SCHOOL
MENTAL HEALTH

SCHOOL MENTAL HEALTH RESEARCH

Mental Health and Emotional Well-being Among Young People in the Education

Co-funded by
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SCHOOL MENTAL HEALTH
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INDEX

INTRODUCTION

The mental health and emotional wellbeing of students have become a growing concern in the European education sector, particularly in a context marked by social, digital and cultural transformations that directly affect the life experiences of adolescents. In recent years, various international studies and reports have highlighted the rise in issues related to anxiety, stress, depression and social isolation among young people, demonstrating the need to strengthen the capacity of education systems to respond to these challenges.

It is within this framework that the *School Mental Health* project is situated, based on the premise that school is not merely a space for academic learning, but also a key environment for personal, social and emotional development, where many of the experiences that influence young people's mental health take shape.

This report presents the findings of the research carried out as part of the project in five European countries —Romania, Lithuania, Spain, Cyprus and Iceland— with the aim of analysing the current state of pupils' emotional well-being, identifying risk and protective factors, and exploring the perceptions and needs of the various stakeholders involved in the education sector. Through this analysis, the report provides evidence on the relationship between mental health, educational pathways and the social environment, contributing to a better understanding of current challenges in the educational sector.

Furthermore, the transnational nature of the study allows for the identification of common trends and contextual specificities, highlighting the influence of structural, cultural and organisational factors on students' experiences. This comparative perspective is particularly relevant in the European context, where diverse education systems coexist and face similar challenges regarding mental health.

Finally, this report is not merely an end in itself, but is conceived as a knowledge base to guide the subsequent phases of the project. Specifically, its findings will inform the design and development of tools and resources such as a digital platform for emotional wellbeing, training materials and awareness-raising initiatives aimed at the educational community, with the aim of strengthening prevention, detection and support in mental health within the education system.

OBJECTIVES AND METHODOLOGY

The overall objective of the *School Mental Health* project is **to promote the emotional wellbeing and mental health of students aged between 12 and 18 within the European education system**, paying particular attention to those in vulnerable situations.

Specifically, the research carried out in this report seeks to:

- Analyse the relationship between mental health, emotional well-being and students' educational pathways in different national contexts.
- Identify the main risk and protective factors influencing psychological well-being within the school environment, including family, social, academic and digital dimensions.
- Explore the perceptions of various key stakeholders regarding the needs, challenges and existing resources relating to school mental health.
- Compile good practices, intervention strategies and unmet needs in schools.
- Generate comparative evidence at European level to serve as a basis for the design of tools for early detection, prevention and intervention in mental health.

The research was conducted using a mixed-methods approach, combining quantitative and qualitative techniques to gain a comprehensive understanding of the phenomenon. It was structured around three main data collection techniques:

1. Interviews with professionals and experts. Semi-structured interviews were conducted with professionals in the education sector and experts in child and adolescent mental health, with the aim of:

- Identify emerging issues among pupils.
- Identify particularly vulnerable groups.
- Analyse factors in the school and digital environments that influence well-being.
- Gather suggestions for improvement and intervention strategies.

These interviews provide an expert and contextualised perspective based on professional practice.

2. Focus groups with pupils. Focus groups were held with pupils aged between 12 and 15, with the aim of exploring in depth:

- The subjective experience of well-being in the school environment.
- The relational and academic dynamics that generate distress or well-being.
- The perception of stigma surrounding mental health.
- The students' own suggestions for improving their well-being.

This qualitative technique allows us to capture discourses, meanings and needs from the students' own perspective.

3. Student survey. A structured questionnaire was administered to students aged between 16 and 18, which enabled:

- Measure self-perceived mental health and its progression.
- Assess levels of emotional well-being using standardised indicators such as the WHO-5 index[1]
- Analysing school-related factors that influence well-being.
- Identify awareness and use of available support resources.

This quantitative phase facilitates the collection of comparable macro-level data.

The information was analysed using descriptive and statistical analysis of the quantitative data obtained from the surveys, thematic analysis of the qualitative information from interviews and focus groups, and cross-national comparison, enabling the identification of shared trends and contextual specificities between countries.

[1] A cut-off score of 13 out of 25 is used to determine low or high well-being. A score below 13 indicates low well-being and serves as an indicator for administering the depression test (ICD-10).

Below is a summary table of the fieldwork carried out:

	Participants and interviewee profiles	Focus group participants and profile	Survey participants and profile
Romania	10 interviews, 10 people Educational psychologists, secondary school teachers, school counsellors	2 focus groups, 18 people Group 1: 4 boys and 5 girls aged 13, 14 and 15, attending lower and upper secondary levels at a state school Group 2: 4 boys and 5 girls aged 13, 14 and 15, attending lower and upper secondary levels at a state school	55 respondents 10 boys and 45 girls aged between 16 and 18. 52 students and 3 students who are also in employment
Lithuania	10 interviews, 10 people Psychologists, psychology assistants, teachers (tutors and special needs teachers), speech therapists	1 focus group, 19 people 6 boys and 13 girls aged 12 and 13, in Year 7 at a private school	81 respondents 21 boys, 58 girls and 2 unspecified, aged between 16 and 18. 68 students and 13 students who are also working
Spain	15 interviews, 15 people Psychologists (educational, child and adolescent), counsellors (educational, career), teachers, tutors, coordinators and project officers in social organisations, environmental educators	1 focus group, 12 people 5 boys and 7 girls aged 12, 13 and 14; in Years 7 and 8 at a state school	85 respondents 29 boys, 55 girls and one unspecified, aged between 16 and 18 76 students and 9 students who are also in employment
Cyprus	10 interviews, 10 people Psychologists, research staff, educators, teachers, school counsellors	1 focus group, 6 people 3 boys and 3 girls aged 15, attending a private school	50 respondents 16 boys, 33 girls and one unspecified person aged between 16 and 18 42 students and 8 students who are also working
Iceland	9 interviews, 10 people Guidance counsellors, school and educational counsellors, psychologists, teachers, education specialists, behavioural therapists	No fieldwork carried out	58 respondents 23 boys, 30 girls, one non-binary person and 4 unspecified, aged between 16 and 18 38 students and 20 students and workers at the same time

ROMANIA

CURRENT STATE OF MENTAL HEALTH AND EMOTINAL WELLBEING AMONG ROMANIAN STUDENTS

Overview of mental health and emotional wellbeing among young people

The current state of mental health among Romanian students aged 12 to 18 reveals an alarming and structurally complex situation. Various national and international studies agree that there has been a sustained increase in emotional distress, with high levels of anxiety and depressive symptoms, as well as a worrying rise in suicidal thoughts and behaviours.

According to UNICEF (2022), almost one in three adolescents aged 11 to 15 say they feel sad several times a week, a figure significantly higher than the average recorded across 45 countries (13%). This downward trend in life satisfaction reflects an emotional climate characterised by vulnerability and emotional instability.

One of the most alarming findings relates to suicidal behaviour. A recent national study revealed that **almost half of adolescents had experienced suicidal thoughts at least once**, more than a quarter felt persistently sad and trapped by their emotions, and more than a fifth had experienced depression in the previous six months (National Institute of Public Health, 2024).

According to the Ministry of Education and Research (2025), sociodemographic factors exacerbate these inequalities. Gender emerges as one of the strongest predictors of psychological distress: **girls exhibit higher levels of depressive symptoms, persistent sadness and suicidal thoughts than boys**. Furthermore, students from ethnic minorities or vulnerable groups face additional risks: almost half of Romanian pupils report feeling unsupported at school, whilst more than a third of refugee students are at risk of emotional distress. For their part, pupils with special educational needs frequently experience stigmatisation and insufficient curricular adaptations, which can lead to withdrawal, exclusion or self-harm.

Educational context and factors associated with well-being

Educational participation among Romanian students aged 12 to 18 shows significant inequalities closely linked to emotional well-being and social vulnerability. Although the early school leaving rate has fallen from 18.1% to 16.8% between 2017 and 2024, it remains well above the European Union average of 9.3% (Eurostat, 2025), reflecting a persistent structural challenge. Regional disparities are particularly pronounced: **rural areas have dropout rates that are double or triple those of urban areas,** and certain regions have particularly high levels of educational exclusion.

Evidence suggests that socio-economic disadvantage, poverty and ethnic marginalisation—particularly among Roma pupils—are key factors in the interruption of educational pathways (Rodica-Corina, 2023). Added to this are critical moments in the school journey, such as educational transitions or preparation for highly demanding exams, which intensify emotional pressure and can lead to absenteeism or dropping out. High levels of sadness, anxiety and depressive symptoms also contribute to withdrawal and loss of motivation, phenomena observed by both teachers and families.

Bullying, both in-person and online, exacerbates this situation. **Almost 30% of students report having experienced bullying or cyberbullying in the last year** (National Institute of Public Health, 2024), experiences that have a negative impact on self-esteem, a sense of belonging and connection with school.

Despite widespread recognition of the importance of social-emotional development, psycho-educational support services in schools remain limited and uneven. According to the Ministry of Education and Research (2025), **96% of teachers consider socio-emotional learning skills to be essential, and 91% state that they have a direct influence on academic performance and on reducing bullying**. However, this assessment does not translate into robust implementation, due to a lack of time, resources and specific training. School counsellors also point to structural shortcomings such as staff shortages, ambiguity in the definition of roles, a lack of coordination with teaching staff, and the superficial or inadequate allocation of counselling hours, which limits schools' potential to function as effective spaces for emotional safety.

RESULTS

Below are the most representative findings following interviews with 10 professionals in the education sector or experts in child and adolescent mental health, a survey of 55 students aged between 16 and 18, and two focus groups with students aged between 13 and 15.

THE VIEWS OF PROFESSIONALS AND EXPERTS

What are the main emotional and/or mental health problems you observe in adolescent students today?

As shown in Table 1, professionals and experts note that **students' mental health is significantly affected by the family environment,** as children from single-parent households or those raised by other relatives face additional challenges. Anxiety and stress-related issues are common among students, as are problems of agitation, frustration and anger caused by excessive use of technology. Furthermore, students often suffer from various emotional imbalances and difficulties caused by their age or by different periods of transition.

Table 1. Most frequently mentioned mental health issues

Mental health issue identified	No. of interviews mentioning it	Analysis of the problem
Family issues (family emotional health)	8	Significant impact on emotional regulation (particularly in single-parent households, or where children are raised by grandparents or aunts)
Anxiety and stress-related problems	7	Common patterns among students, leading them to resist seeking counselling
Inability to focus and concentrate (restlessness, frustration, anger issues)	5	Excessive use of technology significantly reduces the ability to concentrate at school and can lead to various problems and reactions: anger, frustration, aggression
Emotional imbalances and difficulties (age-related)	4	Pupils often display behaviour that deviates from the norm due to age-related emotional turbulence or other significant life events (puberty, starting secondary school)
Low self-esteem and self-exclusion	3	Low self-esteem is common and often requires individual counselling. Vulnerable children often isolate themselves or feel marginalised, increasing their risk of emotional and mental health problems

Note: Compiled by the author.

Which groups are most affected and/or vulnerable?

The importance of the family environment is also highlighted in the analysis of vulnerable groups (Table 2). There is a broad consensus that **instability in the family structure is the most critical determinant of mental health in schools**. A specific vulnerability is identified among students from single-parent households or with 'absent parents' (often due to labour migration), suggesting that the absence of daily emotional support and the delegation of care to other family members constitutes the main gap in emotional protection. Secondly, a digital vulnerability emerges, where participation in social media is not perceived as a mere leisure activity, but as a risk factor that generates overstimulation and exposure to toxic dynamics. This picture is completed by inevitable developmental factors, such as puberty and school transitions, and structural factors of social and ethnic exclusion, creating a scenario where psychosocial risk is multidimensional.

Table 2. Groups in situations of greater vulnerability

Identified vulnerable group	No. of interviews mentioning it	Associated vulnerability factors
Students facing family problems (single-parent households, absent parents)	8	Divorced parents, parents working abroad, single-parent households, children raised by grandparents or aunts
Students who are active on social media and digital platforms	6	Overstimulation caused by technology, irresponsible use of social media
Students going through puberty or school transitions	5	Age, hormonal factors, peer relationships
Students facing social and economic disadvantages or belonging to minority groups	3	Financial constraints, marginalisation and ethnic bullying

Note: Compiled by the author.

Which elements of the school environment—including relationships, classroom dynamics and the use of technology—do you observe as having the greatest influence on pupils' mental health and emotional well-being?

As shown in Table 3, the **unregulated use of social media, digital devices and Artificial Intelligence** is identified as the root cause of cognitive and behavioural disturbances, such as an **inability to concentrate, additional social pressure or inappropriate social behaviour**. Similarly, the relational dimension emerges as a key determinant of student wellbeing, characterised by its positive or negative bidirectional nature. Finally, academic pressure persists as a cross-cutting burden, eroding students' emotional stability.

Table 3. School and digital environment factors

Identified factor	Type of factor*	No. of interviews mentioning it	Perceived impact on well-being**
Excessive use of technology, social media and artificial intelligence	Digital	7	Risk factor
Relationships with peers and teachers	Relational	7	Mixed factor
Academic pressure (exams, marks, homework)	Academic	5	Risk factor
Relationships with parents	Relational	3	Mixed factor

* Type of factor: Academic | Relational | Organisational | Digital
** Perceived impact: Risk factor | Mixed factor | Protective factor
Note: Own work.

Which resources, strategies or support measures implemented have proven most effective in promoting students' mental health and preventing bullying or suicide in schools?

An analysis of the strategies considered most effective by professionals and experts reveals an ecosystemic model. Table 4 highlights a consensus on **positioning collaboration with families as the cornerstone of prevention,** recognising that schools cannot operate in isolation; parents must be empowered to ensure emotional support continues at home.

Simultaneously, and with equal importance, the validation of technological resources (platforms, short videos or reels) as legitimate therapeutic tools emerges. This suggests that professionals recognise the need to adapt the language of mental health to the communicative codes of 'Generation Z', using the digital environment — usually viewed as a threat — as an effective channel for prevention. This approach is complemented by the engagement of peer groups through mentoring and discussions, confirming that reducing social isolation and building horizontal support networks are also important.

Table 4. Resources, strategies or support to be implemented

Identified resources or support	Level of intervention*	No. of interviews mentioning it	Reason for perceived effectiveness
Collaboration with parents	School, Community	6	Providing resources, guidance and support to parents strengthens their ability to collaborate with schools in supporting students' emotional development.
Materials and technological resources	School	6	Digital platforms, social media content and short videos or reels can effectively convey messages that previously relied on face-to-face therapy.
Group activities, counselling and discussions	Group	5	Peer support, mentoring programmes and group activities help students tackle challenges and reduce feelings of isolation.
Guides, written materials	School	5	Valuable references and inspiration for designing effective interventions.

* Level of intervention: Individual | Group | School | Community/external services
Note: Own work.

If you could propose key changes to improve emotional wellbeing and mental health care in schools, what would they be?

Table 5 on proposals for priority improvements reveals a consensus on placing only **measures related to human capital** at the 'high priority' level: **adequate staffing and staff preparation and training**. This suggests that schools operate under structural precariousness that prevents effective interventions. The legal framework and institutional collaboration take a back seat, indicating that, for professionals and experts, policy regulation and collaboration protocols form the basis for having specialised and trained human resources.

Table 5. Priority improvement proposals

Proposal for improvement	Type of change*	No. of interviews mentioning it	Perceived level of priority**
Adequate staffing in schools	Organisation, Human Resources	6	High
Preparation and training of staff and counsellors	Training	4	High

Clear legal framework and institutional collaboration	Policies	3	Medium
Collaboration between teachers, counsellors and parents	Organisation	3	Medium

* Type of change: Organisational | Training | Human resources | Protocols/policies | Prevention/promotion
** Perceived priority: High | Medium | Low
Note: Own work.

Conclusion:

Overall, professionals and experts paint a picture of adolescent mental health shaped by family, digital and relational factors, where family instability is the main source of vulnerability, alongside anxiety and difficulties linked to excessive use of technology. The school environment is presented as an ambivalent space, capable both of intensifying distress—due to academic pressure and digital overexposure—and of acting as a protective factor through positive relationships and peer support. They also agree that improvement requires, as a priority, strengthening the human capital of educational institutions.

THE PERSPECTIVE OF YOUNGER PUPILS (AGES 12–15)

The analysis of the two focus groups conducted is structured around four main themes: determinants of well-being at school, mental health and stigmatisation, the physical and relational environment, and proposals for intervention.

1. Determinants of well-being: the tension between socialisation and academic pressure

The students' accounts reveal a clear dichotomy in the school experience. On the one hand, **socialisation among peers** acts as the main protective factor for well-being. Participants in both groups consistently identified their classmates, break times and collaborative activities (such as sports and volunteering) as the primary sources of satisfaction.

