

Review Article: Narrative Review

UNDERSTANDING YOUTH MENTAL HEALTH: A NARRATIVE REVIEW

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Abstract

Youth mental health has increasingly become a global health concern. Depression in Indonesia has the highest rate of this age group compared to all age groups. Age 15-24 years is a key phase of identity formation, emotional growth, and social transition; therefore, mental health difficulties during this time can have lifetime effects. This review draws on recent literature to explore global patterns in youth mental health, to gain understanding into youth's perceptions, and a variety of social and digital influences as key barriers to early recognition and effective coping. The paper underscores the importance of promotive and preventive strategies, including mental health education, coping skills training, and early intervention programs. Emphasis is placed on culturally responsive and developmentally appropriate approaches that meet youth where they are—emotionally, socially, and digitally. Recommendations are offered for nursing and community practice, with a focus on building youth resilience and improving access to timely, stigma-free support systems.

Keywords: *Youth Mental Health, Mental Health Education, Promotive Intervention*

INTRODUCTION

Recent global data continues to highlight the urgency of addressing youth mental health. According to the World Health Organization (2024), approximately 1 in 7 adolescents aged 10–19 globally experience a mental disorder, with anxiety and depression being the most common conditions. Anxiety affects 4.4% of 10–14-year-olds and 5.5% of 15–19-year-olds, while depression impacts 1.4% and 3.5% of those same groups, respectively (WHO, 2024). In Indonesia, 3.5% of students reported lacking close friendships (UNICEF, 2024). According

to the Indonesia Health Survey in 2023, the prevalence of depression among Indonesian young adults aged 15 to 24 years stands at 2%, making it the highest among all age groups; yet, only 10.4% of them seek help (Ministry of Health of the Republic of Indonesia, 2023). The findings paint a clear and concerning picture of youth mental health in global, and particularly, Indonesia. The 2% depression rate may seem modest at first glance, but it likely underrepresents the true burden due to stigma and underreporting (Annisa, et al., 2022).

Moreover, the fact that only 10.4% of youth with depression seek help is deeply troubling.

Youth, age 15-24 years old (Ministry of Health of the Republic of Indonesia, 2023; WHO, 2024), navigate a challenging period of transition between childhood and adulthood. They often find themselves caught in a confusing space—too young for certain responsibilities, yet expected to take on others because they are seen as old enough. This constant tension, combined with growing expectations and internal struggles, weighs heavily on their minds and can affect both their physical and mental health (APA, 2021). However, do they realize these conditions? How do they cope with it? What could we do toward this issue? This review seeks to understand and answer those questions; thus, we can better prepare the mental health support systems for youth.

PERCEPTIONS OF MENTAL HEALTH

Do youth recognize their mental health conditions? Sometimes—but often too late, or only partially. We need to dig into their understanding of mental health concepts first.

Limited Mental Health Literacy

When youth hear the term "mental health," their initial thoughts often reflect a mix of misunderstanding, stigma, and emotional association. A scoping review by Beckman et al. (2023) explored how youth perceive mental health, often viewing it with uncertainty. This ambiguity appears in two ways: first, young people lack a shared or clear understanding of what mental health means and often struggle to distinguish between normal life challenges and clinical mental disorders; second, researchers also face difficulty applying consistent definitions of mental health, which makes it challenging to interpret and compare study results (Beckman, et al., 2023). The ambiguity surrounding the concept of mental health highlights a broader issue: the limited mental health literacy. When youth lack clear and consistent definitions of mental health—even

mirroring the uncertainty found among adults and professionals—it becomes increasingly difficult for them to recognize symptoms, and differentiate between emotional stress and clinical disorders (Riebschleger, et al., 2022).

As a result of limited mental health literacy, youth frequently normalize their struggles, assuming that feeling overwhelmed, lonely, or emotionally unstable is just part of growing up; while others internalize the stigma and avoid labelling themselves as having a mental health issue out of fear of judgment (Osman, et al., 2023). They often try to adapt to the difficulties as they used to be. This lack of awareness, combined with societal expectations to be resilient, often leads youth to minimize their experiences or dismiss them as temporary (Pimenta, et al., 2021).

Emotional Development Gaps

The factor of neurodevelopment plays a role in managing youth feelings. Their brain undergoes significant maturation, especially in regions associated with emotion regulation and self-awareness (Andrews, et al., 2020). Notably, the prefrontal cortex, responsible for executive functions such as impulse control and decision-making, continues to develop into early adulthood; in contrast, the limbic system, including the amygdala which processes emotions, matures earlier (Krishnan, 2020). This developmental mismatch can lead to heightened emotional reactivity and challenges in self-regulation. As a result, youth may find it difficult to accurately interpret their emotional states, leading to confusion and potential mismanagement of their feelings.

