professionals to recognise and treat these disorders, and the creation of clinics and helplines dedicated to supporting young people struggling with these addictions (Turkish Psychological Association, 2021).

Internet and social media addiction is a growing problem among young people in Turkey, with significant consequences for their mental health and general well-being. As technology continues to play a central role in everyday life, it is crucial that proactive steps are taken to educate young people about the responsible use of these tools and to provide them with the necessary resources to prevent and treat addiction. Current initiatives, while promising, must be scaled up and sustained to effectively address this challenge in the long term.

Alcohol, drugs and gambling addiction

Addiction to alcohol, drugs and gambling represents a significant public health challenge in Turkey, especially among the young population. As the country copes with modernisation and globalisation, young Turks are increasingly exposed to risky behaviours associated with substance use and gambling. These behaviours not only have serious implications for physical and mental health, but also affect the social and economic well-being of young people and their families.

Alcohol addiction

Alcohol consumption among young people in Turkey has historically been moderate due to cultural and religious factors, as a large part of the population identifies as





Muslim, a religion that prohibits alcohol consumption. However, attitudes towards alcohol are changing, especially among young people in urban areas, where the influence of Western culture and nightlife is on the rise. According to a study conducted by Istanbul University (2020), approximately 20% of young people aged 18-24 reported having consumed alcohol in the last month, and a significant percentage of these young people experience binge drinking.

Alcohol consumption among young Turks is associated with a range of mental health problems, including depression, anxiety and behavioural disorders. In addition, excessive alcohol consumption can lead to risky behaviours, such as drink-driving, which is a significant cause of traffic accidents among young people (Turkish National Police, 2019). Despite government efforts to regulate access to alcohol through restrictions on advertising and sales, and the implementation of alcohol taxes, consumption among young people remains a problem that requires continued attention and more effective prevention strategies (WHO, 2018).

Drug addiction

Drug use among young people in Turkey is a growing concern, although rates of drug use remain lower compared to many European countries. However, the upward trend in the use of illegal substances, such as cannabis, amphetamines and opioids, has been a cause for alarm. According to a report by the General Directorate of Security (2020), 7 per cent of young Turks aged 15-24 have tried an illicit drug at least once in their lives, and regular use of these substances is increasing, particularly in large cities.

Drug addiction has devastating consequences for young people, both in terms of physical and mental health and their social and occupational integration. Young people who use drugs are at increased risk of developing mental health disorders, such as substance-induced psychosis, anxiety disorders and major depression (EMCDDA, 2020). In addition, the stigma associated with drug use in Turkey often prevents young people from seeking help, which exacerbates the situation and leads to further marginalisation.

To address the problem of drug addiction, the Turkish government has implemented several prevention and treatment programmes. These include educational campaigns in schools, early intervention programmes and the establishment of specialised rehabilitation centres. However, lack of resources and limited coverage of these programmes in rural areas remain major barriers to their effectiveness (Ministry of Health, 2020).

Gambling addiction

Gambling addiction, or pathological gambling, is another emerging problem among young people in Turkey. Although gambling is strictly regulated in the country, with





most forms of gambling banned, illegal gambling and online gambling have grown significantly. A study conducted by Ankara University (2021) found that approximately 10% of young Turks have participated in some form of online gambling in the last year, and a considerable percentage of these players show signs of addiction.

Gambling addiction can have devastating consequences, including severe financial problems, deterioration of family and social relationships, and a high risk of comorbidity with other mental disorders, such as depression and anxiety (Derevensky & Gupta, 2011). Young people addicted to gambling are also more likely to engage in illegal behaviour to finance their addiction, which places them at risk of legal and social consequences.

To combat gambling addiction, the Turkish government has launched awareness campaigns and implemented measures to block access to illegal gambling websites. In addition, helplines and psychological support services have been established for young people struggling with gambling addiction (Ministry of Youth and Sports, 2020). However, the effectiveness of these measures is limited by the rapid evolution of digital technologies, which facilitate access to online gambling through increasingly sophisticated means.

In conclusion, alcohol, drug and gambling addiction among young people in Turkey represents a major public health challenge. While the government has taken steps to address these problems, greater investment is needed in prevention, treatment and rehabilitation programmes, as well as a comprehensive approach that includes education, regulation and social support. Tackling these problems effectively is crucial to ensure the long-term well-being of young Turks and to protect future generations from the risks associated with these addictions.

6. Quiz analysis

SPAIN

Young

This analysis is based on a survey of a total of 52 young people living in different regions of Spain, aged between 18 and 30. In terms of gender, the majority of participants were women, representing 57.7% of the sample. We also inquired about the educational level of the respondents, identifying that the most common levels were a university degree and vocational training. Regarding their employment and academic status, the majority described themselves as part-time students who combine their studies with work. The aim of this questionnaire was to examine the state of mental health in the young population, as well as to analyse their coping





strategies in the face of daily challenges and to assess their perceptions of available mental health resources.

In relation to mental health experience, the results reflect that the young respondents report a considerably high level of stress. This phenomenon was measured using a scale from 1 to 5, where the predominant value was 4, indicating a high frequency of daily stress. This suggests that social factors are the main triggers of this emotional stress. In terms of anxiety symptoms, the results are even more alarming, as 76.9% of the participants reported having constantly experienced episodes of anxiety, worry or concern. This percentage highlights the prevalence of this disorder as one of the main causes of the deterioration of mental health among young people.

On the other hand, isolation and loneliness also emerged as worrying factors in this study. Almost half of the respondents, 48.1%, indicated that they had experienced isolation in the last year. This phenomenon can aggravate anxiety levels, as feelings of loneliness often make it difficult to communicate personal problems to others. In terms of seeking professional support, 50% of young people reported seeing a psychologist or other mental health specialist. This is encouraging, as it reflects a change in attitudes towards seeking professional help, leaving behind the stigma that has historically been associated with this type of practice. However, other worrying indicators were identified, such as the fact that 53.8% of respondents reported a loss of interest in previously rewarding activities, which could lead to frustration, demotivation and poor performance in activities such as study or work.

The analysis of coping strategies reveals that young people mainly use physical exercise and social interactions with friends or family to cope with stress. The results indicate that social companionship plays a key role in improving mental health, while regular practice of some kind of sporting activity was also highlighted as one of the most effective strategies. In this regard, 59.6% of respondents indicated that they exercise regularly. Despite these positive aspects, the data also reflect that a significant proportion of young people, specifically 38.5%, do not express their emotions to those close to them. In addition, 34.6% gave an ambiguous answer to this question, indicating 'maybe'. This shows a need to implement workshops and activities aimed at fostering emotional expression skills. On the other hand, results related to self-care were more favourable, with respondents showing awareness of the importance of incorporating wellness practices into their daily lives. However, this suggests that more momentum is needed in promoting specific tools to manage mental health in a holistic way.

In the area of available resources, the data reveal significant gaps. A significant majority, 61.5% of young people, stated that they were unaware of the mental health resources available in their communities. In addition, 69.2% of participants indicated that they do not use mental health-related apps, reinforcing the perception that these resources, while useful, are not sufficiently accessible or known. Despite this, young





people expressed an interest in having more activities aimed at promoting mental health, with 69.2% saying that they would like to have workshops and events related to mental health. This reinforces the idea that lack of information and accessibility to resources remains a major barrier to addressing mental health issues in this population.

The analysis of positive attitude competencies reflects a tendency towards assertive responses in situations of conflict or challenge. For example, in the hypothetical situation of being late due to traffic and causing annoyance to a friend, 51.9% of young people indicated that they would explain what happened and apologise. Similarly, when dealing with a mistake made in a group project, 65.4% of respondents said they would recognise their responsibility and commit to correcting it, demonstrating a cooperative attitude. On the other hand, in situations of social anxiety, such as giving a public speech, 40.4% said they would choose to practice several times, relax and try to remain calm, reflecting a level of self-awareness of the strategies needed to cope with such challenges. However, there are some areas where emotional management is lacking, such as responding to insults. While 38.5% stated that they would try to remain calm and deal with the situation assertively, a worrying 28.8% indicated that they would respond with an insult, suggesting a lack of emotional regulation skills in certain contexts. In other types of interactions, such as discussions with opposing views, 48.1% of participants stated that they would defend their point of view strongly, but would be willing to consider other ideas, demonstrating a capacity for assertive dialogue in most cases.

In conclusion, the results of this analysis highlight the increasing prevalence of symptoms of anxiety, social isolation and loss of interest in meaningful activities among young Spaniards. Although some participants have taken the initiative to seek professional help and employ healthy coping strategies, lack of knowledge of available resources and lack of accessibility to these resources represent important barriers to the improvement of their mental health. Finally, there is an urgent need to promote self-care activities, to encourage sport as a tool for physical and mental wellbeing, and to organise workshops to develop emotional expression and conflict management skills more effectively.