On the other hand, **academic pressure** emerges as the predominant stressor. This pressure manifests itself through:

- **Workload and fatigue:** Students in one of the groups describe a feeling of exhaustion due to the volume of tasks and lack of free time, which causes anxiety and limits their rest.

- **Comparison and competition:** There is a critical perception of the competitiveness fostered both by teachers and by peer self-assessment. The comparison of grades is mentioned as a source of conflict that devalues individual effort and marginalises those with varying levels of performance.

- **External expectations:** Pressure from parents and teachers for academic excellence is identified as a trigger for emotional distress.

2. Mental health: stigma, needs and communication gap

The results highlight an unmet demand for emotional education. Although the school provides a theoretical foundation, students feel they lack the tools for emotional self-management and interpersonal communication.

- **Persistence of stigma:** In one of the groups, it is explicitly noted that mental health issues are rarely discussed openly due to the existing stigma.

- **Priority issues:** Students in both groups call for attention to critical issues such as social anxiety, depression, self-esteem, self-harm and bullying. In one of the groups, the creation of a specific subject focusing on personal life and emotions is suggested.

- **Ineffectiveness of current measures:** It is felt that current campaigns (such as anti-bullying campaigns) are ineffective unless accompanied by strict sanctions and clear consequences for inappropriate behaviour.

3. The role of technology: tool and distraction

Perceptions of technology are ambivalent and vary depending on the context of use:

- **As a teaching resource:** It is viewed very positively when the school provides equipment (interactive whiteboards, digital resources) and when teachers are open to its use.

- **As a psychosocial risk:** Like professionals and experts, students in one of the groups warn of social media addiction and its negative impact on concentration and emotional well-being. They also express concern about the excessive use of Artificial Intelligence, fearing it may affect their creativity and language development in the long term.

4. The school environment as a facilitator: spaces and relationships

To improve day-to-day wellbeing, students propose a restructuring of both physical spaces and relational dynamics.

4.1. Transformation of spaces

There is a consensus on the need for **'decompression' spaces** separate from the traditional classroom. Proposals include:

- Relaxation rooms and spaces for informal socialising.
- Spaces dedicated to the arts (music, drama) and specialised laboratories (languages) that encourage interactive learning.
- An expanded school library that serves as a haven for silence and reflection.

4.2. Redefining the teacher-student relationship

Students are calling for a more horizontal and humanised relationship. The aim is to foster:

- **Empathy and trust:** Moving from a purely academic interaction to a connection based on trust, where the teacher knows and prioritises the student's well-being.
- **Equity:** Preferential treatment is criticised, and justice and inclusion are demanded, avoiding favouritism.
- **Recognition:** Positive feedback and recognition of achievements by teachers are identified as powerful motivators.

5. Proposals for support formats

Regarding the implementation of support services, students reject rigid formats. They prefer interventions characterised by:

- **Interactivity:** Practical workshops, the use of film forums to spark debates, and *team-building* activities involving both teachers and students.
- **Focus on interests:** Activities centred on creative hobbies (art, music) as a way to relieve stress.
- **Safety:** Setting up discussion groups and support groups in confidential, non-judgemental spaces to address sensitive issues (racism, misogyny, mental health).

Conclusion:

From the perspective of young people, student wellbeing is compromised by a culture of high achievement and comparison. Whilst peer relationships act as the main source of support, excessive workloads, competitiveness and external expectations generate anxiety and emotional exhaustion. There is also a clear demand for greater emotional education and for breaking the stigma surrounding mental health. Technology is perceived as a useful tool but also as a risk to concentration and well-being. Ultimately, they call for a more humane, participatory school focused on holistic care.

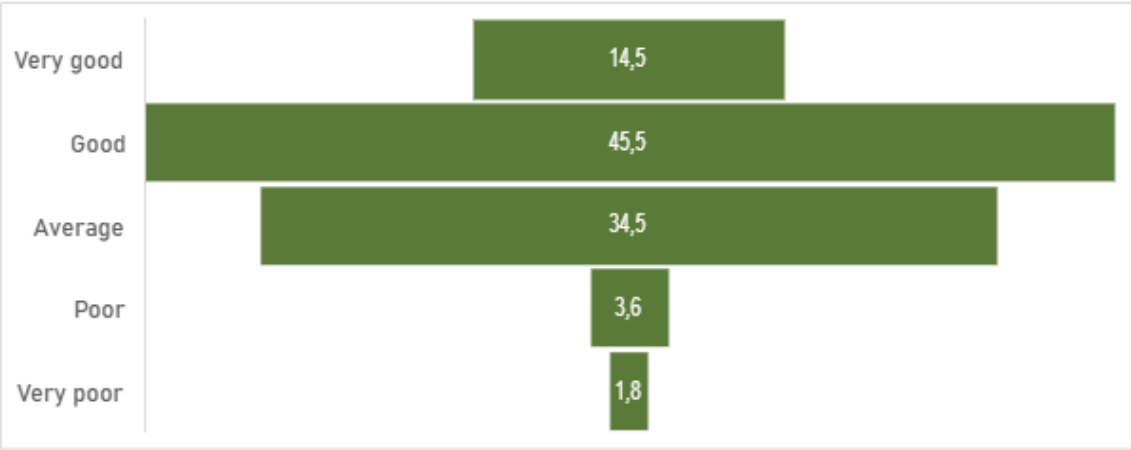
THE PERSPECTIVE OF STUDENTS AGED 16 TO 18

1. Regarding their mental health

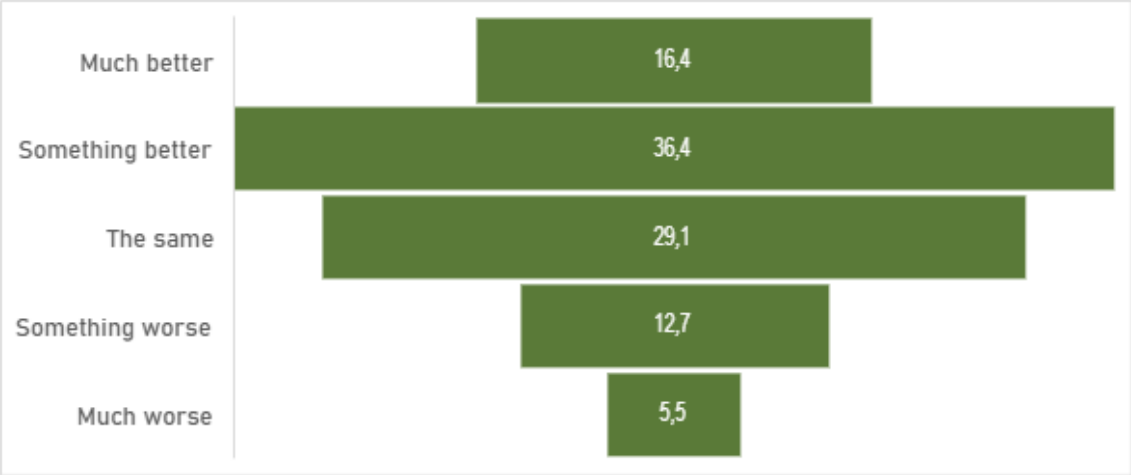
Figures 1 and 2 show a largely positive perception of mental health among the 16- to 18-year-old students surveyed (n=55). In general terms, **60% of respondents rate their mental health as good or very good**, compared with 5.4% who rate it as poor or very poor. Compared with the previous year, a positive trend also prevails: 52.8% say they are somewhat or much better, compared with 18.2% who perceive a deterioration. Overall, the data reflect a perception of stability and improvement compared with the previous year.

Figures 1 and 2. Self-assessment of general mental health and mental health over the past year

General mental health (% of responses)



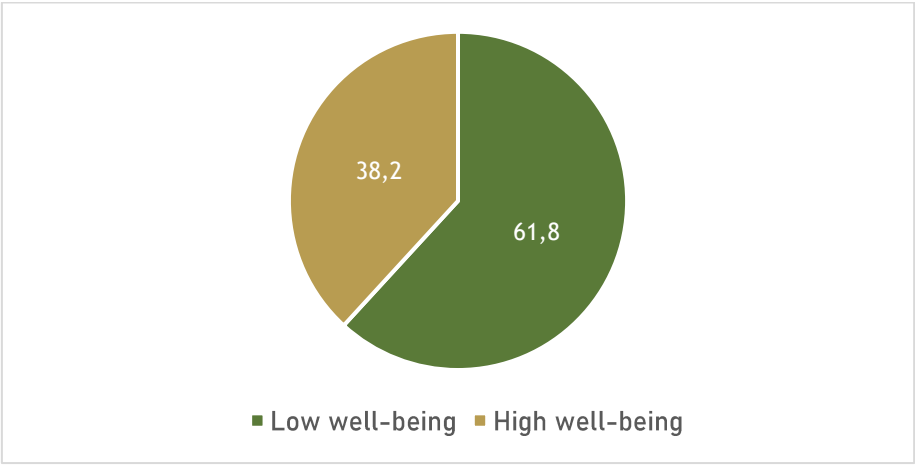
Mental health compared to a year ago (% of responses)



n: 55
Note: own compilation

When comparing the data on perceived well-being (Figure 3) with the previous figures, a certain tension becomes apparent. The WHO-5 index shows that **61.8% are at low levels of well-being**, compared to 38.2% at high levels, with an average of 12.23 points. Given that on this scale, scores below 13 indicate possible emotional distress and a risk of depressive symptoms, the average obtained falls at the warning threshold. This suggests that, although students generally tend to perceive themselves as 'doing well', a significant proportion may be experiencing fragile or fluctuating emotional well-being.

Figure 3. Levels of emotional well-being (% of responses)



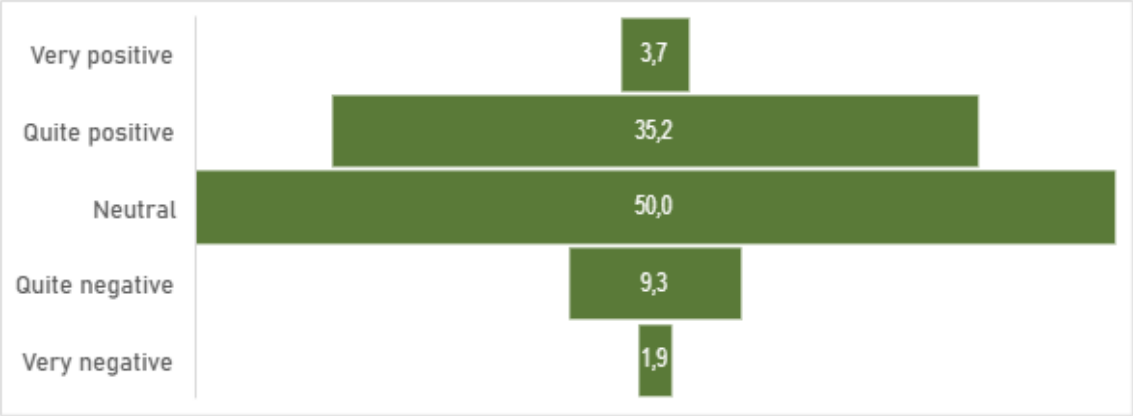
n: 55, m= 12.23/25

Note: Chart based on the WHO-5 well-being index, with the items: cheerful and in a good mood/calm and relaxed/active and energetic/fresh and rested/life full of things that interest me. Own creation.

2. Regarding their well-being at school

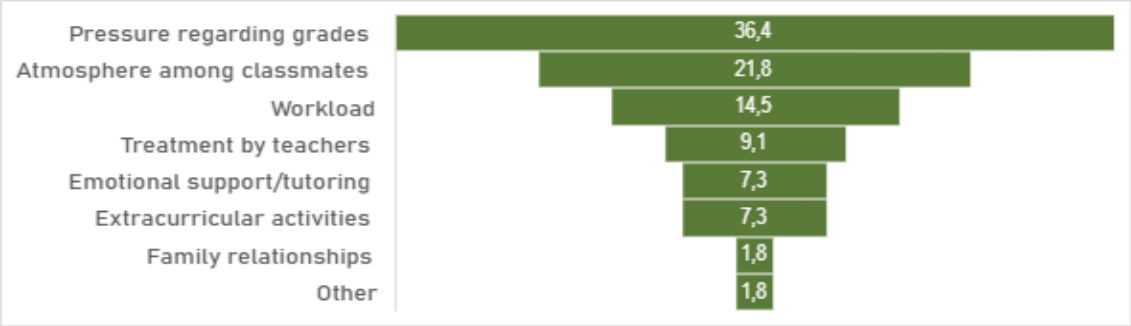
Looking at students' well-being at school (Graph 4), the data show that their experience is mostly perceived as neutral (50%), followed by a fairly positive assessment (35.2%). This distribution suggests a school experience that is more stable than enthusiastic, where ambivalence predominates. When analysing the **factors that most influence feelings within the educational environment using Figure 5, pressure regarding grades (36.4%) clearly stands out** as the main determining factor, ahead of the atmosphere among peers (21.8%) and the workload (14.5%). In the background are the treatment by teachers (9.1%) and emotional support or tutoring (7.3%), whilst family relationships have a marginal impact (1.8%). Overall, the results reinforce the idea that the emotional climate at the school is strongly influenced by academic performance and assessment.

Figure 4. Overall assessment of the experience at the school (% of responses)



n: 55
Note: own compilation

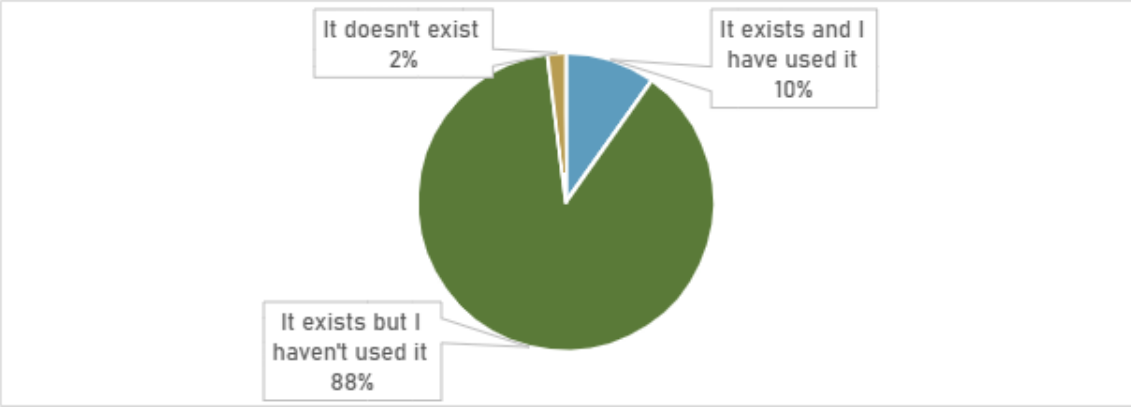
Figure 5. Main factors influencing student well-being in the educational environment (% of responses)



No.: 55
Note: compiled by the author

With regard to support resources at school, Figure 6 reveals that, although students identify emotional or psychological support resources in most of the schools interviewed, their use is very limited. **88% of pupils state that these resources—including tutoring, guidance, school psychologists, mentoring, support groups, etc.—are available but have not used them, compared to just 10% who say they have used them,** and 2% who say they do not exist. This data suggests a significant gap between the formal availability of support and its actual use, which may be linked to stigma, a lack of information, or the perception that these services do not fully meet their needs. In the context described above—characterised by academic pressure and significant levels of low well-being—this under-utilisation points to the need to strengthen the accessibility, visibility and trust in support mechanisms within the school environment.

Figure 6. Availability and use of emotional/psychological support resources in the school (% of responses)



n: 51
Note: own compilation

3. Resources or initiatives to be implemented at school

From a proactive perspective, pupils identify the resources that could strengthen their emotional wellbeing at school. Table 6 shows that there is a particularly strong **demand for specific guidance on managing stress, anxiety or frustration (61.1%),** confirming the need to provide them with practical self-regulation tools. Furthermore, the importance of creating quiet spaces or relaxation areas (42.6%) and promoting activities that foster coexistence, respect and empathy (40.7%) is highlighted, thereby strengthening both the physical environment and the social atmosphere.

Furthermore, on average, each participant selected more than two options, reinforcing the idea that interventions aimed at improving well-being at school must be approached in a multidimensional way.

Table 6. Resources that would help improve emotional well-being in the educational environment

	% of students who mentioned it
Guidance on how to manage stress, anxiety or frustration	61.10%
Quiet spaces or relaxation areas within the school	42.60%
Activities that promote social interaction, respect and empathy	40.70%
More opportunities to discuss how we feel as a group or with teachers	25.90%
Access to emotional or psychological support professionals	25.90%
Sports, arts or personal expression activities	25.90%
Peer support (groups, mentoring or school mediators)	24.10%

n: 54
Note: own compilation

With regard to the digital sphere (Table 7), students express a clear need for structured, educational support to feel more confident and comfortable using technology. The main suggestion is to have support from professionals—tutors, counsellors or

psychologists—to resolve digital problems (40.7%), followed by reducing the pressure associated with online assignments and exams (35.2%) and creating spaces to develop specific digital skills (33.3%). Activities that promote the responsible use of social media (31.5%), workshops on security and privacy (25.9%) and resources to prevent cyberbullying (25.9%) are also valued.

