



## IMPLEMENTING MENTAL HEALTH AWARENESS CAMPAIGNS TO REDUCE STIGMA AND PROMOTE HELP-SEEKING BEHAVIOR

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### Abstract

It is concerning that the prevalence of mental health issues among adolescents is on the rise. Adolescents who require mental health assistance the most are hesitant to do so. Further comprehension regarding the assistance sought by this demographic is required in order to bridge this divide. A search was conducted across five databases in order to identify the primary obstacles, enablers, and interventions that target the seeking of assistance for prevalent mental health issues among adolescents aged 10–19 years. The chief obstacles frequently mentioned were stigma and unfavorable perceptions of mental health professionals and services. The facilitators possessed prior favorable encounters with mental health literacy and health services. The majority of interventions relied on psychoeducation, which centered on topics such as stigma, melancholy, suicide and self-harm, and general mental health knowledge. Additional forms of interventions encompassed outreach initiatives, peer training, and the utilization of online and multimedia resources. In general, the studies yielded results of moderate to low quality, and there was a lack of consensus concerning the definition and metrics of help-seeking. Despite the fact that the majority of interventions occurred in educational environments, it is crucial to consider adolescents who are not enrolled in school. The provision of greater access to mental health services to all adolescents in need should incentivize them to seek assistance; however, Child and Adolescent Mental Health Services continue to face a significant obstacle in this regard. Furthermore, research pertaining to help-seeking behaviors among adolescents must establish more rigorous methodological standards, incorporate shared definitions, and construct theoretical frameworks. By increasing the consistency and generalizability of findings, this will facilitate the advancement of interventions that encourage individuals to seek assistance, as well as guarantee prompt availability of treatment for psychological disorders.

**Keywords:** mental health awareness, child, adolescent, psychological disorders, review.

### 1. Introduction



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Compared to individuals at any other period of the lifecycle, young people present with the highest prevalence of mental health disorders [1]. It is estimated that as many as 20% of adolescents may be affected by mental health disorders [2]. Mental health is characterized as "a condition of optimal condition in which an individual is conscious of their own capabilities, capable of managing typical pressures of existence, and able to contribute positively to their community" [3]. Approximately 50% of mental health disorders manifest prior to the age of 14 [4], with 75% of instances manifesting before the age of 18 [5]. Depression and anxiety are the prevailing diagnoses [6], with an estimated 25% of the youth population grappling with psychological distress [7]. Suicide ranks third among elder adolescents in terms of mortality rate [4]. Depression is a significant contributor to illness and disability among this age group. The development of infants and young people can be profoundly impacted by mental health issues [4], which can have long-lasting consequences for their health and social functioning as adults [8]. In addition to stigma, discrimination, and isolation, adolescents with mental health conditions may encounter barriers to accessing health services [2]. However, 75% of adolescents with mental health issues do not utilize mental health services [9], with reluctance to seek assistance being the primary reason [1, 10, 11].

Seeking assistance for mental health issues requires openly acknowledging the necessity for personal and psychological support in order to receive guidance and support. "An adaptive coping process that is the attempt to obtain external assistance to deal with mental health concerns" [p.180, 12] is the definition of help-seeking for mental health problems by Rickwood and Thomas (2012). This includes both formal and informal sources of assistance (e.g., health services, acquaintances and family). Conversely, adolescents who are least likely to seek psychological assistance are the ones who have the greatest need for it [1,2,3,4,5,6,7,8,9,10,11,12,13]. In the realm of adolescent mental health, connecting at-risk individuals with the appropriate support is one of the greatest obstacles [14]. A comprehensive comprehension of the factors that impede or enable adolescents from seeking assistance is critical in order to formulate effective interventions and programs that assist those grappling with mental health issues.

Rickwood et al. (2005) examined the primary facilitators and impediments to youth seeking assistance for mental health issues. Lack of emotional competence, negative beliefs regarding help-seeking, and stigma were identified as the most significant obstacles. On the contrary, the primary facilitators were emotional competence, prior positive interactions with health professionals, and mental health literacy [15]. Gulliver et al. (2010) conducted a comprehensive review of the existing literature and arrived at comparable conclusions; nevertheless, they asserted that the most significant impediment to young people seeking assistance was stigma [1]. Another systematic review that examined assistance-seeking for self-harm among adolescents was conducted by Rowe et al. (2014). The researchers discovered that negative responses from others regarding violations of confidentiality and being perceived as a "attention seeker" were the most significant barriers, alongside stigma [10]. Although intriguing, the aforementioned reviews

fail to examine the obstacles and enablers that promote adolescents seeking assistance for the majority of prevalent mental health issues, as well as the interventions that target these. Depressive symptoms, personal emotional problems, and suicidal ideation were the only factors considered by Rickwood, Deane et al. (2005) and Rowe et al. (2014), respectively, with regard to adolescent self-harm. The most comprehensive review, which was published by Gulliver et al. (2010), is nearly a decade old and requires revision.

Sufficient and efficacious interventions that encourage individuals to seek assistance are imperative in order to improve prevention, early identification, prompt treatment, and recuperation from mental health issues [14]. Prior systematic reviews of interventions aimed at promoting help-seeking have identified encouraging outcomes concerning the improvement of mental health literacy [16]. Furthermore, these reviews have identified a substantial positive impact of these interventions on the overall process of seeking help for mental health issues [17]. However, adolescent populations are not the focus of any of these evaluations, and only one incorporates randomized controlled trials (RCTs).