Youth Workers

The analysis was based on a survey of 30 young workers in the youth organisation sector, aged between 20 and 30 years and with work experience ranging from one month to ten years. The main objective of this study was to examine how they manage the mental health problems of the young people they work with, to assess their own perceptions and to propose solutions and initiatives to improve their organisational environment. The results allow for the identification of important patterns in attitudes, competencies and challenges faced in this area.





A significant finding^{for Youth} was that 80% of the respondents reported observing mental health problems very frequently among young people. According to the open-ended responses, these problems influence various areas of young people's lives, including their emotional, social and occupational development, as well as affecting the management of their daily activities. Among the main causes of stress or anxiety, workers pointed to uncertainty about the future, highlighting the pressure to adapt quickly to a changing environment where academic achievements do not guarantee job stability. They also identified pressure from the work and educational environment as factors that aggravate these problems, together with independence attained at later ages.

Despite the high frequency with which these problems are observed, more than half of the workers, specifically 56.7%, stated that they did not feel prepared to identify signs of mental health problems. This underlines the need to implement workshops and training programmes that empower workers to deal with these situations. When asked about the most effective strategies to help young people, responses focused on creating support networks, empathy and building safe environments that encourage the management of mental health problems. Despite these proposals, the data reflect that only 50% of respondents have collaborated with mental health professionals, indicating significant scope for strengthening cooperation in this area.

A critical aspect identified in the study is the lack of specific training in youth mental health among workers, with 66.7% of respondents stating that they had not received training in this field. This lack of training is directly linked to the difficulty in identifying and addressing the problems mentioned. Among the suggestions for improving their competences, respondents suggested awareness-raising workshops on inclusion and diversity, training in communication skills and active listening, and courses on adolescent psychology and youth development. It was also noted that 70% of workers do not use online resources or educational materials on mental health, reflecting a lack of access to or knowledge about these tools.

In terms of institutional support, the results indicated that 83.3% of respondents work in organisations that offer mental health-related programmes. However, 53.3% considered that the available resources are insufficient, which shows a gap between supply and real needs. Among the main obstacles to promoting mental health services in their work environments, workers pointed to lack of financial resources, stigmatisation of the issue, limited accessibility and misinformation. These factors represent significant barriers to ensuring adequate care for young people's needs.

When asked for suggestions to improve mental health care, respondents highlighted the importance of implementing psychologist-led workshops, programmes focused on anxiety management, community support networks and integrated services in schools. They also proposed ideas for creating more supportive and supportive environments in their organisations, such as regular meetings to address mental





health issues, flexible working policies, and the creation of listening spaces where employees can voice their concerns and receive guidance.

The questionnaire also included scenarios to assess workers' reactions. In cases of social exclusion, most respondents chose to act in an inclusive and empathetic manner. However, situations related to job burnout and stress management reflected a split in responses. While a high percentage of workers reported that they would seek support and express their concerns to their superiors, a significant proportion preferred to manage their problems individually, without seeking external help. This is evidence of a tendency to underestimate the importance of communication and support in the work environment.

In conclusion, the results of the study highlight a lack of preparedness and resources to address mental health problems in youth, despite their high prevalence. Economic, social and structural barriers limit the ability of workers and their organisations to provide adequate support. It is essential to implement ongoing training programmes, increase collaboration with mental health professionals and foster cultural change that prioritises the emotional well-being of both young people and youth workers. These actions are essential to ensure a positive and sustainable impact on the mental health of the communities they work with.

ITALY

Young

This analysis is based on a survey of young Italians aged 18-35. The data collected reflect a gender distribution in which 54.7% of participants identified themselves as male, 41.5% as female, while 3.8% preferred not to specify. Geographically, participants were evenly distributed between northern and southern Italy, with a higher representation in Bologna, Rome, Rossano and Catanzaro.

In terms of educational level, the majority of respondents reported having completed a bachelor's degree, while a significant proportion reported having completed secondary education. Lower percentages of participants with a Master's degree or PhD were also recorded. With regard to employment occupation, more than half of the respondents reported being full-time workers, followed by those working part-time, those looking for a job and, finally, students combining their studies with a part-time job.

The results revealed that young people experience high levels of stress in their daily lives, ranging from medium to high on a scale of one to five. In terms of anxiety, a significant proportion of the participants said that they were not sure whether they had experienced symptoms such as constant worry or unease, while a smaller proportion reported having experienced symptoms such as constant worry or





unease. It was also noted that a significant proportion of respondents reported losing interest in activities they previously enjoyed, although many were unclear as to whether this had occurred. Loneliness emerged as a central theme in the survey, with the majority of participants acknowledging feeling lonely, although only a minority had sought professional support through services such as therapy or counselling.

Stress coping strategies identified included practices such as meditation, mindfulness, creative activities, reading and socialising with friends and family. However, while these individual strategies are common, emotional expression remains a challenge, as a considerable proportion of respondents do not feel comfortable sharing their emotions or difficulties with others. Also, most participants recognised the importance of self-care in their lives, although a lack of knowledge about available mental health resources was evident. The majority of respondents reported being uninformed about services in their area, and an equally high proportion said they had never used mobile apps or platforms related to mental health.

Among the barriers to accessing mental health services, respondents mentioned a variety of barriers. Social stigmas, such as shame or fear of judgement, were frequently cited, as was personal reluctance to seek help. Structural barriers were also identified, such as high treatment costs, shortage of specialists and difficulties in accessing services in rural areas. Lack of family support and parents' reluctance to recognise mental health problems in their children were other relevant factors, along with limited awareness and education about mental health in general.

Interest in holding workshops or events related to mental health was highlighted by a large proportion of respondents, who noted that such initiatives could be useful in improving their well-being. On the other hand, the responses to hypothetical situations presented in the survey provided valuable information about the emotional reactions of the participants. In situations of delays or arguments, most were inclined towards conciliatory and explanation- or compromise-based responses. However, in contexts of mistakes or direct conflict, such as being insulted in public, responses varied, with some participants choosing to avoid conflict while others would react more confrontationally.

In conclusion, the survey results reflect a significant prevalence of stress, loneliness and emotional challenges among young Italians, along with a low utilisation of mental health resources. Social, economic and structural barriers hinder access to these services, while the interest shown in mental health-related activities underlines the need to design specific interventions that promote knowledge, access and the elimination of prejudices around this issue.



Youth Workers

The questionnaire explored the perceptions and experiences of youth workers in the mental health field, highlighting roles as educators, academic counsellors, family mediators and community workers. The majority of respondents were in roles as educators, learning specialists or counsellors, accounting for 7.7% of the total. Others had roles as mediators, coaches or group leaders, with smaller percentages.

In terms of workplaces, the largest proportion, 7.7%, worked in ministries and mediation centres, followed by those working in recreation centres, school institutions, community centres and psychology institutes, each accounting for about 5%. A smaller group worked in youth associations, cultural centres and municipalities. The majority of the respondents have significant work experience in the field, with an average of between six and eleven years, the minimum being two years and the maximum twelve years.

64.1% of the respondents stated that they frequently observed mental health problems in the young people they work with, while 28.2% said they did so occasionally, and only 7.7% said they rarely detected such problems. According to the participants, mental health has a determining impact on the overall well-being of young people, considering it essential for harmonious development, personal growth, emotional well-being and prevention of future problems. In addition, they noted that it influences the ability to cope with challenges, school and work success, physical health, self-esteem and interpersonal relationships.

The main causes of stress or anxiety among young people were identified as time management difficulties, excessive use of social networks, problems adapting to the school environment, stress arising from the pandemic, self-esteem problems, bullying or cyberbullying, performance anxiety, social isolation and insecurities related to the future. Family problems, eating disorders, overload of extracurricular activities, peer pressure, financial problems, unrealistic expectations and difficulties in interpersonal relationships were also mentioned.

20.5% of respondents stated that they did not feel sufficiently prepared to identify signs of mental health problems in young people, while only 2.6% said they felt empowered and 76.9% expressed uncertainty. Strategies found to be effective in supporting young people included tutoring and mentoring programmes, group activities to encourage socialisation, workshops on time and goal management, promotion of meditation and mindfulness, counselling services, art therapy workshops and mental health education programmes. Other approaches mentioned were outdoor activities, contact with nature, active listening and emotional support, promotion of physical activity and peer support programmes.