These figures take on particular significance when one considers that 59% of the students surveyed have used Artificial Intelligence to search for information or tackle school-related problems—and 20% do so frequently—which shows that technology is already an active part of their coping strategies. In this context, it is consistent that students are calling for guidance, balanced regulation and critical skills to integrate technology safely and healthily into their educational experience.

Table 7. Resources that would help students feel more confident and comfortable using technology and navigating the digital environment at school

	% of students who mention this
Support from professionals (tutors, counsellors or psychologists) to resolve digital problems	40.70%
Less pressure or demands related to digital assignments or online exams	35.20%
Spaces to learn and practise digital skills (programming, editing, design, etc.)	33.30%
Activities that encourage the responsible use of social media and apps	31.50%
Workshops or classes on internet safety and privacy	25.90%
Resources to prevent cyberbullying and resolve online conflicts	25.90%
Peer support (mentoring or support groups for technology use)	14.80%

n: 54
Note: own compilation

Finally, regarding structural changes to improve well-being in the school (Table 8), pupils prioritise **greater explicit attention to mental health and well-being within the classroom itself (41.8%),** which reinforces the demand to integrate emotional care into the core of the educational project. They also call for greater participation in school decision-making (29.1%) and better communication between teachers, families and students (27.3%), highlighting the need for more inclusive and dialogue-based governance. On the relational and organisational level, they also agree on more cooperative activities rather than competitive ones (23.6%), more safe and pleasant rest areas (21.8%) and greater teacher training in emotional wellbeing and social interaction (20%). Taken together, the proposals point towards a cultural transformation of the school, based on participation, cooperation and the centrality of wellbeing as an educational pillar.

Table 8. Changes or initiatives to improve the sense of well-being and support in the school

	% of students who mention it
Greater focus on mental health and wellbeing in the classroom	41.80%
Greater student participation in school decision-making	29.10%
Better communication between teachers, families and students	27.30%
More cooperative and fewer competitive activities	23.60%
More safe and pleasant rest or recreation areas	21.80%
Teacher training in emotional wellbeing and social interaction	20.00%
Promoting respect and inclusion for everyone (without discrimination)	14.50%
Peer tutoring or mentoring programmes	1.80%

n: 55
Note: own compilation

Conclusion:

Overall, older students (aged 16–18) report a generally positive perception of mental health, but with a more fragile emotional foundation when analysed in depth. The school experience is characterised by a tension between the support provided by peer relationships and academic pressure as the main source of distress. Technology plays a central role in students' lives, although it requires greater guidance and support. There is also a gap between the availability of support resources and their actual use. Students are calling for more emotional education integrated into lessons and spaces for relaxation. In short, there is a clear need to place well-being at the heart of the educational project.

LITHUANIA

CURRENT STATE OF MENTAL HEALTH AND EMOTINAL WELLBEING AMONG LITHUANIAN STUDENTS

Overview of mental health and emotional wellbeing among young people

In Lithuania, the mental health of adolescents is a priority area for public attention, due to the high prevalence of emotional distress, psychosocial difficulties and adverse experiences reported in various national and international studies.

The results of the 2022 *Health Behaviour in School-aged Children (HBSC)* study indicate that **one in five young people rate their health as fair or poor**, and 46% report experiencing two or more health complaints more than once a week (Šmigelskas et al., 2024). There is also an increase in psychosomatic complaints such as headaches, back pain and abdominal pain, alongside an increase in nervous tension, irritability, sadness and depressive feelings (Ibid.).

Emotional distress is particularly evident in indicators of anxiety and depression. **One in four students reports moderate or high levels of anxiety; almost a quarter of Year 9 pupils say they feel depressed**; 14% report having had suicidal thoughts; and 6% admit to having attempted suicide (Šmigelskas et al., 2024). Furthermore, a study conducted following the second COVID-19 lockdown indicated that 58% of adolescents exhibited a good level of psychological well-being according to the WHO-5 index, whilst approximately 19% showed a risk of depression (Jusienė et al., 2022).

With regard to traumatic experiences, research by the Centre for Psychotraumatology at Vilnius University reveals that **48.1% of adolescents have suffered serious accidents or injuries, 40.1% have witnessed physical assaults in the community**, and 38.6% have undergone stressful medical procedures (Kazlauskas et al., 2022). These experiences are associated with an increased risk of post-traumatic symptoms and emotional difficulties.

As for suicidal behaviour, data from the Institute of Hygiene show a **downward trend in suicide mortality** among 10- to 19-year-olds between 2019 and 2023. The rate fell **from 1.8 to 0.4 cases per 100,000** children, and in 2023 no suicides were recorded among under-14s; in the 15–19 age group, deaths fell from 17 cases in 2019 to 6 in 2023 (Institute of Hygiene, 2025).

Educational context and factors associated with well-being

The school environment plays a central role in shaping adolescent well-being. Data from the HBSC reveal significant deficits in perceived social support: **41% of pupils report insufficient family support, 45% perceive insufficient support from friends**, more than half consider support from peers to be insufficient, and approximately two-thirds indicate a lack of support from teachers (Šmigelskas et al., 2024).

Bullying is one of the main risk factors. According to an international report coordinated by the World Health Organisation, **Lithuania ranks among the countries with the highest prevalence of school bullying and cyberbullying in Europe**, standing out with the highest rates of victimisation by school bullying, affecting 34% of 11-year-old boys and 33% of 13-year-old girls (Cosma et al., 2024). In the digital sphere, the situation is equally critical: 15-year-old Lithuanian boys have the highest prevalence of cyberbullying in the entire study, reaching 40%. These figures contrast sharply with the study's overall averages, where around 11% of adolescents experience recurrent school bullying and 12% report having cyberbullied others. (Ibid.).

In response to these needs, the **education system has progressively increased its specialist staff.** Between the 2020–2021 and 2024–2025 academic years, the number of school psychologists rose from 515 to 637, that of social pedagogues from 902 to 929, and that of special needs teachers from 433 to 589 (Official Statistics Portal, 2025).

However, various analyses point to structural limitations, such as the persistence of a predominantly medical approach, insufficient focus on prevention and early intervention, a shortage of specialists, and regional inequalities in access to services, particularly in rural areas (Gaudiešiūtė & Kavaliauskaitė, 2020; EUCOMS Network, 2025). In recent years, community-based models and emotional wellbeing counselling services have been promoted (Ministry of Health of the Republic of Lithuania, 2024), alongside innovative proposals such as the complementary use of digital tools to improve accessibility and reduce stigma (Bagdžiūnaitė et al., 2021). However, the heavy workload of school professionals continues to limit the continuity and long-term impact of interventions (Gaudiešiūtė & Kavaliauskaitė, 2020).

RESULTS

The following section presents the main findings from the fieldwork carried out in Lithuania, which included in-depth interviews with 10 education professionals and experts in child and adolescent mental health, a survey of 81 students aged 16–18, and a focus group with pupils aged 12 and 13.

THE VIEWS OF PROFESSIONALS AND EXPERTS

What are the main emotional and/or mental health problems you observe in adolescent students today?

As shown in Table 9, professionals and experts identify **excessive screen time and social media** use as a key trigger that severely impairs concentration and fosters self-esteem issues through unrealistic comparisons. **Social anxiety** and a lack of **emotional self-regulation** are also identified, leading to increased interpersonal conflicts and a profound lack of motivation for learning within the physical classroom environment. Furthermore, low self-esteem, influenced by the internet's imposition of unrealistic standards, is also a significant factor.

Table 9. Most frequently mentioned mental health issues

Mental health issue identified	No. of interviews mentioning it	Analysis of the problem
Excessive use of and addiction to technology and social media	6	Excessive time spent on digital devices and platforms, leading to problems with disconnecting from reality, lack of rest and difficulties in face-to-face interaction
Difficulties with emotional regulation and conflicts	5	Inadequate anger management, interpersonal tensions arising from poor communication, and severe problems with social adaptation and behaviour
Problems with attention, concentration and motivation	4	An increasingly short attention span, excessive reliance on AI for academic tasks, and apathy or outright rejection of traditional learning
Low self-esteem and identity issues	4	Constant insecurities regarding physical appearance or social expectations, largely

		caused by comparison with unrealistic standards found online

Note: Compiled by the author.

Which groups are most affected and/or vulnerable?

Table 10 reveals that there is a certain consensus that vulnerability at school is strongly determined by the lack of solid support networks to address integration challenges. On the one hand, **pupils with Special Educational Needs (SEN) face constant stigmatisation**, labelling and rejection by their peers, which generates hostility and emotional sensitivity. On the other hand, **the fragility of the family environment** (absent parents, divorce proceedings or socio-economic disadvantage) leaves children without the necessary supervision to regulate their digital and emotional lives. This vulnerability spikes during periods of academic transition, critical stages marked by puberty and the pressure to fit in. Finally, this situation reaches levels of great relational complexity among transferred students or war refugees who must cope with language barriers, culture clashes and previous trauma.

Table 10. Groups in situations of greater vulnerability

Identified vulnerable group	No. of interviews mentioning it	Associated vulnerability factors
Pupils with Special Educational Needs (SEN)	6	They are frequently victims of labelling or stigmatisation and are more sensitive to rejection by their peers
Children from vulnerable, dysfunctional or absent families	6	Lack of supervision in their digital lives, parental divorce or parents from disadvantaged socioeconomic backgrounds
Adolescents in periods of educational transition	5	Critical stages marked by significant physical changes due to puberty and the need to fit in socially
Pupils transferred from other schools or war refugees	2	Carrying trauma from armed conflicts (refugees from Ukraine, Russia, Belarus) or previous experiences of bullying at other schools

Note: Compiled by the author.

Which elements of the school environment — including relationships, classroom dynamics and the use of technology — do you observe as having the greatest influence on pupils' mental health and emotional well-being?

As shown in Table 11, **the unrestricted use of mobile devices and social media is the main risk factor**, as it reduces concentration, encourages isolation and disrupts rest. As an organisational countermeasure, **restricting mobile phones during the school day acts as a protective measure**, forcing pupils to reconnect physically during break times and improving classroom dynamics. Likewise, a warm social climate and a strong bond of trust between teachers and pupils act as vital shields for emotional wellbeing. On the other hand, whilst academic pressure increases anxiety, the lack of inclusive extracurricular activities exacerbates technological dependence, leaving pupils without alternatives for shared leisure activities.

Table 11. School and digital environment factors

Identified factor	Type of factor*	No. of interviews mentioning it	Perceived impact on well-being**
Intensive use of mobile devices and social media	Digital / technological	6	Risk factor
Organisational restrictions on mobile phone use in the classroom	Organisational	6	Protective factor
Quality of the classroom atmosphere and teacher-student relationship	Relational	5	Protective factor
Level of academic pressure and competitive assessment	Academic	4	Mixed factor

* Factor type: Academic | Relational | Organisational | Digital
** Perceived impact: Risk factor | Mixed factor | Protective factor
Note: Own work.

Which resources, strategies or support measures implemented have proven most effective in promoting students' mental health and preventing bullying or suicide in schools?

An analysis of the strategies considered most effective by professionals and experts (Table 12) shows that the success of support measures and resources lies in combining social-emotional learning with networking and adapting the physical school environment. On the one hand, the **consistent implementation of preventive programmes** (such as SEU, VEIP or Lions Quest) and small-group work are fundamental to fostering empathy and self-awareness, and to addressing sensitive issues in a way that is safe for the pupil. Likewise, the **collaborative, interdisciplinary approach—which actively involves teachers, various specialists, families and external services**—is vital to ensuring that emotional support has real continuity and does not fall on the shoulders of a single person. Finally, the creation of alternative spaces for relaxation and socialisation is seen as a key strategy, whether by setting up relaxation and sensory rooms for self-regulation, or by promoting informal activities (such as clubs or film forums) that help rebuild face-to-face connections.

Table 12. Resources, strategies or support to be implemented

Identified resources or support	Level of intervention*	No. of interviews mentioning it	Reason for perceived effectiveness
Structured programmes on preventive and socio-emotional skills	School	7	Provide knowledge on bullying prevention, self-awareness and emotion management (e.g. SEU, Lions Quest, VEIP) through guided and consistent work
Interdisciplinary collaborative work and parental involvement	Community/external services	5	Aligning approaches between specialists, teachers and families ensures that the changes achieved at school are effectively sustained at home
Training in values and	Group	4	Fosters empathy and a sense of

ethics from Year 1 onwards and in small groups			community responsibility from an early age; small groups provide a safer environment for pupils to participate
Preventive interventions in playful, creative formats and clubs	School	3	Informal activities such as film forums or extracurricular clubs attract pupils due to their accessible format and foster a valuable sense of peer community

* Level of intervention: Individual | Group | School | Community/external services
Note: Own work.

If you could propose key changes to improve emotional wellbeing and mental health support in schools, what would they be?

Table 13 shows that the proposed priority improvements focus mainly on structural and community-based strengthening of the education system. The most widely supported measure is **increasing specialist and support staff for pupils with special educational needs**, indicating a clear perception that there are insufficient human resources to adequately address the diversity and emotional complexity of the pupil population. Secondly, **the importance of actively involving and training families in matters of well-being** is highlighted, demonstrating that professionals believe that school intervention should extend to the family environment.

Meanwhile, reducing competitiveness and academic pressure, as well as creating and optimising physical spaces for rest and interaction, are ranked as medium priorities. Overall, the table shows a focus on feasible improvements that combine strengthening human resources, shared family responsibility and organisational adjustments to the school environment.

Table 13. Priority improvement proposals

Proposal for improvement	Type of change*	No. of interviews mentioning it	Perceived level of priority**
Increase specialist and support staff for pupils with SEN	Human resources	5	High
Actively involve and educate families on wellbeing	Training, Prevention/promotion	4	High
Reducing competitiveness, rankings and academic pressure	Organisational	4	Medium
Creating and optimising physical spaces for rest and interaction	Organisational	4	Medium

* Type of change: Organisational | Training | Human resources | Protocols/policies | Prevention/promotion
** Perceived priority: High | Medium | Low
Note: Own work.

Conclusion:

The analysis reveals that adolescent mental health in the school environment is affected by excessive screen time and social media use, anxiety, low self-esteem and interpersonal conflicts, particularly among students who already have pre-existing vulnerabilities—such as those with SEN, those undergoing academic transitions or those with limited family support. At the same time, the school environment can act as both a risk factor (where there is excessive academic pressure or limited opportunities for socialisation) and a protective factor, particularly when teacher-student relationships are strengthened, technology use is regulated, and systematic social-emotional programmes are implemented.

Proposals for improvement point towards a structural transformation based on more specialised human resources, greater family involvement and organisational adjustments that prioritise well-being over competitiveness.

THE PERSPECTIVE OF YOUNGER STUDENTS (AGES 12–15)

The focus group discussion reveals a latent tension between the need for adolescent autonomy and a school structure perceived as inconsistent and intrusive. As such, the analysis is structured around relational well-being among peers, regulatory inconsistency, breaches of confidentiality and a preference for the digital sphere.

1. Relational well-being: the centrality of peer relationships

For this age group, well-being at school is intrinsically social. Participants identify relationships with 'kind and supportive' peers as the main factor that makes them feel good.

- **Selective socialisation:** There is explicit resistance to teachers imposing working groups. Students demand autonomy to choose their team-mates, arguing that comfort and pre-existing friendship are prerequisites for effective work.
- **The classroom as a space for mental order:** An interesting correlation is observed between physical organisation and psychological stability. Whilst some tolerate changing seats by drawing lots, the idea emerges that "when there is chaos in the seating, there is chaos in the mind", suggesting that spatial predictability acts as an emotional anchor for certain students.

2. Inconsistent rules

One of the most critical findings is the widespread frustration with the arbitrary application of rules.

- **Perceived inequality:** Students report a double standard regarding dress code (a ban on hoodies or make-up for their class, yet these are permitted for peers in other classes) without clear pedagogical justification. This lack of standardisation creates a sense of comparative grievance and confusion.
- **Rigidity vs. comfort:** The demand to be allowed to wear *hoodies* or complaints about uncomfortable desks causing back pain symbolise a struggle for physical comfort and personal identity in the face of a school uniform policy they perceive as unnecessary.

3. Breach of confidentiality and digital sanctuary

The analysis identifies a significant breach of vertical trust (student-teacher).