Youth do not fully recognize or understand their mental health conditions due to a combination of limited mental health literacy, normalization, and ongoing brain development. Their understanding of mental health is often shaped by emotional language—such as feeling “happy” or “unhappy”—rather than informed clinical knowledge

(Riebschleger, et al., 2022). Furthermore, youth frequently normalize their struggles, assuming that emotional distress is simply part of growing up, while societal expectations around resilience and self-reliance discourage open discussions about mental health (Osman, et al., 2023). Compounding this, the youth brain is still maturing in areas critical to emotion regulation and self-awareness, which can impair their ability to identify and articulate what they are feeling (Andrews, et al., 2020).

DEAL WITH MENTAL HEALTH

Therefore, how do youth cope with their mental health issues? Given the barriers to recognition, it becomes essential to understand how youth actually cope with their mental health challenges. These coping mechanisms range from adaptive strategies that promote resilience to maladaptive behaviors that may worsen mental health outcomes over time (Alis Behavioral Health, 2024; WHO, 2024). However, the strategies do not always appear in the youth's mind at the moment of distress. There is a process that we need to deeply understand. Coping is not an automatic response; it often requires self-awareness, emotional regulation, and mental space that many youths are still developing (Chok, et al., 2023; Kpeno, et al, 2024). This gap between experiencing emotional overwhelm and selecting a healthy coping mechanism represents a crucial struggle for youth.

Considerations to Guide Decision-Making

When youth experience mental health distress, their decision to take action—or not—is often shaped by immediate, situational factors. The questions that may come to them: “Should I talk to my friend or keep this to myself?”, “Do I trust this person enough to open up?”, “Will this make things worse?”, “Will I be judged if I seek help?”, “Is this bad enough to need help?”, “Can I handle this on my own?”. These considerations function as internal appraisals or judgments in the moment of stress (Pimenta, et al., 2021). While not

always conscious or deliberate, these decisions reflect how youth perceive the safety, relevance, or effectiveness of available coping options (Stapley et al., 2023).

One key consideration is trust. Youth are more likely to disclose emotional struggles to individuals they trust, typically close friends or family members, rather than to formal sources like school counselors or mental health professionals (Pimenta et al., 2021). Trust is closely tied to another central concern: confidentiality. Youth often fear that seeking help from professionals may lead to their personal issues being disclosed to parents or school authorities, which can result in judgment, punishment, or loss of autonomy (Chok, et al., 2023; Pimenta, et al., 2021).

Another immediate consideration is the perceived severity of symptoms. Youth are more inclined to reach out for help when they feel overwhelmed, unsafe, or unable to function, whereas mild or fluctuating symptoms are often self-managed or minimized (Kpeno, et al., 2024; Stapley, et al., 2023). Emotional readiness also plays a role (Khrisnan, 2020)—some youth may delay coping actions simply because they feel emotionally shut down, ashamed, or unsure of how to verbalize what they are going through (Beckman, et al., 2023; Osman, et al., 2023).

These moment-to-moment considerations are essential for understanding how youth navigate the early stages of coping. However, these decisions are not made in a vacuum—they are shaped by deeper developmental, social, and contextual factors (Alis Behavioral Health, 2024; WHO, 2024).

Determinants of the Coping Approach

Beyond situational considerations, youth' coping behaviors are influenced by a range of determinants (Chok, et al., 2023)—foundational, often long-standing factors that shape their overall approach to managing mental health challenges. These determinants are both internal (neurodevelopmental and

mental health awareness) and external (social support, stigma, and digital environment).

At the individual level, neurodevelopmental factors play a significant role. Youth are still developing key regions of the brain associated with emotion regulation, self-awareness, and impulse control (Khrisnan, 2020). As a result, coping is not always automatic or skillful; it requires emotional insight and regulation abilities that may still be maturing (Andrews, et al., 2021). Youth with stronger emotional awareness are more likely to use adaptive coping strategies, such as problem-solving, self-soothing, or seeking support. Mental health literacy is another critical determinant. Adolescents with limited understanding of mental health concepts may fail to recognize their symptoms or may interpret distress as personal weakness, leading to shame or denial (Beckman et al., 2023; Riebschleger et al., 2022). This can result in avoidance, internalization, or maladaptive strategies such as social withdrawal or substance use.

Social context plays a crucial role in shaping how adolescents cope with mental health challenges. Family and peer support act as protective factors, increasing the likelihood that youth will engage in healthy, adaptive coping behaviors (Chok et al., 2023). Conversely, adolescents who experience adversity—such as trauma, bullying, discrimination, or unstable home environments—often have fewer emotional and social resources to draw upon, which can hinder effective coping (Stapley et al., 2023). Within the social context, cultural beliefs and stigma are especially influential. These cultural norms can lead to internalized stigma (Annisa, et al., 2022) and a preference for silence or avoidance over open discussion (UNICEF, 2024). Additionally, the digital environment has become a major social context that shapes adolescent coping. While online platforms can offer support communities, mental health resources, and peer connection; they can also expose youth to cyberbullying, misinformation,

and social comparison—all of which can negatively affect emotional well-being (Azizi, et al., 2022; Valkenburg, et al., 2022). The digital world is therefore a double-edged sword, offering both tools for coping and new sources of psychological stress.