In relation to training received, most participants stated that they had worked with health professionals in youth care, but few reported having received specific training



in youth mental health. Suggestions for improving competences in this field included workshops on mental health and social networks, courses on bullying prevention, training in art therapy and music therapy, seminars on emotional management and mediation techniques, and workshops on resilience, self-esteem and mindfulness. 84.6% of respondents reported using online resources or educational materials to learn about youth mental health, while 7.7% indicated that they did not or were unsure.

61.5% of participants stated that their organisation does not offer specific resources or programmes for youth mental health, and 74.4% considered the support provided to be insufficient. Barriers to advocacy and service provision included poor staff training, lack of financial resources, bureaucracy, social stigma and limited interdisciplinary collaboration. Lack of specialists and limited institutional support were also mentioned as factors hindering the implementation of effective programmes.

Among the proposals for improving youth mental health care at the community level, respondents suggested free counselling services, integration of mental health into education, recreational and sports activities, mental health helplines and awareness-raising campaigns. To create a more inclusive and supportive environment in their organisations, they recommended zero tolerance policies towards bullying, flexible working arrangements, safe spaces for listening, team building activities and regular wellness meetings.

In hypothetical situations, such as when a young person feels marginalised by colleagues during an activity, most respondents indicated that they would approach the young person for inclusion and support. If they felt that overtime was affecting their personal life, most would choose to communicate their concern to their manager and seek solutions, while others would continue to work without expressing their discomfort. Faced with pressure to complete a major project after a personal problem, responses were split between prioritising meeting the deadline without mentioning the problem and seeking solutions by communicating it to the team. Finally, when faced with physical and mental exhaustion from multiple projects, most indicated that they would continue working without seeking support, although others indicated that they would talk to their supervisor to reduce their workload temporarily.

The analysis highlights a significant need to strengthen youth mental health competencies among professionals, as well as to implement specific resources and programmes in organisations. Economic, social and structural barriers continue to limit access to appropriate services, while interest in innovative and collaborative approaches underscores the importance of addressing these challenges in a holistic manner.



Young

This report analyses the results of a survey designed to assess the relationship of young Romanians to mental health issues, exploring their coping mechanisms for stress and their reactions in hypothetical situations. The sample consisted of participants aged between 14 and 24, with a majority concentrated in the 15-18 age range. In terms of gender distribution, 43.1% of participants identified themselves as female, 48.3% as male (including 1.7% who declared themselves to be a trans man) and 1.7% identified themselves as non-binary, while 6.9% preferred not to specify their gender.

Geographically, participants were mostly concentrated in the Caraş-Severin region (89.6%), especially in the city of Reşiţa, which accounted for 86.2% of this percentage. A minority group indicated Caransebeş as their place of residence (1.7%), while another 1.7% did not specify their location within the region. The remaining 10.4% came from other parts of Romania, with 1.7% coming from Timişoara (in Timiş County), while the rest simply stated their country or city without further detail.

In terms of educational level, participants showed a wide diversity. The majority indicated that they were pursuing or had completed secondary education (79.3%), followed by 8.6% who completed a Master's degree and 6.9% who completed a Bachelor's degree. A smaller percentage (3.4%) reported having completed only primary education. In terms of employment, 70.7% of respondents identified themselves as full-time students, while 10.3% worked full-time and 1.7% part-time.

On receiving information or support related to mental health, 58.6% of young people said they had received it, compared to 41.4% who indicated the opposite. However, the results reflect a high level of stress in everyday life, with 34.5% placing their daily stress level at 4 on a scale of 1 to 5. Only 5.2% described a low level of stress (1). In relation to anxiety, 60.3% reported experiencing episodes of anxiety, while 20.7% gave an ambiguous answer ('maybe') and 19% reported not having experienced anxiety. This tendency seems to be associated with a loss of interest in pleasurable activities, reported by 51.7% of respondents. However, 22.4% stated that this had not happened to them, and 25.9% stated that it had happened occasionally.

The survey also asked about feelings of loneliness, and the results revealed that 72.4 per cent of young people have experienced this. Only 17.2% responded negatively and 10.3% responded ambiguously. This contrasts with the willingness to seek professional help, as only 31% of the participants reported having sought such support, while 69% said they had not.



Among the methods^{for Youth} used to relieve stress, socialising with friends and family was the most popular option, selected by 63.8% of respondents. Other activities such as creative hobbies (48.3%), reading (32.8%) and physical exercise (29.3%) were also frequently mentioned. However, methods such as sleep, introspection or recreational activities such as music and video games were selected by only 1.7% of the participants. In relation to the regular practice of sport, 39.7% stated that they do not practice sport, while 31% indicated that they do.

When addressing the expression of emotions, 55.2% of young people indicated that they felt comfortable sharing their feelings, while 24.1% responded that they did not feel comfortable doing so. On the other hand, although the majority considered self-care to be important, there was a tie in the level of knowledge about available mental health resources: 39.7% indicated that they were aware of them, while an equal percentage said the opposite. 20.7% responded that they were not sure. Also, a large majority (69%) stated that they had never used mobile applications or online platforms related to mental health.

In terms of barriers to accessing mental health services, respondents pointed to three main obstacles. The first is the persistence of stereotypes related to the topic, both personal and external, manifested in emotions such as fear or shame. The second is the difficulties of accessibility, related to high costs or the resistance of parents who do not perceive the relevance of these problems. Finally, the quality of the system was pointed out, including the lack of trained and accessible professionals. However, when asked if they would like more workshops related to mental health, 50% said yes, compared to 31% who were unsure and 19% who disagreed.

In relation to reactions to different scenarios, interesting patterns were identified. In the case of being late for an appointment due to traffic, the majority chose to explain the situation and apologise, followed by those who would feel guilty and offer a sincere apology. In the context of a discussion with a colleague about a group project, most expressed that they would listen to their point of view and try to find common ground. In the case of making a mistake in an important task, most would acknowledge their error and commit to correcting it. Finally, in situations of conflict, such as being insulted in public, responses were divided between trying to remain calm and manage the situation assertively or feeling hurt and avoiding responding, trying to avoid conflict.

In conclusion, the results reflect high levels of stress and anxiety among young Romanians, along with significant feelings of loneliness. Although many seek support from their social networks or employ individual coping strategies, there are significant barriers to accessing professional resources, including stigma, costs and system limitations. The survey highlights the importance of increasing accessibility to mental





health services, strengthening mental health education and encouraging workshops that promote emotional management and self-care among young people.

Youth Workers

The questionnaire explored youth workers' perspectives on mental health, identifying their perceptions, experiences and strategies for addressing mental health problems. Participants came from a variety of roles, with youth workers accounting for 42%, followed by teachers at 18%. Other roles included psychologists, CEOs, analysts, presidents and independent consultants. In addition, there were positions in non-governmental organisations, educational centres and other community institutions.

In terms of workplace, respondents belonged to a wide variety of institutions, ranging from associations and educational centres to foundations and local programmes. Approximately 42% of the participants worked in the counties of Timiș and Caraș-Severin, while a smaller percentage came from other regions such as Bucharest and Cluj. Participants' work experience ranged from one month to 27 years, with an average of 10 years, reflecting a significant diversity in terms of career path.

The majority of respondents reported detecting mental health problems among young people frequently, while a smaller proportion reported observing them occasionally. No one reported never having identified such problems. According to the participants, mental health has a determining impact on young people's overall well-being, influencing their personal development, emotional stability and social skills. It was highlighted that deteriorating mental health can correlate with social isolation, constant anxiety and a reduced ability to perform everyday tasks. Among the external factors that exacerbate these problems, participants pointed to exposure to violence, substance abuse and risky situations as critical factors that can lead to extreme decisions such as suicide.

The main causes of stress and anxiety in young people include academic pressure, social expectations, economic insecurity, excessive use of social networks and family problems. Some participants highlighted the influence of an unstructured school environment, dysfunctional family dynamics and lack of adult guidance as key elements. In addition, constant comparison and unrealistic expectations promoted by social media were highlighted as amplifying anxiety and self-esteem issues in young people.

When asked about their preparedness to identify mental health problems, the majority of respondents expressed uncertainty, while a significant percentage said they felt prepared. However, a minority indicated that they did not feel sufficiently trained. Effective strategies to support young people included referral to mental health professionals, creating a safe environment and teaching coping skills. Other methods highlighted were implementing mental health workshops, promoting self-care and providing spaces where young people can express themselves freely.





Participants stressed the importance of actively listening to young people and normalising conversations about mental health.

Although more than half of the respondents indicated that they had collaborated with mental health professionals, only a small percentage had received specific training in this area. Suggestions for further training included seminars on therapeutic techniques, cultural competency, LGBTQ+ affirmative practices and understanding neurodiversity. The need for continuous learning through conferences, practical workshops and case studies was also highlighted.