- **Breach of privacy:** Negative experiences are reported where teachers shared personal work (such as an essay on love) with other colleagues without consent. This has created a climate of mistrust where students avoid turning to adults for fear that 'everything will be shared' or that there will be consequences.
- **Ineffectiveness of reporting channels:** There is a sense of learned helplessness; students feel that reporting problems is pointless because nothing is done to resolve them. The absence of a class representative exacerbates this lack of representation.
- **Shift towards AI:** Faced with this institutional mistrust, students have shifted their search for help to the digital sphere. They explicitly rely on Google and ChatGPT for information, perceiving these platforms as free from risk and judgement, unlike human interaction at school.

4. Overload and preference for online formats

The discourse reveals signs of school fatigue and an idealisation of post-pandemic remote learning.

- **Overload and personal time**: There is a unanimous rejection of homework, perceived as an invasion of personal time that causes real physical exhaustion.
- **Preference for the hybrid format:** Students view Zoom lessons positively, associating them with greater freedom and comfort. The proposal to introduce a 'Zoom Friday' suggests that the physical school environment is experienced as stressful, and the home as a refuge that promotes well-being, even during school hours.

Conclusion:

From the perspective of younger students in Lithuania, well-being at school is fundamentally underpinned by horizontal bonds with peers, whilst the relationship with the institution is marked by mistrust and a perception of arbitrary rules. Breaches of confidentiality by teachers and inconsistency in the application of rules (dress code, discipline) generate a sense of helplessness that shifts the search for help and security towards the digital environment (AI and search engines), perceived as more reliable and free from judgement. There is also evidence of fatigue due to an overload of tasks and the idealisation of online learning.

THE PERSPECTIVE OF STUDENTS AGED 16 TO 18

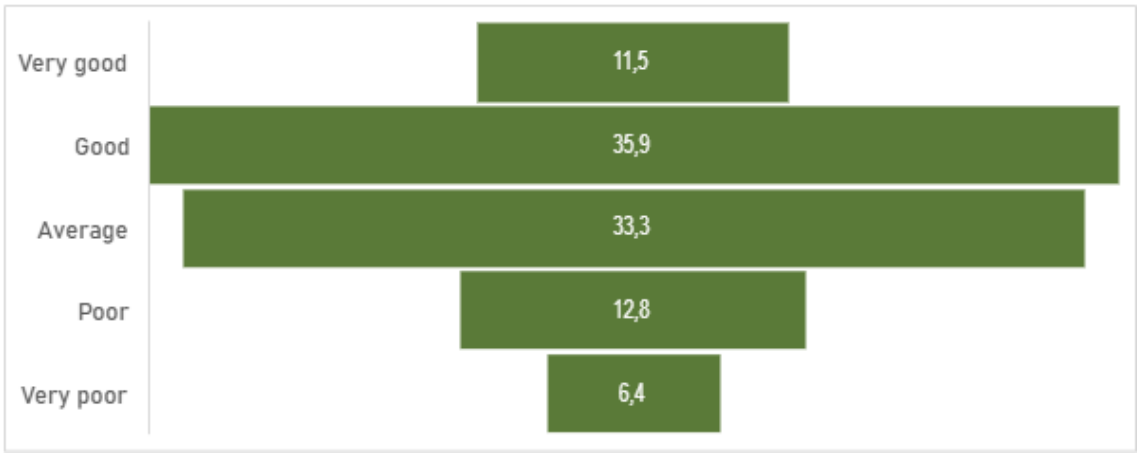
1. Regarding their mental health

Figures 7 and 8 show that, although almost half of the 16- to 18-year-old students surveyed in Lithuania (n = 81) rate their mental health as good or very good (47.4%), a significant proportion express an unfavourable perception. Specifically, 19.2% rate it as poor or very poor and 33.3% rate it as fair, meaning that more than half of the students express at least a partially negative assessment of their mental health.

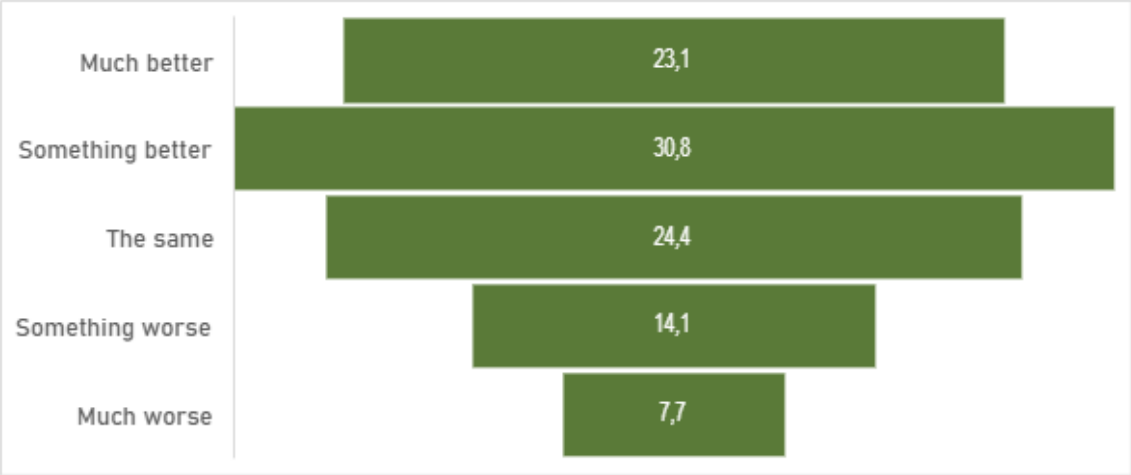
Compared with the previous year, a positive trend is also observed: 53.9% state that they feel somewhat or much better, compared with 21.8% who perceive a deterioration. Overall, the data point to a general perception of improvement and stability.

Figures 7 and 8. Self-perception of general mental health and over the last year

General mental health (% of responses)



Mental health compared to a year ago (% of responses)

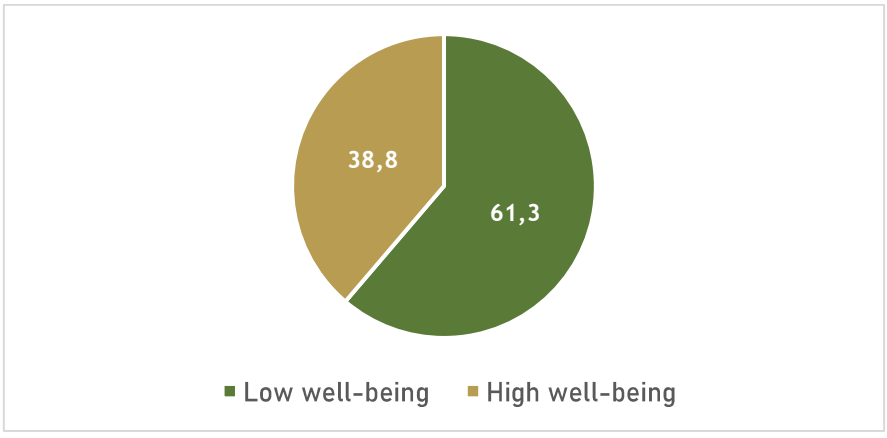


n: 78
Note: own compilation

When comparing the data on perceived well-being (Figure 9) with the previous figures, differences can be observed. The WHO-5 index shows that **61.3%** of students are at low levels of well-being, compared to **38.8%** at high levels. Given that on this scale (0–25) scores of 13 or below indicate possible emotional distress and a risk of depressive symptoms, these results suggest that a significant majority may be in a situation of emotional vulnerability.

This suggests that the subjective perception of 'being well' coexists with everyday indicators of unease, despondency or difficulty in feeling relaxed, etc.; these serve as warning signs of possible levels of distress amongst a significant proportion of the student body.

Figure 9. Levels of emotional well-being (% of responses)



n: 80, m= 11.91/25

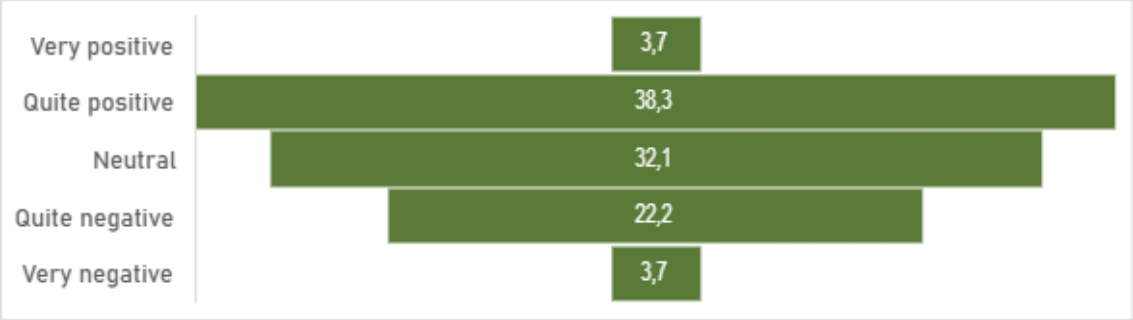
Note: Chart based on the WHO-5 Well-being Index, comprising the following items: cheerful and in good spirits; calm and relaxed; active and energetic; fresh and rested; a life full of things that interest me. Compiled by the author.

2. Regarding their well-being at school

Looking at student well-being at school (Graph 10), the data show a fairly even distribution across the different options. The most common response is 'quite positive' (38.3%), followed by a neutral rating (32.1%). However, a significant proportion report negative experiences: 22.2% rate it as 'quite negative' and 3.7% as 'very negative'.

Overall, although favourable perceptions predominate (42% when combining 'quite positive' and 'very positive'), the proportion of neutral and negative ratings (58% in total) suggests that the school experience is not uniformly positive, but rather combines stability with certain levels of unease or dissatisfaction.

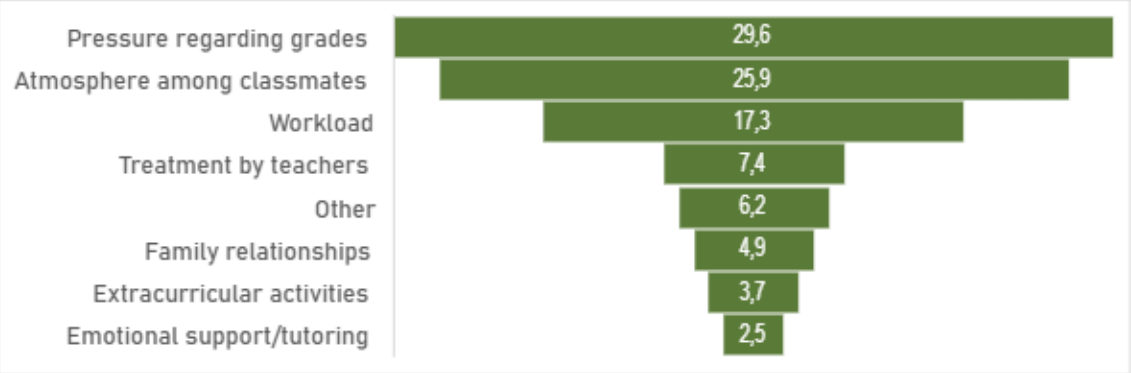
Figure 10. Overall assessment of the experience at school (% of responses)



n: 81
Note: own compilation

When analysing the factors that most influence feelings within the educational environment (Figure 11), **pressure regarding grades (29.6%)** stands out **as the main determinant of well-being at school**. This is followed by the atmosphere among peers (25.9%) and the workload (17.3%), which also carry significant weight in students' emotional experience, reinforcing the importance of factors linked to academic performance and peer dynamics.

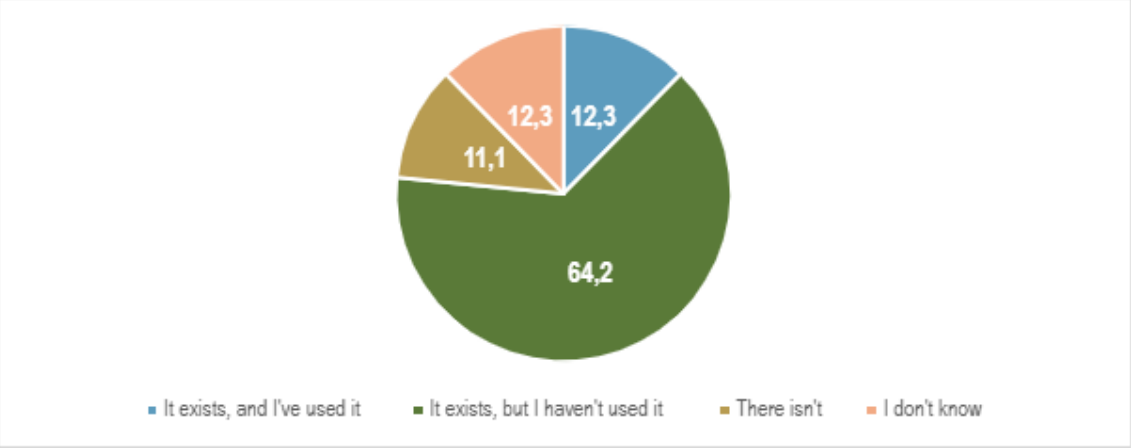
Figure 11. Main factors influencing students' well-being in the educational environment (% of responses)



n: 81
Note: own compilation

With regard to emotional or psychological support resources in the school (Figure 12), the results indicate that the majority of students are aware of their existence, although their use is limited. Specifically, **73% state that these resources are available but have not used them, whilst only 14% say they have made use of them**. On the other hand, 12.3% believe that this type of support does not exist at their school and another 12.3% state that they do not know if it is available. These results highlight a gap between the formal availability of resources and their actual use. In a context previously characterised by academic pressure and a significant proportion of low well-being according to the WHO-5, the low utilisation of available support could be related to factors such as stigma, lack of information, accessibility barriers or the perception that these services do not fully meet students' needs.

Figure 12. Availability and use of emotional/psychological support resources in the school (% of responses)



n: 81
Note: own compilation

3. Resources or initiatives to be implemented at school

From a proactive perspective, students identify various resources that could help improve their emotional wellbeing at school (Table 14). The most frequently mentioned option is the **creation of quiet spaces or relaxation areas within the school (31%), closely followed by guidance on how to manage stress, anxiety or frustration (30%).** Sports, artistic or personal expression activities (28%) and those that foster coexistence, respect and empathy (27%) are also significant, highlighting the importance of both practical interventions aimed at emotional self-regulation and initiatives that strengthen the relational climate within the educational environment.

Table 14. Resources that would help improve emotional wellbeing in the educational environment

	% of students who mention it
Quiet spaces or relaxation areas within the school	31%
Guidance on how to manage stress, anxiety or frustration	30%
Sports, arts or personal expression activities	28
Activities that promote social interaction, respect and empathy	27%
More opportunities to talk about how we feel in groups or with teachers	21%
Access to emotional or psychological support professionals	17
Support among students (groups, mentoring or school mediators)	17%

n: 81
Note: own compilation

With regard to the digital environment (Table 15), pupils identify various measures that could help them feel more confident and comfortable using technology within the school. The most frequently cited suggestion is **reducing the pressure or demands associated with digital tasks or online exams (49%),** which once again highlights academic workload as a central factor in their

educational experience. This is followed by the creation of spaces to learn and practise digital skills (28%), as well as activities that promote the responsible use of social media and apps (23%) and resources to prevent cyberbullying and resolve online conflicts (23%).

Table 15. Resources that would help students feel more confident and comfortable using technology and the digital environment at school

	% of students who mention this
Less pressure or demands related to digital assignments or online exams	49%
Spaces to learn and practise digital skills	28%
Activities that encourage the responsible use of social media and apps	23%
Resources to prevent cyberbullying and resolve online conflicts	23%
Support from professionals (tutors, counsellors or psychologists) to resolve digital problems	17%
Peer support (mentoring or support groups for using technology)	15%
Workshops or classes on internet safety and privacy	9%

n: 81
Note: own compilation

Finally, regarding structural changes to improve well-being in the school (Table 16), pupils ranked, in equal first place, the importance **of more cooperative and fewer competitive activities** and **greater attention to mental health and well-being in the classroom (28%)**, reflecting a dual concern: transforming relational dynamics and reinforcing the emotional dimension within the educational project itself. Greater student participation in school decision-making (21%) and improved communication between teachers, families and students (21%) also gain prominence, pointing to the need for more inclusive and dialogue-based governance.

Overall, the proposals do not focus solely on specific resources, but point towards a broader transformation of school culture, based on cooperation,

participation and the integration of well-being as a cross-cutting theme of the educational experience.