Accordingly, while youth make real-time coping decisions based on what feels safe and manageable, those decisions are deeply rooted in complex determinants; these are the deeper, underlying influences that shape what coping strategies youth tend to use overall.

PRACTICE IMPACT

Based on these findings, what could we do? To support youth in understanding and managing their mental health, efforts should prioritize promotive and preventive interventions (WHO, 2024; UNICEF, 2024) that enhance awareness, build resilience, and reduce the risk of developing more severe psychological conditions (Chok, et al., 2023; Kpeno, et al., 2024). These interventions must be culturally sensitive, developmentally appropriate, and responsive to the digital and social environments adolescents inhabit.

Improve Mental Health Awareness

Expanding mental health literacy is essential for youth, as it equips them with the ability to identify, understand, and express their thoughts and feelings effectively. Strategies such as emotional vocabulary activities, gratitude circles, reflective listening, and connection-building can help students recognize and manage stress, anxiety, and bullying (Alis Behavioral Health, 2024). Schools and community-based organizations should integrate mental health education into curricula and extracurricular programs to reach youth in their everyday environments (Chok, et al., 2023; Stapley, et al., 2023). There are some mental health programs that have been running in countries with two main similar purposes: increase the ability of youth to help-seeking and decrease the stigma (Riebschleger, et al., 2022).

In addition, the use of social media and digital search engines is a strategic approach to deliver mental health education as youth increasingly turn to digital sources for information and peer connection (Azizi, et al., 2022; Valkenburg, et al., 2022). By fostering mental health literacy; educators, parents, and society can better support them in navigating the psychological challenges of youth.

Develop Healthy Coping Skill

Mental health literacy aligns closely with resilience theory. Learning to recognize and regulate mental health conditions is a key developmental task involving becoming aware of the response (APA, 2021), and adapting healthy coping strategies that fit both the situation and their personal strengths (Center for the Developing Adolescent, 2025). Healthy coping toward mental health conditions is a mixed-approach related to the neurodevelopmental factors, level of awareness and experiences, and social support in any setting (WHO, 2024). Coping skill development should involve both individual and group-based approaches (Pimenta, et al., 2021), including physical (e.g., walking, dancing), mental/emotional (e.g., deep breathing, mindfulness), sensory (taking a warm bath, listening to music), distraction (drawing, playing a game), and social support (peer-led program, storytelling) (Children's Healthcare of Atlanta, 2024). As highlighted, this healthy coping skill should be taught and practiced regularly—it can set a strong foundation for emotional well-being throughout life.

Early Detection and Intervention

Early recognition of mental health symptoms significantly improves outcomes. When youth can identify emotional or behavioral warning signs early, they are more likely to access support in a timely and effective manner (Osman, et al., 2023). This begins with helping youth build insight into their mental states and educating them on when and how to

seek help. Teachers, school nurses, and primary care providers play a pivotal role in this process by conducting mental health screenings, offering psychoeducation, and providing confidential referral pathways (WHO & UNICEF, 2024). Encouraging help-seeking behavior involves demystifying mental health services, reducing fear of judgment, and ensuring that care is youth-friendly and accessible (Stapley, et al., 2023; UNICEF, 2024).

CONCLUSIONS

Youth face growing mental health challenges, yet many struggle to recognize symptoms or seek help due to limited literacy, stigma, and developmental factors. This review emphasizes the need for promotive and preventive efforts that enhance awareness, build emotional skills, and support early intervention. Together, these sections show the full picture: how youth perceive mental health, what stops them from accessing care, and how they respond to distress in the absence of formal help. Nurses and educators play a vital role in creating supportive, accessible environments that empower youth to cope effectively and seek help when needed.