Most respondents use online resources and educational materials to learn about youth mental health, but identified significant barriers to promoting services in their work settings. Among the most frequently mentioned barriers were lack of financial resources, shortage of specialists, social stigma and lack of institutional interest. It was also noted that conservative mentalities in some communities and bureaucracy make it difficult to implement effective programmes.

To improve mental health care at the community level, participants proposed integrating programmes in schools, creating safe and anonymous spaces to discuss these issues, and conducting activities that promote confidence and self-esteem. Other initiatives suggested included helplines operated by professionals, community support groups and awareness-raising campaigns. In terms of organisational strengthening, staff training, incorporating mental health professionals into institutions and fostering a culture of empathy and flexibility were suggested.

The questionnaire also explored responses in hypothetical scenarios. The majority indicated that they would act inclusively and empathetically in cases of social exclusion. In situations of job burnout or deadline stress, respondents prioritised communicating with their supervisors and finding solutions. In general, responses emphasising the importance of addressing problems in a proactive and collaborative manner were highlighted.

The results underline the need for more mental health training for youth workers, as well as the implementation of adequate and accessible resources. Overcoming the identified barriers requires a holistic approach that combines vocational training, community awareness and structural support, with the aim of improving the well-being of young people and their communities.

TURKEY

Young

Personal data and sample definition





The questionnaire was answered by a total of 50 young people, aged between 17 and 29. The majority of the respondents were 19, 22 and 23 years old, each of these groups representing 14% of the sample. In terms of gender distribution, women made up 76% of participants, while men accounted for 24%, showing a significant imbalance in participation by gender.

Geographically, participants came from a variety of cities, although the majority came from Istanbul, with 28 respondents. Ankara came second with 5 participants, followed by Izmir and Yalova with 2 each. Smaller representations from Aydın, Bursa, Edirne, Izmit and Ordu were also included, as well as an additional mention of Yalova.

In terms of educational level, 76% of respondents had completed a university degree, while 6% held a Master's degree. Secondary school graduates accounted for 8%, and those with a lower secondary education certificate accounted for 4%. In addition, 1% reported to be studying at university, to have received vocational training or to hold a doctoral degree in medicine.

Mental health experience

The data show that 54% of the participants had received information or support related to mental health, while 46% indicated that they had not. In terms of occupation, the majority, 56%, were full-time students, followed by 26% who worked full-time. Those combining studies and part-time work accounted for 8%, while 6% were seeking employment and 2% worked as tutors twice a week.

Daily stress was reported as high by the majority of participants. Half of the respondents rated their daily stress level as 4 on a scale of 1 to 5, and 18% placed it at the maximum level of 5. 22% reported a moderate level of stress, with a score of 3, while 10% indicated low levels of stress (2). In relation to anxiety symptoms, 60% confirmed having experienced constant worry or uneasiness, while 32% responded with 'maybe', reflecting uncertainty, and only 8% denied having such symptoms.

Worryingly, 64% of respondents reported feeling a persistent lack of interest or pleasure in activities they previously enjoyed. While 24% indicated uncertainty about this, 12% reported no change in their interest in activities. Also, 70% reported feeling lonely or isolated at some point in the last year, compared to 20% who denied such feelings and 10% who were unsure.

Coping strategies

Methods of stress relief were varied. Socialising with friends and family was the most prominent strategy, used by 94% of participants. Other methods included creative hobbies (58%), physical exercise (48%), reading (44%) and meditation or mindfulness (30%). Less common methods, such as walking, dancing, listening to





music, sleeping or problem solving, were mentioned by 2% of respondents. One participant commented that, although activities such as playing the piano or socialising are often beneficial, they can also generate stress in certain circumstances, highlighting the complexity of these practices.

In terms of physical exercise, 42% of respondents said that they regularly exercised, while 40% did not, and 18% were uncertain about the regularity of their physical activity.

Emotional expression and self-care

56% of respondents reported feeling comfortable expressing their emotions with people close to them, while 16% did not and 28% expressed ambivalence. The importance of self-care was recognised by the majority, with 70% rating it a 4 or 5 on a scale of relevance. However, knowledge of available mental health resources was limited, with only 48% indicating awareness of these services, compared to 34% who responded 'maybe' and 18% who were not aware of them.

Use of digital tools related to mental health was low. Only 20% reported having used mobile apps or online platforms, while 76% reported not having used them, and 4% were unsure.

Barriers to accessing mental health services

Barriers to accessing mental health services are linked to economic, social and personal challenges. High costs of therapy and financial difficulties were identified as key barriers. In addition, social and cultural stigma, including fear of judgement from others, represents a major impediment to seeking help. Lack of knowledge about available services and difficulty in finding the right professional were also problems mentioned, along with lack of time, especially among students and young professionals. Personal fear and embarrassment were other reasons cited by respondents. Some also highlighted structural constraints related to government policies and insufficient resources.

Interest in mental health initiatives

A significant majority of 82% of respondents expressed support for more mental health-related events or workshops in their community. An additional 18% showed potential interest in these initiatives, and no negative responses were recorded.

Reactions in hypothetical situations

In case of being late for an appointment due to traffic, most expressed that they would apologise, either out of frustration or guilt. In discussions related to group projects, participants preferred to seek a compromise or defend their position openly. When faced with mistakes that affect the group, most indicated that they would





acknowledge the mistake and work to correct it. Finally, in conflict situations, such as receiving a public insult, participants chose to remain calm or avoid responding, while a minority chose to confront the aggressor.

Conclusion

The analysis reveals high levels of stress and isolation among the young respondents, along with limited acceptance of professional mental health resources. Economic, social and personal barriers restrict access to these services, while individual coping methods such as socialising and exercise are widely used. The need for educational initiatives and workshops related to mental health is evident, with significant support from participants, underlining the urgency of addressing existing barriers and fostering a supportive culture towards mental wellbeing.

Youth Workers

The analysis of the questionnaire was carried out with the participation of youth workers who play diverse roles within organisations focused on supporting young people. Among the respondents, the predominant roles include participation in project teams, social teams and social networking teams, as well as administrative and legal tasks. 25% of the respondents have non-specific roles as youth workers, while 78.6% collaborate on a voluntary basis with non-profit organisations. Participants' experience ranged from one month to 11 years, with an average of 2 to 4 years, reflecting a mix of perspectives from both novices and experienced professionals in the sector.

The data reveal that 37.04% of workers frequently observe mental health problems among young people, while 51.85% notice them occasionally and only 11.11% perceive them rarely. This distribution suggests that although mental health problems are common, they are not always evident or consistent in the experiences of youth workers. According to respondents, mental health has an integral impact on young people's well-being, affecting emotional, physical, social and academic aspects. Mental health problems can negatively influence motivation, ability to work in a team and communication skills, as well as lead to difficulties in concentrating and completing tasks. These difficulties are also associated with changes in sleep, appetite and the strength of the immune system, highlighting their connection to physical health.

Among the main causes of stress and anxiety identified are economic concerns, such as financial instability and unemployment, especially in contexts of economic crisis. Added to this are academic pressure, social and family expectations, problems in personal relationships and the impact of technology and social networks. The latter not only intensify social comparisons, but also expose young people to a constant flow of negative information, increasing the sense of uncertainty. Other





factors such as challenges related to identity, self-esteem and the transition to adulthood also emerged as sources of anxiety.

Despite the importance of these issues, only 53.6% of respondents felt prepared to identify signs of mental health problems, while 46.4% expressed uncertainty. This reflects a significant need for training in this area. Among the strategies suggested to address these problems, participants highlighted the creation of supportive environments that encourage open and non-judgmental communication, as well as community activities that promote social interaction. The promotion of healthy lifestyles was also proposed, including activities such as meditation, physical exercise and the adoption of stress-reducing hobbies. Respondents stressed the importance of providing safe spaces for young people to express their emotions and develop coping skills, such as relaxation techniques and mindfulness. They also recommended encouraging access to professional help through referral to psychologists or psychotherapists when necessary.

In terms of training, the majority of respondents have not received specific training in youth mental health, with 64.3% confirming this compared to 28.6% who have received such training. The most requested training areas include adolescent psychology, psychological first aid, stress management techniques and specific therapeutic approaches such as crisis intervention and cognitive behavioural therapy. In addition, participants highlighted the need for interdisciplinary training combining mental health, education and social work.

A positive aspect is that 71.4% of respondents use online resources or educational materials to inform themselves about youth mental health, although 28.6% do not or are unaware of the existence of such resources. However, only 50% of respondents stated that their organisations offer specific programmes to address youth mental health, and 35.7% consider the support provided to be insufficient. The main barriers to the promotion of these services include lack of financial resources, shortage of trained professionals, stigmatisation of mental health problems and lack of awareness of their importance.