The main objective of this review is to present a comprehensive synthesis of the existing literature concerning the factors that impede or promote adolescents from seeking mental health assistance. This includes both formal and informal support systems, as well as interventions designed to assist in overcoming these obstacles. We will concentrate on prevalent mental health issues, such as anxiety, depression, suicidal ideation, self-harm, and emotional distress, in addition to other symptoms of personal and emotional distress. An examination of any substantial differences between age and gender constitutes the secondary outcome. To prevent the escalation of mental health issues among adolescents, it is critical to facilitate access to expeditious and effective treatment and to comprehend the challenges associated with seeking assistance.

## 2. Effectiveness

Due to the fact that describing the interventions aimed at encouraging adolescents to seek assistance was the primary objective of this review, an evaluation of their efficacy was omitted. Because nearly half of the studies included were feasibility and study protocol investigations, effect sizes were not reported. Nevertheless, certain discoveries merit mention. Four studies examining the efficacy of interventions centered on depression psychoeducation discovered that assistance-seeking increased significantly. King et al. [18] determined that subsequent assistance-seeking behaviors increased following the interventions and that this increase persisted at the three-month follow-up ( $t = 4.634\%$   $p < .001$ ). A noteworthy rise in assistance-seeking was observed by Strunk et al. [19] ( $p < 0.0005$ ); nevertheless, this trend did not persist during the follow-up period ( $p = 0.014$ ). In their study, Robinson et al. [20] observed that the intervention group had a higher likelihood of seeking assistance at the post-test (odds ratio (95% C.I) = 3.48 (1.93, 6.29),  $p < 0.0001$ ). Similarly, Ruble et al. [21] found an increased intention to seek assistance from others following the intervention ( $t = 13.658$ ,  $p < 0.0001$ ).

The three studies that examined the efficacy of stigma reduction found that the intervention increased the number of individuals who sought assistance. Two studies [22,23] discovered a noteworthy decrease in self-stigmatization associated with seeking assistance subsequent to the intervention ( $p < 0.05$ ). Additionally, one study [24] observed a significant impact of the intervention on individuals' intentions to seek help (Wilks'  $\nu = .942$ ,  $F(4,417) = 6.428$ ,  $p < 0.001$ ).

In conclusion, all outreach-focused studies discovered that the intervention had a significant impact on individuals' intentions to seek assistance. A three-month follow-up revealed an increase in intentions ( $F(2,217) = 3.04$ ;  $p < 0.05$ ). Short-term improvements in help-seeking intentions were observed in [25], Rughani [26] ( $F(14,225) = 1.87$ ,  $p \approx .03$ ), and Wilson [27] observed a significant effect in the intention to seek help for psychological difficulties subsequent to the intervention ( $F(2,598) = 4.31$ ,  $p < 0.01$ ).

### 3. Quality evaluation

The majority of the studies exhibited a moderate to high risk of bias and was of low to moderate quality. In the majority of cross-sectional studies, inclusion and exclusion criteria were not specified, and potential confounding variables that could have affected the interpretation of the results were not taken into account. In the realm of qualitative research, sample size and the challenge of formulating a definitive approach to mitigate the subjectivity of authors in data interpretation emerged as the most prevalent issues. Mixed method studies exhibited certain inconsistencies when it came to confronting particular aspects of both the quantitative and qualitative traditions, as well as in the integration of the two approaches. In the context of intervention studies, determining the degree of similarity between groups at the outset posed a challenge.

While certain studies incorporated demographic information as baseline measures, the majority failed to account for potential confounding variables or other influential factors that could affect effectiveness. In fact, certain studies lacked any baseline measures. Furthermore, the inclusion of follow-up periods (up to 6 months) was limited in number and high attrition rates characterized the few studies that did include them. Consequently, it is unfeasible to ascribe enduring effects to the interventions. Quasi-experimental research recognizes the potential for sample and selection bias. The implementation of randomized controlled trials posed challenges with regard to the concealment of both the research team and participants throughout various phases of the study.

In general, the assessments of help-seeking exhibited inconsistency, as the majority of the studies concentrated on help-seeking intentions rather than examining the potential correlation with subsequent behaviors. Furthermore, a considerable number of research investigations failed to employ valid and dependable instruments when assessing help-seeking behavior. This is particularly true of experimental studies, as the majority of them created intervention-specific instruments as opposed to standardized help-seeking measures. Lastly, the majority of studies

relied solely on self-report measures, which increased the possibility of bias in the results. The integrity of the study protocol, feasibility studies, and pilot studies was not evaluated.

#### 4. Conclusion

In summary, the primary obstacles that hinder adolescents from seeking assistance in the field of mental health are stigma and negative perceptions of such services. Conversely, prior positive encounters with such services and a solid understanding of mental health constitute the most pertinent enablers. Many interventions aimed at encouraging adolescents to seek assistance for mental health issues are currently under development, with the majority of these interventions taking place in higher education institutions. A variety of dissemination methods are incorporated, such as peer training, stigma and melancholy awareness campaigns, online resources, and psychoeducation. Due to the novelty of these initiatives, additional trials with extended follow-up periods and the application of dependable and validated instruments that target future help-seeking behavior are required. Although educational institutions may appear to be the optimal environment for implementing these interventions, it is crucial to acknowledge that adolescents who are not enrolled in school may require greater support for psychosocial and mental health issues.

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