Table 16. Changes or initiatives to improve the sense of well-being and support within the school

	% of students mentioning this
More cooperative and fewer competitive activities	28%
Greater focus on mental health and wellbeing in the classroom	28%
Greater student involvement in school decision-making	21%
Better communication between teachers, families and students	21%
Promoting respect and inclusion for everyone	14%
More safe and pleasant rest or recreation areas	12%
Teacher training in emotional wellbeing and social interaction	11%
Peer tutoring or mentoring programmes	11%

n: 81
Note: own compilation

Conclusion:

Overall, students aged 16 to 18 in Lithuania show a divided and ambivalent perception of their mental health, with a slight predominance of negative assessments, which adds to the low levels of well-being analysed. The school experience appears to be strongly influenced by academic pressure, whilst support resources, although available, are rarely used. Students are calling for more tools to manage stress, quiet spaces, more cooperative dynamics and greater support in the digital sphere. In short, the results point to the need to position well-being as a structural pillar of the educational project rather than as a complementary element.

SPAIN

CURRENT STATE OF MENTAL HEALTH AND EMOTINAL WELLBEING AMONG SPANISH STUDENTS

An overview of mental health and emotional wellbeing among young people

The mental health and emotional wellbeing of Spanish young people have become a central focus of research and social concern. In terms of wellbeing, data from *the 2022 Health Behaviour in School-aged Children* study indicate that **26.7% of adolescents aged 11–18 report high levels of** emotional **wellbeing,** although this indicator **decreases significantly with age, falling from 47.4% among 11–12-year-olds to 12.9% among 17–18-year-olds** (Moreno et al., 2025). Furthermore, there are clear differences by gender and socioeconomic status: high emotional well-being is significantly higher among boys (34.8%) than among girls (18.7%), and among adolescents from families with higher purchasing power (30.8%) compared to those from disadvantaged socioeconomic backgrounds (20.2%) (Ibid.).

With regard to mental health, **14% of adolescents aged 12–16 exhibit clinically significant symptoms of at least one internalising disorder, such as depression or anxiety** (Orgilés et al., 2025). Furthermore, 17.7% of young people aged 15 to 19 report frequently experiencing psychological or mental health problems, with a notably higher prevalence among girls (22.6%) than among boys (12.9%) (Kuric Kardelis et al., 2026). Added to these indicators is the presence of frequent psychosomatic complaints—such as irritability, insomnia or headaches—which affect 38.5% of adolescents (Moreno et al., 2025).

Suicidal ideation constitutes one of the most serious manifestations of psychological distress in young people. In the case of Spanish adolescents, a recent study indicates that **12.7% have reported having suicidal ideation at some point and 3.6% have actually attempted suicide** (Orgilés et al., 2026).

Finally, the literature shows that other factors such as parents' low educational attainment, single-parent families or migrant background are also associated with a higher likelihood of developing depressive and anxiety symptoms (Orgilés et al., 2025; Ministry of Education, Vocational Training and Sport [MEFPD], 2024a).

Educational context and factors associated with well-being

The educational context is a key determinant of well-being and mental health during adolescence. In Spain, the **early school leaving rate stands at 13.0 per cent, a figure which, although it has fallen over the last decade, remains above the European Union average (9.3 per cent)** (MEFD, 2024b). This phenomenon reveals significant social inequalities: the dropout rate reaches 34.0% among young people whose mothers have primary education or below, compared to 2.3% among those from families with higher education (Ibid.). Furthermore, the rate rises to 29.59% among young people of foreign nationality, well above the national average (MEFD, 2025). Added to these inequalities is the issue of repeating a year in compulsory secondary education (12–16 years), which affects 7.0% of pupils and is more prevalent in state schools (8.6%) than in private schools (3.6%) (Ibid.).

The school climate and exposure to peer violence constitute another significant factor for pupils' well-being. According to PISA 2022, **6.5% of 15-year-old pupils in Spain report frequently experiencing bullying** (MEFD, 2024a). The HBSC-2022 study puts the prevalence of severe traditional bullying among adolescents aged 11 to 18 at 4.4%, whilst recurrent cyberbullying affects 1.8% (Moreno et al., 2025). These experiences are particularly concentrated among certain vulnerable groups, such as girls, socio-economically disadvantaged pupils and students with a migrant background (MEFD, 2024a). In broader terms of peer violence, 13.4% of young people report frequently experiencing verbal abuse, with higher levels of verbal abuse and sexual harassment among girls and higher levels of physical violence among boys (Kuric Kardelis et al., 2026).

Finally, the education system's capacity to respond to these issues depends largely on the availability of specialised human resources. In the 2023–2024 academic year, **14.0% of non-university students had specific educational support needs, highlighting a growing demand for specialised support** in schools (MEFD, 2024b). Although Organic Law 8/2021 establishes the role of student welfare and protection coordinator to promote safe environments and detect situations of violence (Art. 35), various reports highlight the shortage of specialised professionals, particularly in the fields of psychology and educational guidance, to address emotional distress and prevent mental health problems in the school environment.

RESULTS

The following section presents the main findings from the fieldwork carried out in Spain, which included in-depth interviews with 15 education professionals and experts in child and adolescent mental health, a survey of 90 students aged between 16 and 18, and a focus group with pupils aged 12 to 14.

THE VIEWS OF PROFESSIONALS AND EXPERTS

What are the main emotional and/or mental health problems you observe in adolescent students today?

As shown in Table 17, professionals and experts identify a **widespread presence of anxiety and stress**, mentioned in all the interviews, which demonstrates that this is not an isolated problem but one of a systemic nature. Furthermore, there are recurring references to difficulties with emotional regulation, reflected in a **low tolerance for frustration** and difficulties in coping with mistakes or limitations. Faced with this lack of self-regulation tools, some young people tend to respond through avoidance strategies, such as apathy and demotivation, or through behaviours that physically release their distress, such as self-harm. To a lesser extent, issues linked to body image and eating disorders are also mentioned, associated with dynamics of social comparison in the digital environment.

Table 17. Most frequently mentioned mental health problems

Mental health problem identified	No. of interviews mentioning it	Analysis of the problem
Anxiety and Stress	15	Constant nervousness due to academic performance and social pressure.
Low frustration tolerance	12	Difficulty coping with rejection or mistakes, leading to impulsive outbursts or giving up.
Apathy and demotivation	11	Lack of interest in life and schoolwork, often described as “emotional detachment”.
Self-harm and Suicidal Thoughts	8	Use of physical harm as a (maladaptive) mechanism to alleviate emotional pain.
Eating Disorders	6	Obsessive concern with body image, closely linked to comparisons on social media.

Note: Compiled by the author.

Which groups are most affected and/or vulnerable?

As shown in Table 17, professionals and experts agree that **vulnerability in schools** is concentrated among those students who lack stable family and social support networks. Particular attention is drawn to **dysfunctional families**, where the absence of boundaries and emotional support creates unprotective environments. **Students with SEN or neurodivergent profiles** (particularly ADHD and ASD) are also highlighted, as they face greater difficulties in adapting and interacting socially within the education system. Furthermore, a vulnerable socio-economic context is noted, characterised by a lack of resources for therapeutic support and family financial stress. Finally, mention is made of LGBTIQ+ pupils, who are more exposed to judgement from their peers and potential situations of bullying.

Table 17. Groups in situations of greater vulnerability

Identified vulnerable group	No. of interviews mentioning it	Associated vulnerability factors
Dysfunctional families	14	Lack of boundaries, lack of emotional support at home and the transfer of adult conflicts.
Pupils with SEN / Neurodiversity	11	Particularly ADHD and ASD, due to the rigidity of the system and difficulties with social interaction.
Vulnerable socio-economic background	9	Lack of resources for external therapy and family environments under high financial stress.
LGTBIQ+ pupils	7	Greater exposure to judgement from peers and risk of bullying due to identity or sexual orientation.

Note: Compiled by the author.

Which aspects of the school environment—including relationships, classroom dynamics and the use of technology—do you observe as having the greatest influence on students' mental health and emotional well-being?

Table 18 analyses various **school-related and digital environment factors** that affect pupils' well-being. Key **risk factors** include **overexposure to social media**—cited by 14 out of 15 professionals and experts—as well as **academic demands and high pupil-teacher ratios** (13/15), which increase pressure and stress in the school environment. In contrast, a positive relationship with teachers emerges as a clear protective factor, whilst peer comparison and

cyberbullying are identified as risk factors. Meanwhile, the classroom atmosphere and group cohesion have a mixed impact, potentially acting as either a source of support or a source of tension depending on the quality of peer relationships.

Table 18. School and digital environment factors

Identified factor	Type of factor*	No. of interviews mentioning it	Perceived impact on well-being**
Overexposure to social media	Digital	14	Risk factor
Academic demands and student-teacher ratios	Organisational	13	Risk factor
Relationship with teaching staff	Relational	10	Protective factor
Comparison and cyberbullying	Digital	11	Risk factor
Classroom atmosphere / Cohesion	Relational	9	Mixed

* Type of factor: Academic | Relational | Organisational | Digital
** Perceived impact: Risk factor | Mixed factor | Protective factor
Note: Own work.

Which resources, strategies or support measures implemented have proven most effective in promoting students' mental health and preventing bullying or suicide in schools?

As shown in Table 19, professionals and experts highlight interventions at various levels that focus on socio-emotional health. **Active listening and individual mentoring** stand out, as they allow students to have a trusted adult who acknowledges their distress. Furthermore, **emotional education workshops** help to normalise the discussion of mental health and provide tools for self-regulation. At school level, early detection protocols make it easier to act before problems become more serious. Finally, the external mental health network (USMIJ) emerges as a key resource for clinical cases, although its effectiveness is limited by the system's capacity constraints.

Table 19. Resources, strategies or support to be implemented

Identified resources or support	Level of intervention*	No. of interviews mentioning it	Reason for perceived effectiveness
Active Listening / Individual Mentoring	Individual	14	The student needs a trusted adult who validates their feelings without judging them.
Emotional Education Workshops	Group	11	Normalises talking about mental health and offers practical tools for calming down.
Early Detection Protocols	Centre	10	Enables action to be taken before symptoms develop into a serious crisis.
External Mental Health Network (USMIJ)	Community	12	Essential for clinical cases, although it is criticised for being slow and prone to overload.

* Level of intervention: Individual | Group | Educational setting | Community/external services
Note: Own work.

If you could propose key changes to improve emotional wellbeing and mental health care in schools, what would they be?

Table 20 shows that the **proposals for priority improvements** point to the need to structurally strengthen the education system to respond to the current emotional challenges faced by pupils. The most widely supported measure is an **increase in the number of psychologists and counsellors**, reflecting the widespread perception that teachers are overwhelmed and taking on psychological support roles for which they lack sufficient training and time. In this vein, **mental health training for teachers** and a **reduction in curriculum content and class sizes** are also highlighted, with the aim of adapting the school structure to the importance of emotional care and managing classroom dynamics. Finally, it is proposed to strengthen prevention through **family workshops on digital boundaries**, extending educational shared responsibility beyond the classroom.

Table 20. Priority improvement proposals

Proposal for improvement	Type of change*	No. of interviews mentioning it	Perceived level of priority**
Increase in the number of psychologists/counsellors	HR	15	Very high
Mental Health Training for Teachers	Training	13	High
Reduction in Content and Ratios	Organisational	11	High
Family Schools (Digital Limits)	Prevention	9	Medium-High

* Type of change: Organisational | Training | Human resources | Protocols/policies | Prevention/promotion
** Perceived priority: High | Medium | Low
Note: Own work.

Conclusion:

A combined analysis of the tables shows that students' well-being is influenced by two main dynamics. On the one hand, the **digital environment** appears as a space that intensifies dynamics of comparison, exposure and social validation, with effects on self-esteem, body image and the emergence of conflicts such as cyberbullying or issues linked to eating behaviour. On the other hand, a **weakness in emotional regulation skills** is identified, evident in generalised anxiety, low frustration tolerance and avoidance or distress responses. These difficulties have a greater impact on **students in more vulnerable situations**, particularly those lacking strong family networks or exhibiting neurodivergent profiles. Given this situation, there is a consensus on the need to **strengthen socio-emotional support in schools** through more specialised professionals, systematic emotional education and early detection mechanisms.

THE PERSPECTIVE OF YOUNGER PUPILS (AGES 12–14)

Analysis of the discourse of the students participating in the focus group reveals that pupils perceive school as an ecosystem permeated by academic pressure and the fear of public exposure, calling for a profound humanisation of psycho-pedagogical relationships.

1. Relational well-being and group dynamics

For younger pupils, well-being is linked to socialising and collaborative work. The activities that foster the strongest sense of belonging to the school are those that build connections: spending time with classmates and teachers, sports tournaments during break times, school trips and practical subjects such as Physical Education.

- **Preference for smaller class sizes:** Students report feeling much more comfortable in small groups than in overcrowded classrooms, also noting that there is latent tension between groups of different classes or ages.

- **Demand for social spaces:** The innovative proposal to create a 'friendship room' or 'fun rooms' stands out, alongside a demand for more extracurricular activities such as school trips or camps. This suggests that students view the school environment as a potential space for socialising beyond academic matters.

2. Institutional friction

A high level of stress is detected, stemming not only from the academic workload ("don't schedule exams in the same week"), but also from the emotional management required by the academic environment.

- **The ambivalence of the teacher-student relationship:** Teachers are identified as a dual factor. Whilst some teachers act as supportive figures, others are perceived as triggers of distress: students report that there are teachers who "make things worse, for example, by exposing people in the classroom to teasing or ridicule".

- **Anxiety about** public **exposure:** There is an explicit complaint regarding the imposition of public speaking or being forced to give presentations in front of the class, with calls to prevent mockery over poor grades and to promote respect for those who struggle more. They also demand more equitable treatment from teachers and the application of "fair punishments".

3. Breaking the stigma and mental health prevention

The group shows a high level of awareness of the shortcomings of the system in terms of mental health and a clear desire to break the stigma associated with emotional vulnerability.

- **Normalising help:** Students are calling for greater awareness so that their peers understand that "asking for help is not wrong, and that seeing or consulting a psychologist is not wrong". They complain that these issues are not currently discussed enough at the school.

- **Effective implementation of prevention:** They call for a practical approach to mental health that goes beyond one-off talks. They view diagnostic tools such as the 'socioescuela' test (used to identify social issues at the start of the academic year) very positively and demand that it be repeated periodically to enable genuine, individualised monitoring of the classroom environment. Furthermore, like the professionals, they directly call for the presence of a psychologist at the school or, failing that, a tutor or specialised external staff.

4. Spatial reconfiguration and confidentiality

The physical environment and privacy emerge as non-negotiable requirements for emotional care.

- **Dual spaces:** On the one hand, they demand spacious and comfortable areas (such as more comfortable chairs) for general activities in classrooms, the library or the gym. On the other hand, to address crises or receive support, they strictly demand "intimate and welcoming spaces", which guarantee a private environment free from the gaze of their peers.

- **Confidentiality within the school environment:** a key finding is the demand to maintain confidentiality with parents if there has been a problem that was not particularly serious. Adolescents request to resolve minor conflicts independently within the school environment.

5. Technology as a factor in isolation

Finally, students consider the use of technology, primarily mobile phones, to be a negative factor because it isolates them, and they openly acknowledge that incidents of bullying via these devices have occurred in their environment, complementing traditional physical bullying.

Conclusion:

From the perspective of 12- to 14-year-old students in Spain, student wellbeing is shaped by exam-related stress and, crucially, by the fear of public exposure and humiliation within the classroom. Whilst they call for a more relational and comfortable school environment — with spaces dedicated to socialising and relaxation — they demonstrate remarkable maturity in demanding the destigmatisation of mental health and the permanent inclusion of psychology professionals. They call for an institution that guarantees confidentiality from their families, a difficult boundary to maintain given that they are minors. Finally, there is a certain unease regarding technology, which is seen as a factor contributing to isolation and potential bullying.

THE PERSPECTIVE OF STUDENTS AGED 16 TO 18

1. Regarding their mental health

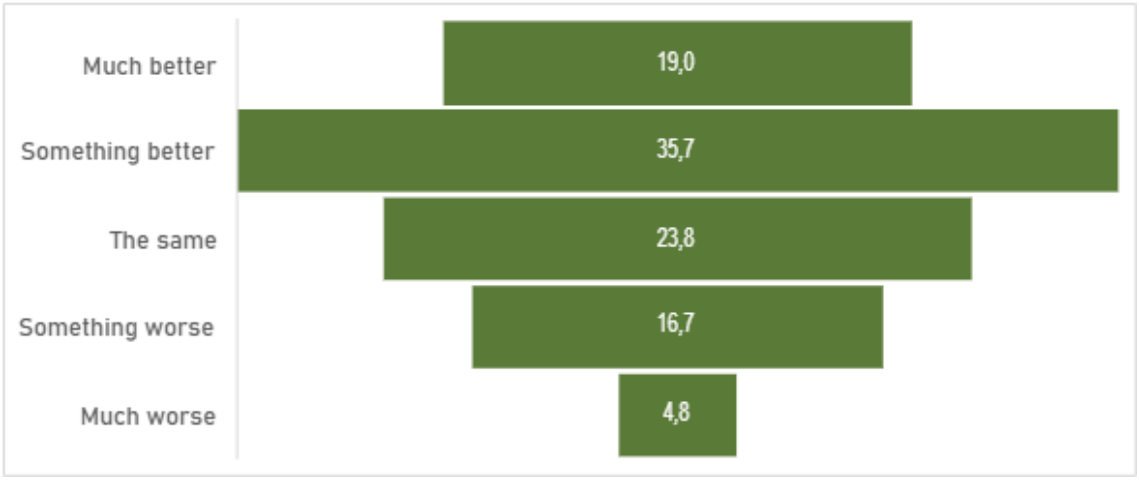
With regard to students' perceptions of their mental health (Figures 13 and 14), the results show a predominantly positive assessment. In general terms, **56.1% of students consider their mental health to be good or very good, whilst 35.4% rate it as average and 8.5% perceive it as poor**, indicating that, although a favourable assessment predominates, there is still a significant proportion of students who do not experience full emotional well-being.