To improve youth mental health care at the community level, participants suggested free psychological support programmes, awareness campaigns, community workshops and school projects focusing on meditation and stress management. The implementation of telemedicine services to increase access and the creation of peer-led support groups to encourage the exchange of experiences and mutual support were also proposed.

The responses to the scenarios in the questionnaire reflect a variety of approaches. In a case of social exclusion, the majority of participants indicated that they would approach the young person to include him/her in the activity, while a minority would choose to ignore the situation. In contexts of job burnout or anxiety, the majority





expressed that they would seek support from colleagues or supervisors, although a considerable proportion preferred to manage these situations individually, which could indicate an underestimation of the importance of communication in the work environment.

The analysis highlights the need for more targeted and accessible training for youth workers, as well as the importance of creating organisational environments that prioritise mental wellbeing. Implementing strong support programmes, removing stigma and promoting a culture of awareness and care are essential steps to address the challenges identified and foster a positive impact on the mental health of young people and their communities.

7. Analysis of the focus groups

Italy

In the analysis of the three focus groups focusing on positive and negative thinking in the digital world, the opinions and experiences of young people and youth workers about the impact that digital platforms have on their lives were explored. These discussions identified both the benefits and challenges associated with digitalisation and shed light on how these tools influence participants' emotional and social wellbeing.

One of the central ideas that emerged in the discussions was the ability of the digital environment to facilitate meaningful connections, especially in contexts where geographical barriers limit interactions. Participants valued the possibility of





strengthening personal and professional relationships through social networks, as well as access to like-minded communities that offer a sense of belonging and emotional support. This was especially relevant during the COVID-19 pandemic, when these platforms acted as essential spaces to combat isolation. Digital tools were also seen as valuable resources for promoting self-care and wellbeing, with examples such as meditation apps, podcasts and educational content contributing to personal and professional growth. In addition, digital platforms have democratised content creation, allowing young people to express their creativity through activities such as video editing or music production, which enhances their artistic and personal development.

However, the analysis also revealed important concerns related to the use of these platforms. One of the most frequently mentioned issues was the creation of toxic online environments, where hate, misinformation and, in some cases, manipulation of users' opinions are encouraged. Participants noted that cyberbullying is a persistent threat, with personal experiences illustrating the negative impact of abusive behaviour on platforms such as Instagram and TikTok. These experiences, according to testimonies, generate anxiety, stress and, at times, feelings of powerlessness due to the perception that the mechanisms to combat this problem are insufficient.

Another recurring theme was the phenomenon of constant comparison. Young people expressed that social networks tend to show an idealised version of life, which can lead to feelings of personal dissatisfaction and negatively affect self-esteem. This aspect was related to the social pressure to maintain a 'perfect' image, which generates significant emotional exhaustion, especially in a context where uninterrupted connectivity is perceived as a social demand. Participants explained that feeling 'compelled' to always be online to keep up with what is happening in the digital environment contributes to a state of continuous stress.

Algorithms that control content on social networks were also discussed. It was pointed out that these systems tend to create information bubbles that reinforce pre-existing beliefs and limit exposure to diverse viewpoints. This not only fuels misinformation, but also intensifies social polarisation. In addition, participants indicated that the design of the platforms, especially the focus on short, quickly consumed content such as TikTok, affects the ability to concentrate and encourages more superficial information consumption habits.

Throughout the discussions, participants proposed various strategies to mitigate the negative effects of using digital tools. Among the most prominent ideas was the promotion of self-control habits, such as setting specific times for the use of social networks and using ad blockers to avoid unwanted content. The need for influencers and content creators to take an active role in promoting mental health by showing more authentic images of everyday life and addressing issues such as anxiety and





depression from an educational perspective was also emphasised. It was highlighted that these figures have the potential to positively influence their audiences if they prioritise content that promotes wellbeing over commercial interests.

The analysis concludes that while the benefits of digital platforms are indisputable, especially in terms of connectivity and access to resources, they also present significant risks that need to be addressed. Participants expressed a clear desire to promote healthier digital practices, including both education on the responsible use of technology and initiatives to create safer and more authentic online environments. This study highlights the urgent need to develop policies and programmes that encourage a balanced use of digital technologies, ensuring that the digital world is a space that contributes to the holistic well-being of young people and not a source of stress and anxiety. The implementation of these measures is essential to build a more inclusive, positive and enriching digital environment.

Romania

The analysis of the three focus groups on positive and negative thinking in the digital world provides insight into the perceptions and experiences of young people and youth workers regarding the impact of digital platforms on their lives. The discussions revealed a diversity of opinions, highlighting both the benefits and risks associated with the use of these tools in an increasingly connected context.

One of the most recurrent points in the conversations was the potential of digital platforms to facilitate meaningful connections and strengthen personal and professional relationships. Participants noted that these tools make it possible to overcome geographical barriers and access like-minded communities, which can foster a sense of belonging and emotional support. For example, applications and social networking groups were mentioned that allow users to find people with similar interests, such as travel groups or educational communities. Likewise, during the COVID-19 pandemic, digital tools played a key role in maintaining continuity of education and social relationships, being seen as a key resource for resilience in difficult times.

In addition, it was highlighted that digital platforms can contribute to personal wellbeing and professional development when used consciously. Resources such as podcasts, self-care videos and meditation apps were valued for their ability to provide mental health guidance and self-care strategies. Participants also recognised the value of digital tools for creative expression, such as editing videos on TikTok or creating content on platforms such as Instagram, which offer opportunities to develop and share skills.

However, the discussions also reflected significant concerns about the negative effects of the digital world. Cyberbullying emerged as one of the most frequently





mentioned issues, with testimonies from participants who witnessed or were victims of negative comments and abusive behaviour on platforms such as TikTok. These experiences generated feelings of anxiety and hopelessness, accentuated by the perception that preventing or mitigating this type of behaviour is complicated. Another recurring theme was the proliferation of misinformation and manipulation of opinions, which participants felt is exacerbated by algorithms that limit exposure to diverse viewpoints and reinforce content bubbles.

Constant comparison on social media was also widely discussed. Participants described how platforms often present idealised images of life, which can negatively affect self-esteem and encourage critical self-evaluation. This pressure to maintain a perfect image was associated with emotional exhaustion and the feeling of being 'forced' to stay connected in order not to fall behind socially. The need to constantly keep up with digital updates and interactions was perceived as a major source of stress, having a negative impact on mental health.

Also, the consumption of short, highly stimulating content, such as videos on TikTok, was identified as a factor contributing to distraction and hindering the ability to concentrate. Participants expressed that this engagement-oriented design promotes instant gratification, which can be detrimental to mental balance. Furthermore, it was discussed how a lack of clarity in digital communication, especially in text messaging, can lead to misunderstandings and increased anxiety in social interactions.

In terms of strategies to mitigate the negative effects, participants proposed several practical solutions. Creating schedules to limit the use of social networks, using ad blockers and targeting content with specific hashtags were some of the suggestions highlighted. The importance of influencers and content creators taking an active role in promoting mental health by providing more authentic portrayals of everyday life and sharing useful resources on issues such as anxiety and depression was also emphasised. Participants noted that these public figures have the power to positively influence their audiences if they prioritise educational and realistic content rather than exclusively pursuing commercial goals.

The analysis concludes that while digital platforms offer undeniable benefits in terms of connectivity and access to resources, they also present challenges that require attention. Constant exposure to digital content can affect emotional well-being, while issues such as cyberbullying, social comparison and manipulation of information underline the need to promote a more conscious and balanced use of these tools. Participants expressed a clear interest in promoting healthy digital practices and proposed the implementation of educational programmes and policies that prioritise wellbeing in the digital environment. This study highlights the urgency of addressing these concerns through initiatives to ensure a safe and nurturing digital environment that supports the holistic development of young people and youth workers.





The three focus group sessions with young social science students provided a detailed insight into perceptions of the digital environment, exploring both the benefits and challenges it poses. Discussions addressed issues related to the psychological implications of social media use and the changes in the dynamics of social interaction that social media have brought about. Throughout the discussions, participants analysed how digital platforms have transformed their lives, highlighting concerns about the negative effects on mental health as well as the benefits derived from their appropriate use.