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REFERENCES

- Alis Behavioral Health (2024, July 3). How to help teens develop healthy coping mechanisms? <https://www.alisbh.com/blog/how-to-help-teens-develop-healthy-coping-mechanisms/>
- American Psychiatric Association. (2021). Challenges for transitional age youth with mental health concerns. <https://www.psychiatry.org/news-room/apa-blogs/challenges-transitional-age-youth-with-mh-concerns>
- Andrews, J. L., Ahmed, S. P., & Blakemore, S. J. (2020). Navigating the Social Environment in Adolescence: The Role of Social Brain Development. *Biological Psychiatry* Vol 89, Issue 2, 15 January 2021, 109-118. <https://doi.org/10.1016/j.biopsych.2020.09.012>
- Annisa, F., Rohmawati, N. R., & Muniroh. (2022). Adolescent Mental Health in Rural Area in Desa Batur, Probolinggo, Indonesia. *Proceeding International Conference of Kerta Cendekia* 2(1), 114-118 (2022). <https://doi.org/10.36720/ickc.v2i1.503>
- Azizi, S. M., Soroush, A., & Khatony, A. (2022). The role of digital technology in adolescents' mental health: A scoping review. *BMC Psychiatry*, 22(1), 1–12. <https://doi.org/10.1186/s12888-022-03913-8>
- Beckman, L., Hassler, S. & Hellström, L. (2023). Children and youth's perceptions of mental health—a scoping review of qualitative studies. *BMC Psychiatry* 23, 669. <https://doi.org/10.1186/s12888-023-05169-x>
- Center for the Developing Adolescent. (2025). Decision making & emotional regulation. UCLA Center for the Developing Adolescent. <https://developingadolescent.semel.ucla.edu/core-science-of-adolescence/decision-making-emotional-regulation>
- Children's Healthcare of Atlanta. (2024). Healthy coping strategies for kids. Strong4Life. <https://www.strong4life.com/en/emotional-wellness/coping/healthy-coping-strategies-for-kids>
- Chok, L., Suris, J.-C. and Barrense-Dias, Y. (2023), "Adolescents' mental health, coping strategies, social support and interventions: a qualitative study in Switzerland", *Qualitative Research Journal*, Vol. 23 No. 4, pp. 445-453. <https://doi.org/10.1108/QRJ-10-2022-0135>
- Kpeno A, Sahoo S, Sahu A. K., & Sahu P. K. (2024). Problem-Solving and Coping Skills Training for Youth with Deliberate Self-Harm Behaviors: A Scoping Review. *Journal of Indian Association for Child and Adolescent Mental Health*, 20(4):304-313. <https://doi.org/10.1177/09731342241278964>
- Krishnan, Athulya. (2020). Emotion Regulation in Adolescence: Different Strategies and Associated Functional Connectivity of Brain Regions. *Biomedical Research Journal* 7(2):p 34-39, Jul–Dec 2020. https://doi.org/10.4103/bmrj.bmrj_13_20
- Ministry of Health of the Republic of Indonesia. (2023). Indonesia Health Survey (SKI) 2023. Health Policy Development Agency (BKPK). <https://www.badankebijakan.kemkes.go.id/hasil-ski-2023/>
- Osman, N., Michel, C., Schimmelmann, B. G., Schilbach, L., Meisenzahl, E., & Schultze-Lutter, F. (2023). Influence of mental health literacy on help-seeking behaviour for mental health problems in the Swiss young adult community: a cohort and longitudinal case-control study. *European archives of psychiatry and clinical neuroscience*, 273(3), 649–662.

- <https://doi.org/10.1007/s00406-022-01483-9>
- Pimenta, S. M., Hunter, S. C., Rasmussen, S., Cogan, N., & Martin, B. (2021). Young People's Coping Strategies When Dealing With Their Own and a Friend's Symptoms of Poor Mental Health: A Qualitative Study. *Journal of Adolescent Research*, 39(3), 612-638. <https://doi.org/10.1177/07435584211062115>
- Riebschleger, J., Grové, C., Kelly, K., & Cavanaugh, D. (2022). Developing and Initially Validating the Youth Mental Health Literacy Scale for Ages 11-14. *Frontiers in psychiatry*, 13, 817208. <https://doi.org/10.3389/fpsy.2022.817208>
- Stapley, E., Stock, S., Deighton, J., & Demkowicz, O. (2023). A Qualitative Study of How Adolescents' Use of Coping Strategies and Support Varies in Line With Their Experiences of Adversity. *Child & youth care forum*, 52(1), 177-203. <https://doi.org/10.1007/s10566-022-09682-0>
- UNICEF. (2024). Adolescent health profile: Indonesia. <https://www.unicef.org/indonesia/media/23796/file/adolescent-health-profile-2024.pdf>
- Valkenburg, P. M., Meier, A., & Beyens, I. (2022). Social media use and its impact on adolescent mental health: An umbrella review of the evidence. *Current Opinion in Psychology*, 44, 58-68. <https://doi.org/10.1016/j.copsyc.2021.08.017>
- WHO. (2024). Adolescent mental health. <https://www.who.int/news-room/factsheets/detail/adolescent-mental-health>
- WHO & UNICEF. (2024). Guidance to improve access to mental health care for children and young people. <https://www.who.int/news/item/09-10-2024-who-and-unicef-launch-guidance-to-improve-access-to-mental-health-care-for-children-and-young-people>

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