As for changes compared to a year ago, the trend is also largely positive: **54.7% state that their mental health is somewhat or much better, compared to 23.8% who say it has remained the same and 21.5% who consider it has worsened.** Overall, these figures point to a general perception of improved emotional well-being, although a significant group of students remain whose situation has either stagnated or worsened.

Figures 13 and 14. Self-perception of general mental health and over the last year

General mental health (% of responses)

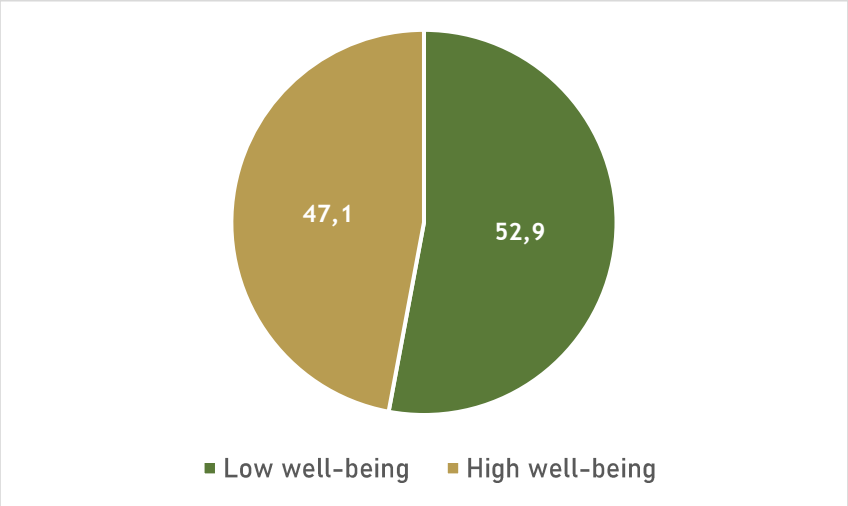
Mental health compared to a year ago (% of responses)



n: 82 and 84
Note: own compilation

When comparing the data on perceptions of emotional well-being (Figure 15) with the previous results, it can be seen that perceptions are slightly reversed: **just over half of the students (52.9%) report low levels of well-being, compared to 47.1% reporting high levels**. Although the distribution is practically balanced, the balance tilts slightly towards a lack of well-being. Furthermore, the average WHO-5 score stands at 13.03 points, very close to the warning threshold, as on this scale scores below 13 are associated with possible emotional distress and a risk of depressive symptoms.

Figure 15. Levels of emotional well-being (% of responses)

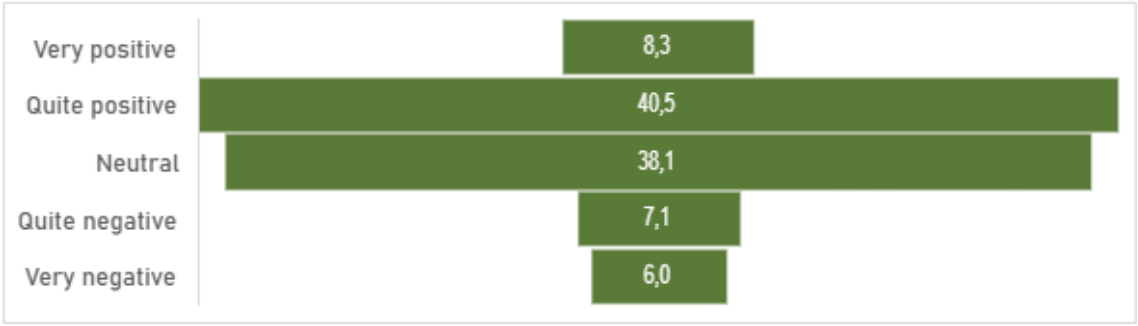


n: 85, m= 13.03/25
Note: Chart based on the WHO-5 well-being index, with the items: cheerful and in a good mood/calm and relaxed/active and energetic/fresh and rested/a life full of things that interest me. Own creation.

2. Regarding their well-being at school

Looking at the overall assessment of the experience at the educational centre (Graph 16), the data show a predominantly moderate perception. **The most frequent response is 'quite positive' (40.5%), closely followed by a neutral assessment (38.1%),** whilst 8.3% consider it very positive. At the other end of the scale, 7.1% perceive it as quite negative and 6% as very negative.

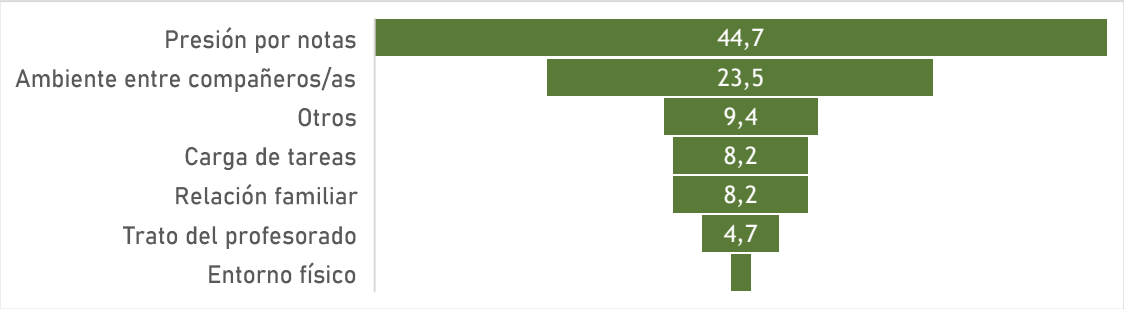
Figure 16. Overall assessment of the experience at the school (% of responses)



n: 84
Note: own compilation

When analysing the factors that most influence pupils' well-being within the educational environment (Figure 17), **pressure regarding grades (44.7%) clearly stands out as the main determining factor. Some way behind comes the atmosphere among classmates (23.5%),** followed by other factors mentioned less frequently, such as the workload (8.2%) and family relationships (8.2%). In the background are the treatment by teachers (4.7%) and the physical environment of the school, with a minimal impact (1.2%). Overall, the results reinforce the idea that well-being within the school is strongly influenced by the dynamics of assessment and academic performance, above other elements of the school context.

Figure 17. Main factors influencing student well-being in the educational environment (% of responses)

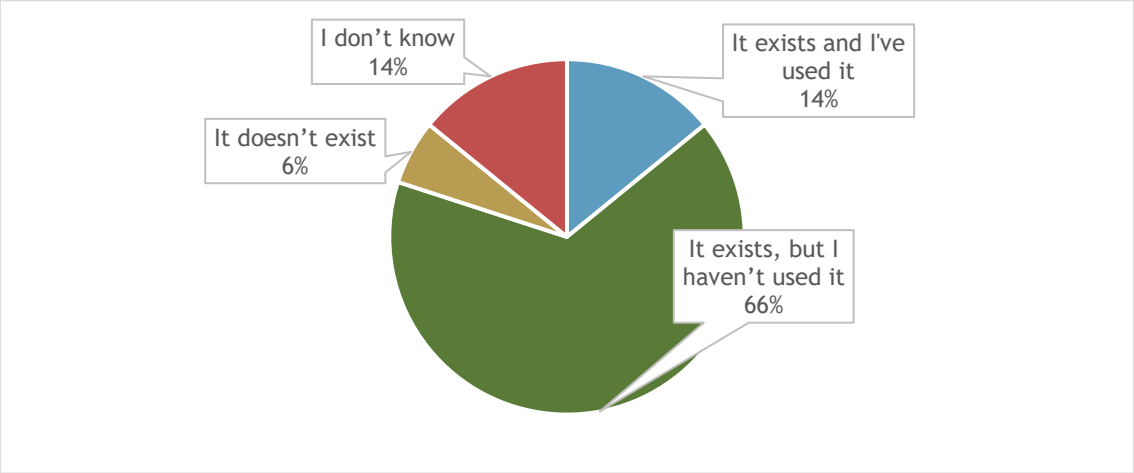


n: 85
Note: own compilation

With regard to emotional or psychological support resources within the school, Figure 18 shows that, although such services are available in most schools, their use by pupils is limited. Specifically, **66% of students state that the resource exists but they have not used it**, whilst **only 14% say they have made use of it**. Meanwhile, 6% indicate that this type of support does not exist at their school, and 14% state they do not know if it is available.

The lack of use of resources that are actually available is consistent with what was highlighted in the focus group, where students emphasised the need to destigmatise the act of seeking help from these resources. Overall, it appears that students are aware of their existence, and that the problem may be linked, on the one hand, to issues of peer stigma, and on the other, to trust, actual access or the capacity of the available services.

Figure 18. Availability and use of emotional/psychological support resources in the school (% of responses)



n: 85
Note: own compilation

3. Resources or initiatives to implement in school

From a proactive perspective, students identify various resources that could help improve their emotional wellbeing in the educational environment. Table 21 highlights the **demand for guidance on how to manage stress, anxiety or frustration (40%),** which reaffirms the need to incorporate practical emotional regulation tools, as also noted by professionals. Almost on a par with this are **sporting, artistic or personal expression activities (39%),** suggesting the importance of creating spaces for personal development and emotional expression beyond the strictly academic sphere.

Secondly, pupils highlight the importance of having access to emotional or psychological support professionals (27%) and to quiet spaces or relaxation areas within the school (27%), which once again emphasises both the need for specialised resources and for physical environments that promote calm and well-being within the school setting.

Furthermore, students also mention more spaces to talk about how they feel in groups or with teachers (25%) and activities that foster coexistence, respect and empathy (20%), aspects that point to the importance of the relational climate and emotional communication within the educational community. Finally, although less frequently, there is a suggestion for peer support through groups, mentoring or school mediators (14%).

Table 21. Resources that would help improve emotional wellbeing in the educational environment

	% of students who mention it
Guidance on how to manage stress, anxiety or frustration	40%
Sports, arts or personal expression activities	39%
Access to emotional or psychological support professionals	27%
Quiet spaces or relaxation areas within the centre	27%
More opportunities to talk about how we feel in groups or with staff	25%
Activities that promote coexistence, respect and empathy	20
Support among students (groups, mentoring schemes or school mediators)	14%

n: 84
Note: own compilation

With regard to the digital environment (Table 22), students express a clear need for **structured, educational support** to feel more confident and comfortable using technology within the educational setting. The main suggestion is aimed at **reducing the pressure or demands associated with digital assignments or online exams (40%)**, suggesting that some students perceive the academic digital environment as a high-pressure space or one associated with assessment-related stress.

Secondly, there is a need for **spaces to learn and practise digital skills (37%)**, reflecting an interest in strengthening technological skills in a guided and progressive manner. In third place are both workshops or classes on internet safety and privacy (27%) and support from professionals—tutors, counsellors or psychologists—to resolve digital problems (27%), highlighting the importance of having specialist support to tackle the challenges of the digital environment with greater security and confidence.

Similarly, although less frequently, pupils mention the importance of peer support through mentoring or support groups for the use of technology (19%), as well as activities that promote the responsible use of social media and apps (18%).

Table 22. Resources that would help students feel more confident and comfortable using technology and navigating the digital environment at school

	% of students who mention it
Less pressure or demands related to digital assignments or online exams	40%
Spaces to learn and practise digital skills	37%
Workshops or classes on internet safety and privacy	27%
Support from professionals (tutors, counsellors or psychologists) to resolve digital problems	27%
Peer support (mentoring or support groups for technology use)	19
Activities that promote the responsible use of social media and apps	18%

n: 83
Note: own compilation

Finally, regarding structural changes to improve well-being in schools (Table 23), pupils prioritise **greater attention to mental health and well-being within the classroom itself (43%)**, which reinforces the call to integrate emotional care into the core of the educational project. In second place are measures related to the school environment and atmosphere, such as promoting respect and inclusion for everyone (23%), as well as teacher training in emotional wellbeing and social interaction (20%) and the creation of more safe and pleasant rest or break areas (20%).

Similarly, pupils highlight the importance of improving communication between teachers, families and students (19%) and increasing pupil participation in school decision-making (16%), alongside proposals such as more cooperative activities rather than competitive ones (10%) and peer tutoring or mentoring programmes (6%). Overall, the responses point to the need to strengthen social interaction, participation and the centrality of well-being as an educational pillar within the school's operations.

Table 23. Changes or initiatives to improve the sense of well-being and support at the school

	% of students who mention it
Greater focus on mental health and well-being in the classroom	43%
Promoting respect and inclusion for everyone	23%
Teacher training in emotional wellbeing and social interaction	20
More safe and pleasant rest or break areas	20
Better communication between teachers, families and students	19
Greater student involvement in school decision-making	16%
More cooperative and fewer competitive activities	10%
Peer tutoring or mentoring programmes	6%

n: 83
Note: own compilation

Conclusion:

Overall, the results show a relatively balanced picture of emotional well-being, albeit with signs of fragility, among Spanish students aged 16 to 18. Although a significant proportion view their mental health and their experience at school positively, their assessments tend to be moderate or neutral, and the well-being indicators show an almost balanced distribution, albeit skewed towards the lower end. In this context, the pressure associated with academic performance and grades emerges as the main factor affecting well-being, just as it did in the focus group of younger students (aged 12–14). At the same time, pupils are calling for greater attention to mental health, more spaces for emotional support and a more explicit integration of well-being into school life, suggesting the need to strengthen institutional strategies that combine emotional support.

CYPRUS

CURRENT STATE OF MENTAL HEALTH AND EMOTINAL WELLBEING AMONG CYPRIOT STUDENTS

Overview of mental health and emotional wellbeing among young people

The mental health of Cypriot adolescents has deteriorated in the post-pandemic period, creating a 'silent crisis' characterised by high levels of anxiety and emotional distress.

In terms of subjective well-being, the data point to a progressive decline in life satisfaction during adolescence. The *Health Behaviour in School-aged Children* study indicates that approximately two in three students identify school as their main source of stress, highlighting a significant increase in academic pressure in recent years (Papaeustathiou et al., 2023). Although overall levels of well-being remain within comparatively moderate ranges in the European context, **only around 65% of 15-year-olds report feeling satisfied with their lives, with frequent perceptions of being overwhelmed, emotional exhaustion and uncertainty about the future** (Ibid.).

With regard to mental health, recent data from national screening programmes indicate **that around 25% of students exhibit clinically significant symptoms consistent with disorders such as anxiety or depression** (UNICEF, 2025). Despite the low suicide rate, suicidal ideation emerges as a worrying indicator of distress, affecting 22.2% of adolescents according to recent school-based studies (Ibid.).

Gender is a significant factor in adolescent mental health vulnerability in Cyprus, as girls report higher levels of school pressure (61.7% versus 51.5%), as well as greater anxiety, stress and feelings of loneliness (28.5% versus 19.6%) compared to boys (Papaeustathiou et al., 2023; UNICEF, 2025). This greater vulnerability is also reflected in the digital sphere, where they are more than twice as likely to experience symptoms of social media addiction (11.1% compared to 4.3%) (UNICEF, 2025). For their part, adolescents from migrant backgrounds face structural barriers such as language, marginalisation or stigma, which exacerbate their psychological distress and hinder access to support, leaving them further exposed to greater risks of depression, anxiety and low self-esteem in contexts of discrimination (UNICEF, 2025; Papaeustathiou et al., 2023).

Educational context and factors associated with well-being

Educational participation in Cyprus is generally high among the adolescent population aged 12–18. However, in recent years, certain vulnerabilities regarding educational continuity have been observed. In particular, **the early school leaving rate has seen a recent upturn, standing at around 10.4% in the 2024/2025 academic year, exceeding the European Union average** (European Commission, 2024). Furthermore, the Educational Psychology Service, the main support mechanism in state schools, records over 10,000 student referrals annually, including those experiencing difficulties attending school due to severe social anxiety or learning disabilities that have not been adequately addressed (Ministry of Education, Sport and Youth, 2024a).