A recurring theme across all groups was concern about the adverse impact of social media, particularly on the mental health of younger users. Participants noted that the ease with which digital platforms allow the spread of misinformation contributes to a distorted perception of reality, generating a culture of mistrust and polarisation. Social media, when not properly regulated, become a vehicle for the dissemination of fake news and conspiracy theories, with serious social and political implications. In addition, it was highlighted how these platforms encourage cyberbullying and online bullying, facilitated by the anonymity of the internet, which exacerbates the emotional and psychological impact on victims. Young people indicated that online bullying is amplified by the difficulty in regulating these behaviours and the lack of effective mechanisms to sanction them.

Another concern expressed was the exposure of minors to the internet and inappropriate content. Participants pointed out that early exposure to digital devices generates an overload of stimuli that interferes with the emotional and social development of children and adolescents. In particular, concerns were raised about access to inappropriate material, such as pornography, which can distort perceptions of relationships and foster insecurities. Discussions reflected widespread concern about the impact of this uncontrolled exposure, emphasising the need for limits and supervision in the use of these technologies by minors.

Participants also reflected on how social networks influence the dynamics of validation and self-image. The tendency to prioritise the capture and publication of experiences over authentic experiences was discussed, reflecting a constant need for external approval and validation. This practice was seen as a reflection of the impact of the digital world on personal motivations, affecting the ability to fully enjoy everyday moments. In addition, it was highlighted how the constant comparison with idealised images of life on social networks, where the positive predominates and difficulties are hidden, can generate insecurities and affect users' self-esteem.

Despite these criticisms, young people also recognised the positive aspects of the digital world. One of the most prominent benefits was the ability of social networks to connect people from different backgrounds, creating a sense of community and





facilitating cultural exchange. These platforms were valued for their ability to offer emotional and social support, especially to those who feel isolated in their physical environments. The digital environment was also recognised for its educational value, providing access to resources that enable autonomous learning and the development of professional skills.

Young people also highlighted the convenience that the digital environment offers in managing work and leisure activities, maximising time and resources. In addition, digital entertainment was valued as a tool that fosters empathy and intercultural understanding by offering access to different perspectives. Another benefit noted was the ability to preserve memories and experiences through social networks, allowing for sharing meaningful moments with others, even at a distance.

In the final phase of the discussions, participants proposed solutions to mitigate the negative effects of the digital world and enhance its benefits. Among the most prominent recommendations was the need to raise awareness of the mental risks associated with excessive use of social networks, emphasising the importance of educating users about their impact on mental health. Stricter controls to protect minors from inappropriate content, such as identity verification on digital platforms, were also suggested.

Finally, participants agreed on the importance of educating new generations to use digital technologies more safely and responsibly, involving both parents and young people in this task. This educational approach, combined with policies that prioritise online safety, was considered essential to ensure a more balanced digital environment. The discussions underlined the urgency of addressing these issues through initiatives that promote a conscious and healthy use of digital platforms, ensuring that these tools enrich young people's lives rather than becoming a source of stress and anxiety.

Turkey

The analysis of the three focus groups organised in the framework of the WPAY T2.3 EIG study provided a broad and nuanced perspective on the relationship between young people and the digital environment, with particular emphasis on the implications for mental health, social skills and privacy. Participants, mostly young university students and professionals from diverse backgrounds, explored both the benefits and challenges of using digital platforms in everyday life.

Participants recognised that social networks act as a double-edged sword. On the one hand, they valued their ability to maintain connections with distant friends and family, as well as to foster supportive communities that promote creativity and psychological well-being. Some underlined how digital spaces allow for self-expression and offer opportunities to learn new skills and engage in creative





activities. However, they also pointed out that these platforms can generate constant comparisons that affect self-esteem, due to the pressure to maintain an impeccable image online.

One of the recurring themes was the distortion of reality generated by social media. Participants explained how these platforms often present an idealised version of life, leading to unrealistic expectations and dissatisfaction with one's own life. This phenomenon is exacerbated by the influence of content creators and influencers, whose lifestyles are perceived as inaccessible and, in many cases, unrealistic. The need to project a perfect image contributes to feelings of anxiety and social pressure.

The impact on interpersonal skills was also widely discussed. Participants stated that while digital platforms facilitate communication, they do not eliminate the need for face-to-face interactions. In fact, some indicated that reliance on digital communication can weaken key social skills, such as active listening and empathy, making personal relationships in the physical world more difficult. In addition, concerns were raised about overly digitised socialisation, which can lead to social anxiety and affect confidence when interacting in person.

Another prominent theme was privacy concerns. Participants noted that the use of social networks implies a loss of control over personal data, which raises concerns about how this information is collected and used. Some admitted to limiting their activity on certain platforms to protect their privacy, while others chose to avoid specific social networks altogether. This concern underscores the importance of understanding privacy settings and the impact of the digital footprint on future opportunities.

Despite these challenges, participants recognised the usefulness of social networks in creating value when used thoughtfully and critically. They proposed practical solutions to mitigate the negative effects, including the promotion of digital literacy workshops to teach young people how to manage their privacy and safely navigate online content. They also suggested the need for digital detox programmes to reduce anxiety and promote mental wellbeing. Such regular breaks from social networks could help users to re-establish a balance between digital and offline life.

Participants expressed a common interest in developing strategies to improve their social skills and strengthen their interpersonal relationships. This included recommendations to combine digital interactions with face-to-face activities that encourage face-to-face communication and the development of social skills. In addition, they highlighted the need to educate young people about the importance of conscious use of digital platforms, emphasising self-regulation and critical consumption of online content.

In conclusion, the focus groups revealed a complex relationship between young people and the digital world. While recognising the benefits of digital platforms,





especially in terms of connectivity and access to resources, they also identified significant risks, such as the impact on mental health, social anxiety and privacy concerns. These discussions underline the importance of designing resources and strategies that support young people in overcoming these challenges in a positive and proactive way. The analysis highlights the need for educational initiatives and policies that promote a balanced and conscious use of social media, ensuring that the digital environment serves as a space for personal and social growth rather than becoming a source of stress and pressure.

References

- Arnett, J. J. (2000). Emerging adulthood: A theory of development from the late teens through the twenties. *American Psychologist*, 55(5), 469-480. <https://doi.org/10.1037/0003-066X.55.5.469>
- Bar-On, R. (2006). The Bar-On model of emotional-social intelligence (ESI). *Psicothema*, 18, 13-25.
- Batson, C. D., Lishner, D. A., Cook, J., & Sawyer, S. (2005). Similarity and nurturance: Two possible sources of empathy for strangers. *Basic and Applied Social Psychology*, 27(1), 15-25.
- Baumeister, R. F., Campbell, J. D., Krueger, J. I., & Vohs, K. D. (2003). Does high self-esteem cause better performance, interpersonal success, happiness, or healthier lifestyles? *Psychological Science in the Public Interest*, 4(1), 1-44. <https://doi.org/10.1111/1529-1006.01431>
- Baumeister, R. F., Smart, L., & Boden, J. M. (1996). Relation of threatened egotism to violence and aggression: The dark side of high self-esteem. *Psychological Review*, 103(1), 5-33. <https://doi.org/10.1037/0033-295X.103.1.5>
- Berry, J. W. (1997). Immigration, acculturation, and adaptation. *Applied Psychology*, 46(1), 5-34. <https://doi.org/10.1111/j.1464-0597.1997.tb01087.x>
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77-101. <https://doi.org/10.1191/1478088706qp063oa>





- Carlo, G., Mestre, M. V., Samper, P., Tur, A., & Armenta, B. E. (2010). Feelings or cognitions? Moral cognitions and emotions as longitudinal predictors of prosocial and aggressive behaviors. *Personality and Individual Differences*, 48(7), 872-877. <https://doi.org/10.1016/j.paid.2010.02.010>
- Compas, B. E., Connor-Smith, J. K., Saltzman, H., Thomsen, A. H., & Wadsworth, M. E. (2001). Coping with stress during childhood and adolescence: Problems, progress, and potential in theory and research. *Psychological Bulletin*, 127(1), 87-127. <https://doi.org/10.1037/0033-2909.127.1.87>
- Davis, M. H. (1983). Measuring individual differences in empathy: Evidence for a multidimensional approach. *Journal of Personality and Social Psychology*, 44(1), 113-126. <https://doi.org/10.1037/0022-3514.44.1.113>
- De Waal, F. B. M. (2008). Putting the altruism back into altruism: The evolution of empathy. *Annual Review of Psychology*, 59(1), 279-300. <https://doi.org/10.1146/annurev.psych.59.103006.093625>
- Decety, J., & Jackson, P. L. (2004). The functional architecture of human empathy. *Behavioral and Cognitive Neuroscience Reviews*, 3(2), 71-100.
- Deci, E. L., & Ryan, R. M. (1985). *Intrinsic motivation and self-determination in human behavior*. Springer.
- Diener, E., Lucas, R. E., & Oishi, S. (2017). Advances and open questions in the science of subjective well-being. *Collabra: Psychology*, 3(1), 15. <https://doi.org/10.1525/collabra.40>
- Diener, E., Suh, E. M., Lucas, R. E., & Smith, H. L. (1999). Subjective well-being: Three decades of progress. *Psychological Bulletin*, 125(2), 276-302. <https://doi.org/10.1037/0033-2909.125.2.276>
- Durlak, J. A., Weissberg, R. P., Dymnicki, A. B., Taylor, R. D., & Schellinger, K. B. (2011). The impact of enhancing students' social and emotional learning: A meta-analysis of school-based universal interventions. *Child Development*, 82(1), 405-432. <https://doi.org/10.1111/j.1467-8624.2010.01564.x>
- Eisenberg, N., & Spinrad, T. L. (2004). Emotion-related regulation: Sharpening the definition. *Child Development*, 75(2), 334-339.
- Eisenberg, N., & Strayer, J. (Eds.). (1987). *Empathy and its development*. Cambridge University Press.
- Eisenberg, N., Fabes, R. A., & Spinrad, T. L. (2006). Prosocial development. In W. Damon & R. M. Lerner (Eds.), *Handbook of child psychology: Social, emotional, and personality development* (6th ed., Vol. 3, pp. 646-718). Wiley.