With regard to school life, bullying is a key factor in adolescent distress. Available data indicate that approximately **one in four students has experienced bullying,** with verbal and relational forms—such as social exclusion—predominating over physical violence, which is on a downward trend (Hope for Children CRC Policy Center, 2024). In the digital environment, **cyberbullying is a significant issue: various institutional sources indicate that around one in five adolescents has suffered this type of violence**, affecting to a greater extent those young people who display characteristics perceived as different, such as their background or physical appearance (Ibid.).

Finally, the psycho-educational support system in Cyprus is characterised by a strong institutional focus on student wellbeing, albeit with significant resource constraints. For example, despite the positive support provided by the Educational Psychology Service, the high pupil-to-staff ratio makes it difficult to provide individualised care (Ministry of Education, Sport and Youth, 2024a). Furthermore, although most secondary schools have guidance services, these tend to combine academic and emotional support, which limits their ability to address complex mental health cases.

In response to this situation, the **National Strategy for the Prevention and Management of School Violence** (2024–2028) has promoted initiatives such as 'safe school' programmes and mediation teams. However, barriers to accessing these resources persist, including the social stigma associated with seeking help, particularly in smaller community settings (Ministry of Education, Sport and Youth, 2024b).

RESULTS

The following section presents the main findings from the fieldwork carried out in Cyprus, which included in-depth interviews with 10 education professionals and experts in child and adolescent mental health, a survey of 50 students aged between 16 and 18, and a focus group with 15-year-old students.

THE VIEWS OF PROFESSIONALS AND EXPERTS

What are the main emotional and/or mental health problems you observe in adolescent students today?

As shown in Table 24, professionals and experts identify a **significant prevalence of anxiety disorders,** which were mentioned in all the interviews, highlighting that this is a widespread problem closely linked to academic demands and the pressure to be socially accepted. Likewise, there are recurring **references to depression and low mood,** reflected in persistent feelings of sadness, demotivation and loss of interest, which in the most severe cases can lead to suicidal ideation or self-harming behaviour. To a lesser extent, issues related to body image and eating disorders are mentioned, associated with social comparison dynamics in the digital environment and the influence of unrealistic standards. Finally, although less frequently, cases of burnout and stress linked to the accumulation of academic, family and extracurricular demands are reported.

Table 24. Most frequently mentioned mental health problems

Mental health problem identified	No. of interviews mentioning it	Analysis of the problem
Anxiety disorders	10	Includes generalised anxiety, social anxiety and panic attacks, often triggered by academic performance and social acceptance.
Depression and low mood	8	Characterised by persistent sadness, loss of interest and, in severe cases, suicidal thoughts or self-harming behaviour.
Body image and eating disorders	7	A distorted perception of oneself and unhealthy eating habits driven by comparisons on social media and the standards set by 'influencers'.

Burnout and stress	6	Emotional and physical exhaustion resulting from the 'triple pressure' of school, family expectations and extracurricular activities.

Note: Compiled by the author.

Which groups are most affected and/or vulnerable?

As shown in Table 25, professionals and experts agree that **vulnerability is particularly concentrated among certain student profiles, with neurodivergent students (especially** those **with ADHD and ASD) being highlighted first and foremost,** as they face greater difficulties in social interaction and executive functioning, as well as greater exposure to situations of singling out or bullying. Likewise, **LGBTIQ+ students** are frequently identified, associated with experiences of a lack of belonging, fear of rejection and potential situations of discrimination.

Other groups are also highlighted, such as migrant students and those from cultural minorities, affected by language barriers and feelings of exclusion; students from dysfunctional homes, with little emotional support and unstable family backgrounds; and, finally, high-achieving students, who are subjected to high levels of pressure that can lead to performance-related anxiety.

Table 25. Groups in situations of greater vulnerability

Identified vulnerable group	No. of interviews mentioning it	Associated vulnerability factors
Neurodivergent students (ADHD/ASD)	9	Difficulties with social cues, executive functioning and greater susceptibility to academic singling out or bullying.
LGTBIQ+ young people	8	Risks associated with a lack of belonging, fear of rejection and the potential for discrimination based on identity.
Migrants and cultural minorities	7	Language barriers, socio-economic challenges and feelings of 'otherness' within the school community.
Students from dysfunctional homes	7	Lack of emotional support at home, exposure to domestic conflict or financial instability.

High-achieving students	5	Intense internal and external pressure to maintain perfection, leading to the concealment of 'performance anxiety'.

Note: Compiled by the author.

Which elements of the school environment—including relationships, classroom dynamics and the use of technology—do you observe as having the greatest influence on pupils' mental health and emotional well-being?

Table 26 analyses various school and digital environment factors that affect pupils' well-being. Among the main risk factors are **comparison on social media**, highlighted in all interviews, as well as **academic and curricular overload,** which increases pressure and stress in the educational environment. Meanwhile, the relationship between teachers and pupils and the dynamics of peer support or bullying have a mixed impact, potentially acting as either protective or risk factors depending on the quality of the relationships. Finally, a lack of awareness regarding diversity is identified as an additional risk factor that can reinforce situations of exclusion within the school context.

Table 26. School and digital environment factors

Identified factor	Type of factor*	No. of interviews mentioning it	Perceived impact on well-being**
Comparison on social media	Digital	10	Risk factor
Academic overload / curriculum	Academic	9	Risk factor
Teacher–student relationship	Relational	8	Mixed factor
Lack of awareness of diversity	Organisational	6	Risk factor
Peer support / bullying	Relational	7	Mixed factor

* Type of factor: Academic | Relational | Organisational | Digital
** Perceived impact: Risk factor | Mixed factor | Protective factor
Note: Own work.

Which resources, strategies or support measures implemented have proven most effective in promoting students' mental health and preventing bullying or suicide in schools?

As shown in Table 27, professionals and experts highlight interventions at various levels focused on pupils' socio-emotional health. **School counselling services** are particularly noteworthy, as they provide a confidential, one-to-one space for early detection and emotional expression. Similarly, **social-emotional learning programmes** help to normalise the discussion of mental health and foster skills such as empathy. In the background, initiatives such as peer mentoring and family support appear, which strengthen support networks and reduce isolation. Finally, teacher training in mental health is identified as a key element for early detection, facilitating intervention before difficulties intensify.

Table 27. Resources, strategies or support to be implemented

Identified resource or support	Level of intervention*	No. of interviews mentioning it	Reason for perceived effectiveness
School guidance services	Individual	10	Provides a confidential space for early intervention and emotional expression.
SEL (Social and Emotional Learning)	Group	8	Normalises talking about emotions and fosters empathy among peers.
Peer mentoring programmes	Group	6	Reduces isolation by connecting younger students with role models close to them.
Family support and guidance	Community	7	Ensures consistency in support between home and school.
Teacher training in mental health	School	6	Helps identify warning signs before problems become serious.

* Level of intervention: Individual | Group | School | Community/external services
Note: Own work.

If you could propose key changes to improve emotional wellbeing and mental health support in schools, what would they be?

Table 28 shows that the proposals for priority improvements point to the need to structurally strengthen the education system to respond to the current emotional challenges faced by pupils. The most widely supported measure (10 out of 10 interviews) is **teacher training in emotional needs**, reflecting the perception that teachers take on roles for which they are not always sufficiently prepared. Likewise, the **importance of reducing the academic workload** is emphasised, with the aim of alleviating pressure and adapting the system to students' wellbeing needs. Furthermore, measures such as the introduction of mental health days and the promotion of interdisciplinary teams are highlighted, aimed at improving the institutional response and the monitoring of cases. Finally, digital literacy and safety education are identified as preventive strategies to address the risks of the digital environment from an educational perspective.

Table 28. Priority improvement proposals

Proposal for improvement	Type of change*	No. of interviews mentioning it	Perceived level of priority**
Teacher training in emotional needs	Training	10	Enrol
Reducing academic workload / homework	Organisational	9	High
Mental health sick days	Protocols / policies	8	Login
Digital literacy and safety education	Prevention / promotion	7	Medium
Interdisciplinary teams (monitoring)	Human resources	6	High

* Type of change: Organisational | Training | Human resources | Protocols/policies | Prevention/promotion
** Perceived priority: High | Medium | Low
Note: Own compilation.

Conclusion:

The joint analysis by professionals and experts shows, firstly, the presence of widespread mental health issues, particularly anxiety, stress and low mood, which highlight generalised difficulties in students' emotional management. These are exacerbated by risk factors in the digital and school environments, notably comparison on social media and academic overload. This context has a greater impact on certain groups, particularly students with neurodivergence and the LGTBIQ+ community, who are more exposed to difficulties with integration, rejection or bullying.

In response to this situation, solutions centred on socio-emotional support have been identified, such as guidance services, emotional education and the strengthening of support networks. Finally, the need to make progress on structural changes is highlighted, particularly in teacher training and the reduction of academic workload.

THE PERSPECTIVE OF YOUNGER STUDENTS (AGED 15)

The analysis of the focus group conducted in Cyprus reveals a clear tension between academic demands and the emotional well-being of students. The main themes drawn from their testimonies are outlined below:

1. Sources of well-being

- **The value of free time and social connection:** Breaks, school trips and games are essential. Time spent with friends, chatting and having fun is their main source of well-being.
- **School climate:** Students greatly value a pleasant school environment and the presence of supportive teachers, placing importance on the quality of interpersonal relationships.

2. Risk factors and academic overload

- **Academic pressure:** Stress is driven by parental pressure to get good grades and do their homework. Added to this is the burden of exams, the volume of homework and the difficulty of certain subjects.
- **Emotional and relational impact:** Academic demands, together with teachers' attitudes and relationships with peers, have such a significant influence that they can lead to feelings of loneliness, isolation and sleep problems.

3. The paradigm shift: From 'Grade-centric' to 'Student-centric'

To counteract the pressure, students are calling for a model centred on the student rather than on grades:

- **Reduced workload:** As with professionals, there is a clear need for less homework, as well as a reduction in the syllabus ("fewer units of knowledge") and the removal of exam pressure. They are also calling for more comprehensible subjects.
- **Holistic assessment:** They are calling for alternative assessment methods that prioritise students' mental health over traditional grades.

4. The role of teachers and psycho-educational needs

- **Trained teachers:** They demand greater respect from teachers and call for them to be specifically trained in how to support pupils suffering from stress and anxiety. This issue of the need for teacher training also emerged as a factor in the expert interviews.
- **Coping skills:** They are calling for training on topics not covered in school, such as strategies for dealing with stress, tips for better sleep, time management techniques, and guidelines for communicating more effectively with teachers.

5. Redesigning support services

- **Individualised formats:** They reject group interventions and prefer 'one-to-one' sessions (whether in person or online). They want to talk to a trusted person, who might be a counsellor or an 'inspirational teacher'.
- **Welcoming and alternative spaces:** They propose locating these services in quiet rooms, empty classrooms, pleasant spaces in the school garden, or even through summer schools with practical workshops.
- **Structural and collaborative support:** They point out that a single counsellor is not enough and call for a full guidance team in every school. Finally, they demand that counsellors and teachers work together to help them effectively overcome anxiety.

Conclusion:

The analysis of the focus group in Cyprus reveals a clear tension between academic pressure and students' emotional well-being. Whilst well-being is primarily associated with free time and a positive school environment, the education system emerges as a significant source of stress, characterised by academic demands and the pressure of exams, leading to emotional impacts such as anxiety, isolation or sleep problems. In response, students are calling for a shift towards a more person-centred model, with a lighter academic workload and more flexible forms of assessment. They also emphasise the importance of having teachers trained in mental health and equipped with tools to support emotional distress. Finally, they propose strengthening and redesigning support services, focusing on individualised interventions, more accessible spaces, and larger, better-coordinated guidance teams within the school.

THE PERSPECTIVE OF STUDENTS AGED 16 TO 18

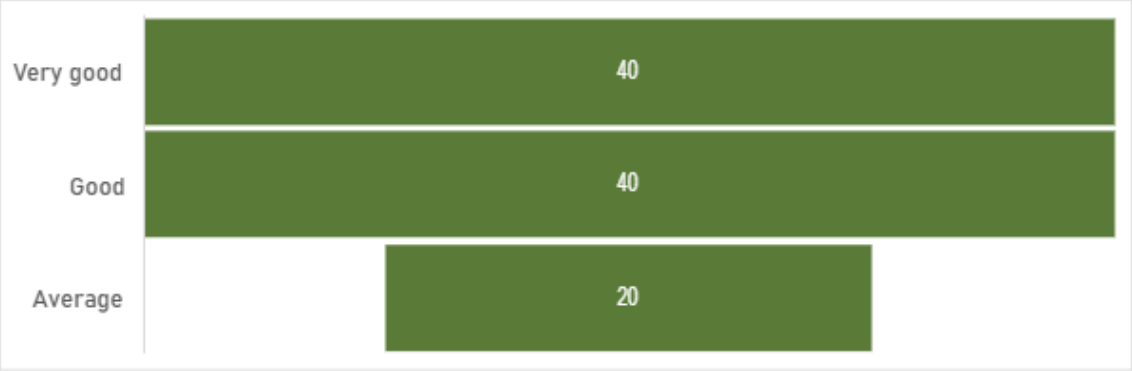
1. Regarding their mental health

Regarding students' perception of their mental health (Figures 19 and 20), the results show a clearly positive assessment. In general terms, **80% of students consider their mental health to be good or very good**, whilst 20% rate it as average, with no negative assessments recorded. This indicates a high level of perceived well-being.

As for changes compared to a year ago, the trend is also positive: **61.6% state that their mental health is somewhat or much better** (51.3% much better and 10.3% somewhat better), whilst 38.5% consider it to be the same. No responses indicating a deterioration were observed. Overall, these data reflect a general perception of improved emotional well-being, although a significant proportion of students perceive stability rather than progress in their situation.

Figures 19 and 20. Self-perception of general mental health and over the last year

General mental health (% of responses)

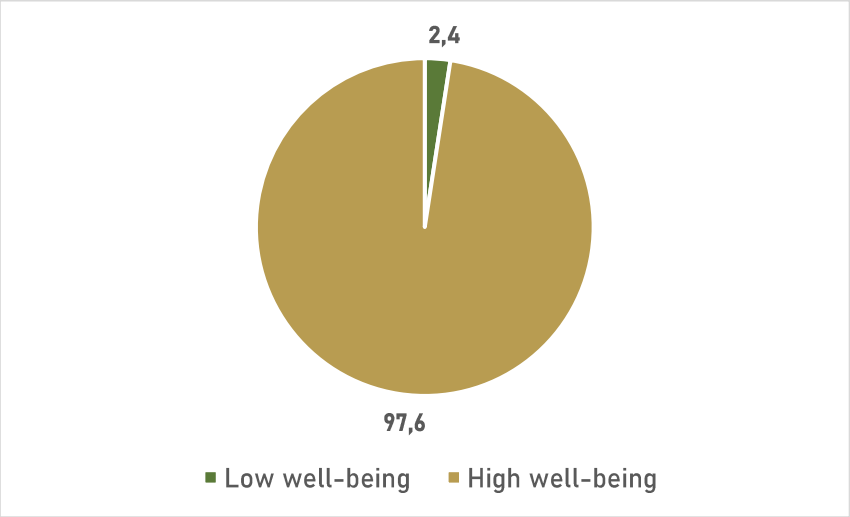


Mental health compared to a year ago (% of responses)

n: 45 and 39
Note: own compilation

When comparing the data on perceived emotional well-being (Figure 21) with the previous results, it can be seen that **virtually all students (97.6%) report high levels of well-being**, compared with a very small percentage (2.4%) reporting low well-being. This marked difference indicates a largely positive perception of emotional state. Furthermore, the average WHO-5 score stands at 19.26 points, which places it clearly above the cut-off point of 13, below which emotional distress and a risk of depressive symptoms are associated.

Figure 21. Levels of emotional well-being (% of responses)

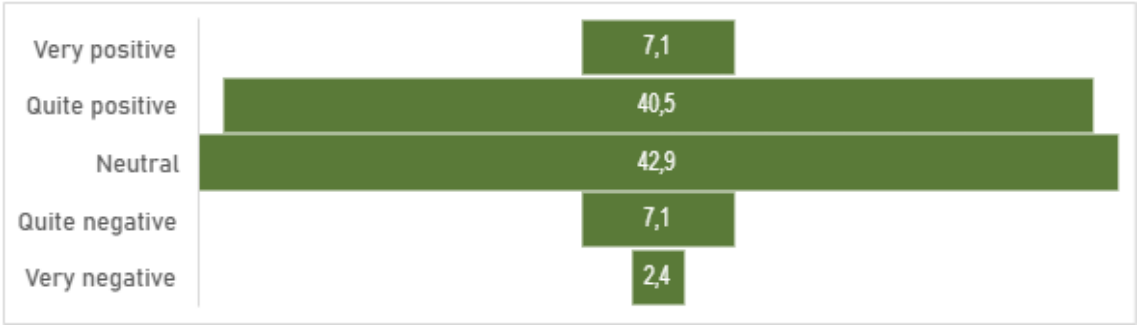


n: 41, m= 19.26/25
Note: Chart based on the WHO-5 well-being index, with the items: cheerful and in a good mood/calm and relaxed/active and energetic/fresh and rested/life full of things that interest me. Own creation.