Engel, G. L. (1977). ^{for Youth} The need for a new medical model: A challenge for biomedicine. *Science*, 196(4286), 129-136.

Erikson, E. H. (1968). *Identity: Youth and crisis*. W. W. Norton & Company.

Evans, G. W. (2004). The environment of childhood poverty. *American Psychologist*, 59(2), 77-92. <https://doi.org/10.1037/0003-066X.59.2.77>

Fardouly, J., Diedrichs, P. C., Vartanian, L. R., & Halliwell, E. (2015). Social comparisons on social media: The impact of Facebook on young women's body image concerns and mood. *Body Image*, 13, 38-45. <https://doi.org/10.1016/j.bodyim.2014.12.002>

Fredrickson, B. L. (2001). The role of positive emotions in positive psychology: The broaden-and-build theory of positive emotions. *American Psychologist*, 56(3), 218-226. <https://doi.org/10.1037/0003-066X.56.3.218>

Fredrickson, B. L. (2001). The role of positive emotions in positive psychology: The broaden-and-build theory of positive emotions. *American Psychologist*, 56(3), 218-226.

Gillham, J. E., Reivich, K. J., Jaycox, L. H., & Seligman, M. E. P. (2007). *The Penn Resiliency Program*. Oxford University Press.

Gleason, B. (2016). New literacies practices of teenage Twitter users. *Learning, Media and Technology*, 41(1), 31-54.

Goldberg, D., Bridges, K., Duncan-Jones, P., & Grayson, D. (1988). Detecting anxiety and depression in general medical settings. *BMJ*, 297(6653), 897-899. <https://doi.org/10.1136/bmj.297.6653.897>

Goleman, D. (1995). *Emotional intelligence: Why it can matter more than IQ*. Bantam Books.

Goleman, D. (1995). *Emotional intelligence: Why it can matter more than IQ*. Bantam Books.

Goleman, D. (1998). *Working with emotional intelligence*. Bantam Books.

Gresham, F. M., & Elliott, S. N. (1990). *Social skills rating system*. American Guidance Service.

Gross, J. J. (1998). The emerging field of emotion regulation: An integrative review. *Review of General Psychology*, 2(3), 271-299. <https://doi.org/10.1037/1089-2680.2.3.271>





- Gross, J. J. (2014). Emotion regulation: Conceptual and practical issues. In J. J. Gross (Ed.), *Handbook of emotion regulation* (2nd ed., pp. 3-20). Guilford Press.
- Gross, J. J., & Thompson, R. A. (2007). Emotion regulation: Conceptual foundations. In J. J. Gross (Ed.), *Handbook of emotion regulation* (pp. 3-24). Guilford Press.
- Hart, R. A. (1992). Children's participation: From tokenism to citizenship. *Innocenti Essays, No. 4*. UNICEF.
- Hobfoll, S. E. (2001). The influence of culture, community, and the nested-self in the stress process: Advancing conservation of resources theory. *Applied Psychology, 50*(3), 337-421.
- Hoffman, M. L. (2000). *Empathy and moral development: Implications for caring and justice*. Cambridge University Press.
- Jolliffe, D., & Farrington, D. P. (2006). Examining the relationship between low empathy and bullying. *Aggressive Behavior, 32*(6), 540-550.
- Kabat-Zinn, J. (2003). Mindfulness-based interventions in context: Past, present, and future. *Clinical Psychology: Science and Practice, 10*(2), 144-156.
- Kessler, R. C., Angermeyer, M., Anthony, J. C., de Graaf, R., Demyttenaere, K., Gasquet, I., ... & Ustün, T. B. (2007). Lifetime prevalence and age-of-onset distributions of mental disorders in the World Health Organization's World Mental Health Survey Initiative. *World Psychiatry, 6*(3), 168-176.
- Kessler, R. C., Berglund, P., Demler, O., Jin, R., Merikangas, K. R., & Walters, E. E. (2005). Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the National Comorbidity Survey Replication. *Archives of General Psychiatry, 62*(6), 593-602. <https://doi.org/10.1001/archpsyc.62.6.593>
- Kessler, R. C., Berglund, P., Demler, O., Jin, R., Merikangas, K. R., & Walters, E. E. (2005). Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the National Comorbidity Survey Replication. *Archives of General Psychiatry, 62*(6), 593-602.
- Keyes, C. L. M. (2002). The mental health continuum: From languishing to flourishing in life. *Journal of Health and Social Behavior, 43*(2), 207-222. <https://doi.org/10.2307/3090197>
- Kitzinger, J. (1995). Qualitative research: Introducing focus groups. *BMJ, 311*(7000), 299-302. <https://doi.org/10.1136/bmj.311.7000.299>





- Konrath, S., O'Brien, E. H., & Hsing, C. (2011). Changes in dispositional empathy in American college students over time: A meta-analysis. *Personality and Social Psychology Review*, 15(2), 180-198. <https://doi.org/10.1177/1088868310377395>
- Konrath, S., O'Brien, E., & Hsing, C. (2011). Changes in dispositional empathy in American college students over time: A meta-analysis. *Personality and Social Psychology Review*, 15(2), 180-198.
- Kross, E., Verduyn, P., Demiralp, E., Park, J., Lee, D. S., Lin, N., ... & Ybarra, O. (2013). Facebook use predicts declines in subjective well-being in young adults. *PLOS ONE*, 8(8), e69841. <https://doi.org/10.1371/journal.pone.0069841>
- Lerner, R. M. (2004). *Liberty: Thriving and civic engagement among America's youth*. Sage Publications.
- Lopes, P. N., Salovey, P., Côté, S., & Beers, M. (2005). Emotion regulation abilities and the quality of social interaction. *Emotion*, 5(1), 113-118.
- Luthar, S. S., Cicchetti, D., & Becker, B. (2000). The construct of resilience: A critical evaluation and guidelines for future work. *Child Development*, 71(3), 543-562. <https://doi.org/10.1111/1467-8624.00164>
- Lyubomirsky, S., Sheldon, K. M., & Schkade, D. (2005). Pursuing happiness: The architecture of sustainable change. *Review of General Psychology*, 9(2), 111-131. <https://doi.org/10.1037/1089-2680.9.2.111>
- Masten, A. S. (2001). Ordinary magic: Resilience processes in development. *American Psychologist*, 56(3), 227-238. <https://doi.org/10.1037/0003-066X.56.3.227>
- Matsumoto, D. (2006). Culture and cultural worldviews: Do verbal descriptions about culture reflect anything other than verbal descriptions of culture? *Culture and Psychology*, 12(1), 33-62.
- Mayer, J. D., & Salovey, P. (1997). What is emotional intelligence? In P. Salovey & D. Sluyter (Eds.), *Emotional development and emotional intelligence: Educational implications* (pp. 3-31). Basic Books.
- Mayer, J. D., Roberts, R. D., & Barsade, S. G. (2008). Human abilities: Emotional intelligence. *Annual Review of Psychology*, 59(1), 507-536. <https://doi.org/10.1146/annurev.psych.59.103006.093646>
- Mayer, J. D., Salovey, P., & Caruso, D. R. (2004). Emotional intelligence: Theory, findings, and implications. *Psychological Inquiry*, 15(3), 197-215.





- Myers, D. G., & Diener, E. (1995). Who is happy? *Psychological Science*, 6(1), 10-19. <https://doi.org/10.1111/j.1467-9280.1995.tb00298.x>
- Naslund, J. A., Grande, S. W., Aschbrenner, K. A., & Elwyn, G. (2016). Naturally occurring peer support through social media: The experiences of individuals with severe mental illness using YouTube. *PloS one*, 11(10), e0161407.
- Nunnally, J. C., & Bernstein, I. H. (1994). *Psychometric theory* (3rd ed.). McGraw-Hill.
- Organización Mundial de la Salud. (2004). *Promoción de la salud mental: Conceptos, evidencias emergentes, práctica: Informe de un taller de la OMS, Ginebra, Suiza, 2004*. OMS.
- Orth, U., Robins, R. W., & Roberts, B. W. (2008). Low self-esteem prospectively predicts depression in adolescence and young adulthood. *Journal of Personality and Social Psychology*, 95(3), 695-708. <https://doi.org/10.1037/0022-3514.95.3.695>
- Pantic, I. (2014). Online social networking and mental health. *Cyberpsychology, Behavior, and Social Networking*, 17(10), 652-657. <https://doi.org/10.1089/cyber.2014.0070>
- Perry, L. J., & Hodges, E. V. E. (2017). Social exclusion and the development of antisocial behavior in children and adolescents. *Journal of Youth and Adolescence*, 46(7), 1350-1363.
- Peterson, C., & Seligman, M. E. P. (2004). *Character strengths and virtues: A handbook and classification*. Oxford University Press.
- Prince, M., Patel, V., Saxena, S., Maj, M., Maselko, J., Phillips, M. R., & Rahman, A. (2007). No health without mental health. *The Lancet*, 370(9590), 859-877. [https://doi.org/10.1016/S0140-6736\(07\)61238-0](https://doi.org/10.1016/S0140-6736(07)61238-0)
- Przybylski, A. K., & Weinstein, N. (2017). A large-scale test of the Goldilocks hypothesis: Quantifying the relations between digital-screen use and the mental well-being of adolescents. *Psychological Science*, 28(2), 204-215. <https://doi.org/10.1177/0956797616678438>
- Qualter, P., Brown, S. L., Munn, P., & Rotenberg, K. J. (2015). Childhood loneliness as a predictor of adolescent depressive symptoms: An 8-year longitudinal study. *European Child & Adolescent Psychiatry*, 19(6), 493-501. <https://doi.org/10.1007/s00787-009-0059-y>
- Riggio, R. E. (1986). *Assessment of basic social skills*. McGraw-Hill.





- Rosen, L. D., Whaling, K., Rab, S., Carrier, L. M., & Cheever, N. A. (2013). Is Facebook creating "iDisorders"? The link between clinical symptoms of psychiatric disorders and technology use, attitudes and anxiety. *Computers in Human Behavior*, 29(3), 1243-1254. <https://doi.org/10.1016/j.chb.2012.11.012>
- Rosenberg, M. (1965). *Society and the adolescent self-image*. Princeton University Press.
- Rutter, M. (2006). Implications of resilience concepts for scientific understanding. *Annals of the New York Academy of Sciences*, 1094(1), 1-12. <https://doi.org/10.1196/annals.1376.002>
- Ryan, R. M., & Deci, E. L. (1985). Intrinsic motivation and self-determination in human behavior. Plenum Press.
- Ryan, R. M., & Deci, E. L. (2000). Self-determination theory and the facilitation of intrinsic motivation, social development, and well-being. *American Psychologist*, 55(1), 68-78. <https://doi.org/10.1037/0003-066X.55.1.68>
- Ryan, R. M., & Deci, E. L. (2000). Self-determination theory and the facilitation of intrinsic motivation, social development, and well-being. *American Psychologist*, 55(1), 68-78.
- Ryff, C. D., & Keyes, C. L. M. (1995). The structure of psychological well-being revisited. *Journal of Personality and Social Psychology*, 69(4), 719-727. <https://doi.org/10.1037/0022-3514.69.4.719>
- Salovey, P., & Mayer, J. D. (1990). Emotional intelligence. *Imagination, Cognition and Personality*, 9(3), 185-211. <https://doi.org/10.2190/DUGG-P24E-52WK-6CDG>
- Seligman, M. E. P. (1991). *Learned optimism: How to change your mind and your life*. Knopf.
- Seligman, M. E. P. (2011). *Flourish: A visionary new understanding of happiness and well-being*. Free Press.
- Smith, P. K., Mahdavi, J., Carvalho, M., Fisher, S., Russell, S., & Tippett, N. (2008). Cyberbullying: Its nature and impact in secondary school pupils. *Journal of Child Psychology and Psychiatry*, 49(4), 376-385. <https://doi.org/10.1111/j.1469-7610.2007.01846.x>
- Steinberg, L. (2005). Cognitive and affective development in adolescence. *Trends in Cognitive Sciences*, 9(2), 69-74. <https://doi.org/10.1016/j.tics.2004.12.005>





Steinberg, L. (2005). Cognitive and affective development in adolescence. *Trends in Cognitive Sciences*, 9(2), 69-74.

Steinberg, L. (2007). Risk taking in adolescence: New perspectives from brain and behavioral science. *Current Directions in Psychological Science*, 16(2), 55-59. <https://doi.org/10.1111/j.1467-8721.2007.00475.x>

Swann, W. B., Chang-Schneider, C., & Larsen McClarty, K. (2007). Do people's self-views matter? *Self and Identity*, 6(2-3), 205-218. <https://doi.org/10.1080/15298860601118805>

Triandis, H. C. (2001). Individualism-collectivism and personality. *Journal of Personality*, 69(6), 907-924. <https://doi.org/10.1111/1467-6494.696169>

Turkle, S. (2015). *Reclaiming conversation: The power of talk in a digital age*. Penguin Press.

Twenge, J. M. (2019). *iGen: Why today's super-connected kids are growing up less rebellious, more tolerant, less happy—and completely unprepared for adulthood*. Atria Books.

Twenge, J. M. (2019). The sad state of happiness in the United States and the role of digital media. In R. F. Baumeister & J. L. Vohs (Eds.), *The self explained* (pp. 209-220). Guilford Press.

Twenge, J. M., & Campbell, W. K. (2018). Associations between screen time and lower psychological well-being among children and adolescents: Evidence from a population-based study. *Preventive Medicine Reports*, 12, 271-283. <https://doi.org/10.1016/j.pmedr.2018.10.003>

Twenge, J. M., & Campbell, W. K. (2018). Associations between screen time and lower psychological well-being among children and adolescents: Evidence from a population-based study. *Preventive Medicine Reports*, 12, 271-283.

Twenge, J. M., & Nolen-Hoeksema, S. (2002). Age, gender, race, socioeconomic status, and birth cohort differences on the Children's Depression Inventory: A meta-analysis. *Journal of Abnormal Psychology*, 111(4), 578-588. <https://doi.org/10.1037/0021-843X.111.4.578>

Underwood, M. K., Rosen, L. H., More, D., Ehrenreich, S. E., & Gentsch, J. K. (2018). The BlackBerry Project: The hidden world of adolescents' text messaging and relations with internalizing symptoms. *Journal of Research on Adolescence*, 28(3), 638-652. <https://doi.org/10.1111/jora.12318>

Ungar, M. (2011). The social ecology of resilience: Addressing contextual and cultural ambiguity of a nascent construct. *American Journal of*





Orthopsychiatry, 81(1), 1-17. <https://doi.org/10.1111/j.1939-0025.2010.01067.x>

Valkenburg, P. M., Peter, J., & Schouten, A. P. (2006). Friend networking sites and their relationship to adolescents' well-being and social self-esteem. *CyberPsychology & Behavior*, 9(5), 584-590.

Valkenburg, P. M., Peter, J., & Schouten, A. P. (2017). Friend networking sites and their relationship to adolescents' well-being and social self-esteem. *CyberPsychology & Behavior*, 9(5), 584-590. <https://doi.org/10.1089/cpb.2006.9.584>

Vossen, H. G. M., & Valkenburg, P. M. (2016). Do social media foster or curtail adolescents' empathy? A longitudinal study. *Computers in Human Behavior*, 63, 118-124. <https://doi.org/10.1016/j.chb.2016.05.040>

Young, K. S. (1998). Internet addiction: The emergence of a new clinical disorder. *CyberPsychology & Behavior*, 1(3), 237-244. <https://doi.org/10.1089/cpb.1998.1.237>

Zeidner, M., Matthews, G., & Roberts, R. D. (2009). *What we know about emotional intelligence: How it affects learning, work, relationships, and our mental health*. MIT Press.