2. Regarding their well-being at school

Looking at the overall assessment of the experience at the educational centre (Graph 22), the data show a moderate perception with a tendency towards the positive. **The most frequent response is a neutral assessment (42.9%), closely followed by 'quite positive' (40.5%),** whilst 7.1% consider it very positive. At the other end of the scale, 7.1% perceive it as quite negative and 2.4% as very negative.

Figure 22. Overall assessment of the experience at the school (% of responses)



n: 42
Note: own compilation

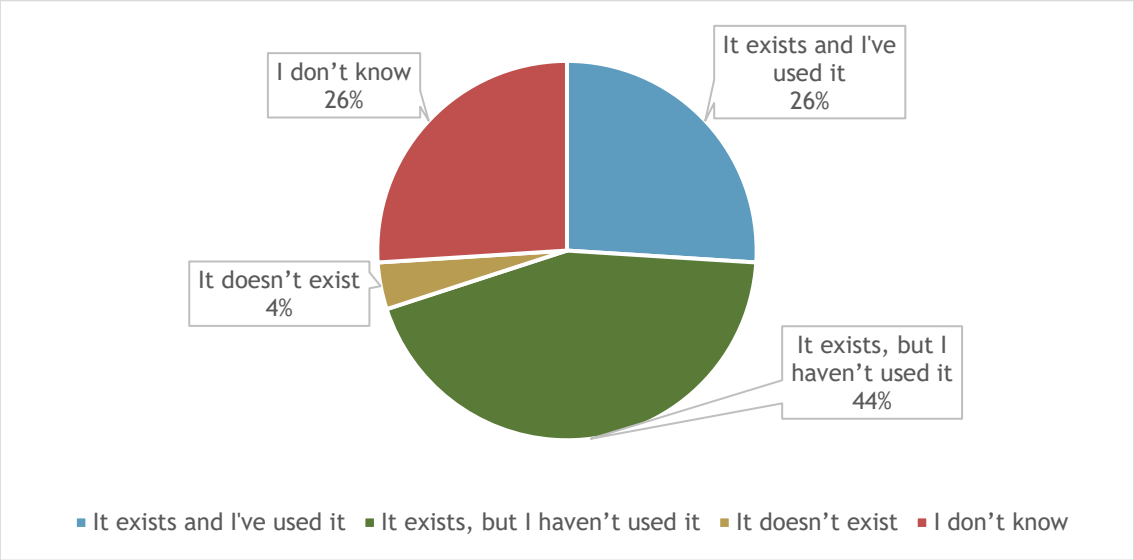
Figure 23 analyses the factors that most influence pupils' well-being within the educational environment. As with the focus group students, **the pressure to achieve good grades (68%) stands out very clearly as the main determining factor**, ranking well above the other variables. The atmosphere amongst peers (24%) follows at a considerable distance, whilst the workload has a much smaller impact (6%). Overall, the results reinforce the idea that well-being in the educational environment is strongly influenced by the dynamics of assessment and academic performance, which emerge as the predominant factor. Interpersonal aspects, whilst relevant, take a back seat and, in contrast to the focus group students, workload carries less weight in students' perceptions.

Figure 23. Main factors influencing student well-being in the educational environment (% of responses)

n: 50
Note: own compilation

With regard to emotional or psychological support resources in the school, Figure 24 shows that, although it is recognised that such services are available, their use by students remains limited. Specifically, **44% of students state that the resource exists but they have not used it, whilst 26% say they have made use of it**. Meanwhile, 4% indicate that this type of support does not exist at their school, and one in five students, 26%, state that they do not know whether it is available. Overall, it appears that the challenge lies not only in the existence of resources, but also in ensuring that students are aware of their existence, that they are effectively accessible, and that their use is normalised among the student body.

Figure 24. Availability and use of emotional/psychological support resources in schools (% of responses)



n: 50
Note: own compilation

3. Resources or initiatives to be implemented at school

From a proactive perspective, students identify various resources that could help improve their emotional wellbeing in the educational environment. Table 29 shows that **the overwhelming majority of students request guidance on how to manage stress, anxiety or frustration (84%),** which reaffirms the need to incorporate practical tools for emotional regulation. Next come **spaces to talk about how they feel in groups or with teachers (60%),** highlighting the importance of creating contexts for listening and emotional expression.

In second place are activities that foster coexistence, respect and empathy (46%) and quiet spaces or relaxation areas within the school (44%), highlighting both the importance of the relational climate and the need for physical environments that promote well-being. Meanwhile, access to emotional or psychological support professionals (32%) and peer support through groups, mentoring or school mediators (26%) reflect the importance of combining specialised resources with peer support strategies. Finally, although mentioned less frequently, sporting, artistic or personal expression activities (22%) are cited, and these remain a significant avenue for students' personal development and emotional expression.

Table 29. Resources that would help improve emotional wellbeing in the educational environment

	% of students who mention it
Guidance on how to manage stress, anxiety or frustration	84%
More opportunities to talk about how we feel in groups or with teachers	60%
Activities that promote coexistence, respect and empathy	46%
Quiet spaces or relaxation areas within the school	44
Access to emotional or psychological support professionals	32
Peer support (groups, mentoring or school mediators)	26
Sports, arts or personal expression activities	22%

n: 50
Note: compiled by the author

With regard to the digital sphere (Table 30), pupils primarily seek support and better management of technological demands. Of equal importance are **support from professionals, reducing the pressure associated with digital tasks, and resources to prevent cyberbullying (52% in all three cases),** suggesting that the digital environment is perceived both as a space of academic demand and as a potential risk, requiring support and regulation.

In second place are activities to promote the responsible use of social media and apps (48%), followed by training in security and privacy (36%) and the development of digital skills (28%). Overall, the data show that digital wellbeing requires not only access to technology, but also support, training and regulation of its demands.

Table 30. Resources that would help students feel safer and more comfortable using technology and the digital environment at school

	% of students who mention it
Support from professionals (tutors, counsellors or psychologists) to resolve digital problems	52%
Less pressure or demands related to digital tasks or online exams	52%
Resources to prevent cyberbullying and resolve online conflicts	52%
Activities that encourage the responsible use of social media and apps	48%
Workshops or classes on internet safety and privacy	36
Spaces to learn and practise digital skills (coding, editing, design, etc.)	28%

n: 50
Note: own compilation

Finally, regarding structural changes to improve well-being in schools (Table 31), **pupils prioritise greater attention to mental health and well-being within the classroom itself (48%),** which reinforces the need to integrate emotional care at the heart of the educational process. Secondly, measures linked to the school climate stand out, such as the creation of more safe and pleasant rest or break areas (34%) and the promotion of respect and inclusion (32%). The importance of improving communication between teachers, families and students is also highlighted (22%).

Meanwhile, although to a lesser extent, student participation in school decision-making (12%) and teacher training in emotional wellbeing and social interaction (8%) are mentioned. Overall, the results point to the need to strengthen social interaction, participation and the centrality of wellbeing as a structural pillar of the educational environment.

Table 31. Changes or initiatives to improve the sense of well-being and support in the school

	% of students who mention it
Greater focus on mental health and wellbeing in the classroom	48%
More safe and pleasant rest or break areas	34%
Promoting respect and inclusion for everyone (without discrimination)	32
Better communication between teachers, families and students	22
Greater student involvement in school decision-making	12
Teacher training in emotional wellbeing and social interaction	8%

n: 50
Note: own compilation

Conclusion:

Overall, the results paint a largely positive picture of students' perceived well-being and mental health, with high ratings and a clear upward trend over the last year. This contrasts with the significant prevalence of anxiety and depression reported by professionals.

For respondents, the academic environment appears to be heavily influenced by pressure to achieve good grades and, although emotional support resources exist, their use and awareness remain limited. From a proactive perspective, the vast majority of students highlight the need for practical tools to manage stress, anxiety or frustration. There is also a call for spaces where students can be heard and for an improvement in the social climate, as well as support in dealing with the risks and discomforts of the digital environment. Finally, the proposals for change reinforce the need to integrate mental health as a central pillar of the educational project, promoting more inclusive, participatory and emotionally sustainable environments.

ICELAND

CURRENT STATE OF MENTAL HEALTH AND EMOTINAL WELLBEING AMONG ICELANDIC STUDENTS

Overview of mental health and emotional wellbeing among young people

The current state of mental health and emotional wellbeing among young people in Iceland is monitored through large-scale national surveys, notably the Icelandic Youth Study (*Íslenska æskulýðsrannsóknin*) and the Young People's Survey (*Ungt fólk*). Taken together, these data paint a picture in which **mental wellbeing steadily deteriorates as students progress through adolescence**.

Official figures show a sharp decline in positive perceptions of mental health. The proportion of compulsory education students who rate **their mental health as 'good or very good' falls from 87% in Year 6 to 68% in Year 10** (Menntavísindastofnun Háskóla Íslands, 2025). At the same time, symptoms of frequent anxiety (weekly or more) rise from 33% in Year 6 to 54% in Year 10 (Ibid.).

As for depression, population-based studies document that mean scores for **depressive symptoms** among 13- to 15-year-olds increased significantly during the COVID-19 pandemic (rising from 19.4 in 2018 to 21.9 in 2020), remaining high in subsequent years (Thorisdottir et al., 2023).

Added to these figures are **alarming indicators of severe distress**. In Year 10, 15% of students report having intentionally self-harmed in the past year (Menntavísindastofnun Háskóla Íslands, 2025). This situation is exacerbated in upper secondary education, where 14% report self-harm and **30% state they have had suicidal thoughts** in the last 12 months (Menntavísindastofnun Háskóla Íslands, 2023). In fact, the adolescent suicide rate in Iceland (9.7 per 100,000) is considered high compared to other high-income countries (UNICEF Innocenti, 2020).

Gender is the strongest predictive factor in the Icelandic data, revealing a **huge gap that widens at the end of compulsory education**. In Year 10, 84% of boys report good mental health, compared with only 57% of girls (Menntavísindastofnun Háskóla Íslands, 2025).

Educational context and factors associated with well-being

The Icelandic school environment is characterised by high expectations that result in constant stress for pupils. According to Rannsóknir og greining (2021), in 2021, 92% of upper secondary school students reported high academic demands. As a result of this pressure, there is persistent burnout: **25% of boys and 29% of girls state that schoolwork is 'too heavy' on a frequent basis**, and report high levels of boredom and discomfort within the school, conditions that are a precursor to disengagement from school and absenteeism (Ibid.).

This high-pressure environment is exacerbated by widespread exhaustion, which acts as a driving force behind this malaise. In upper secondary education, 53% of students report feeling tired at school almost every day (41% of boys compared to 64% of girls), and 39% have chronic problems falling asleep (Menntavísindastofnun Háskóla Íslands, 2023). In addition to academic pressure, loneliness emerges as a key risk factor: **in compulsory education, between 10% and 12% of students say they feel lonely at school**, a figure that rises to 15% among girls in Year 10 (Menntavísindastofnun Háskóla Íslands, 2025)

With regard to available resources, national surveys reveal an extremely worrying 'access gap': as young people grow older and their symptoms of distress worsen, they feel they have less support in their schools. **The percentage of students who say they have a trusted adult at school to turn to drops sharply from 53% in Year 6 to 41% in Year 10** (Menntavísindastofnun Háskóla Íslands, 2025). Following the transition to upper secondary education, this perceived school support falls to a mere 35% (Menntavísindastofnun Háskóla Íslands, 2023).

To compensate for the system's shortcomings, Icelandic young people themselves are calling for direct and structural solutions. Through discussion forums, they are demanding that economic and access barriers be overcome by creating free psychological services, and they are calling for the pathways to seek help to be clarified and made more visible, such as the 1717 helpline (Maskína, 2025). Young people themselves emphasise the vital role of youth centres and community spaces as essential social support infrastructures; safe places where adolescents can connect with their peers, obtain information and combat isolation (Ibid.).

RESULTS

The following section presents the main findings from the fieldwork carried out in Iceland, which included in-depth interviews with nine professionals in the education sector and experts in child and adolescent mental health, as well as a survey of 58 students aged between 16 and 18.

THE VIEWS OF PROFESSIONALS AND EXPERTS

What are the main emotional and/or mental health issues you observe among teenage students today?

As shown in Table 32, professionals and experts primarily highlight issues related to **emotions**, reflecting difficulties in emotional identification, expression and regulation, as well as the presence of emotional fatigue and anxiety. Equally frequently, **excessive use of social media and mobile devices** is highlighted. Next come difficulties in peer relationships and social adjustment, associated with problems in forming bonds and managing conflicts. Finally, to a lesser extent, difficulties with self-esteem and problems with attention and behaviour are identified, arising both from a sensitive developmental stage and a reduced ability to concentrate.

Table 32. Most frequently mentioned mental health problems

Mental health problem identified	No. of interviews mentioning it	Analysis of the problem
Issues related to feelings	5	Difficulty recognising emotions and lack of self-regulation skills (poor anger management). Limited ability to express emotions appropriately and emotional fatigue. Anxiety.
Use of social media and digital technologies and excessive use of mobile phones	5	Unrestricted use of social media/mobile phones.

Relationships with parents/ Peer relationships	4	Social adjustment problems. Difficulties making friends and resolving conflicts.
Difficulties with self-esteem	2	A sensitive period of development for self-esteem.
Attention and behavioural challenges	2	Pupils may be able to concentrate for shorter periods of time compared to older pupils.

Note: Compiled by the author.

Which groups are most affected and/or vulnerable?

As shown in Table 33, professionals and experts agree that vulnerability is particularly concentrated among **students with special needs**, who are more sensitive to comments and face greater difficulties in achieving academic goals. Similarly, **students from divorced families** and those in **early adolescence (Years 5–6)** are frequently identified, associated, respectively, with reduced parental attention and the changes inherent to puberty and emotional regulation.

To a lesser extent, other profiles emerge, such as children with little parental involvement and those from families in a more precarious socio-economic situation, in both cases linked to less attention being paid to their needs and difficulties.

Table 33. Groups in situations of greater vulnerability

Identified vulnerable group	No. of interviews mentioning it	Associated vulnerability factors
Students with special needs	4	More sensitive to comments. More difficulty in achieving academic goals.
Students from divorced families	3	Less parental attention towards children and their problems
Students in early adolescence (Years 5–6)	3	Changes related to puberty, controlling emotions.
Children whose parents are minimally involved in their lives.	2	Less attention paid to children and their problems.

Pupils whose families are in a more precarious socio-economic situation.	2	Less attention paid to children and their problems.

Note: Compiled by the author.

Which aspects of the school environment — including relationships, classroom dynamics and the use of technology — do you observe as having the greatest influence on pupils' mental health and emotional well-being?

Table 34 analyses various school and digital environment factors that affect pupils' well-being. Among the main risk factors are the **use of mobile phones** and, to a lesser extent, the use of social media, both of which are associated with negative impacts on well-being. Meanwhile, group dynamics and the classroom microclimate, as well as the relationship between students and teachers, are identified as protective factors, insofar as they can create supportive environments and promote well-being when relationships are positive.

Table 34. School and digital environment factors

Identified factor	Type of factor*	No. of interviews mentioning it	Perceived impact on well-being**
The use of	Digital / technological	8	Risk factor
Group microclimate, group dynamics	Relational	5	Protective factor
Use of social media	Digital / technological	3	Risk factor
The relationship between students and teachers	Relational	2	Protective factor

* Type of factor: Academic | Relational | Organisational | Digital
** Perceived impact: Risk factor | Mixed factor | Protective factor
Note: Compiled by the authors.

Which resources, strategies or support measures implemented have proven most effective in promoting students' mental health and preventing bullying or suicide in schools?

Table 35 analyses various resources and support measures aimed at preventing bullying and improving school life. Among the most notable are **structured social-emotional learning and prevention programmes**, which receive the highest number of mentions and include initiatives such as *Lions Quest*, the *VEIP* programme, *Be patyčių*, the *SEU* programme, *En mi propio camino* (Savu keliu), *Key to Success* and *Encrucijada de la adolescencia*. These programmes aim to reduce instances of bullying, facilitate its identification, and equip pupils with conflict resolution and communication skills.

Furthermore, collaboration with external institutions, such as *Jaunimo linija*, the Vilnius Health Office, and educational and child protection services, emerges as a key resource that provides specialist support and educational materials, whilst reinforcing prevention efforts within the school environment.

Finally, integrated educational strategies in the classroom, such as teamwork or ethics lessons, are identified as contributing to strengthening coexistence, promoting peer support and developing social skills.

Table 35. Resources, strategies or support to be implemented

Identified resource or support	Level of intervention*	No. of interviews mentioning it	Reason for perceived effectiveness
Structured programmes on social-emotional skills and bullying prevention	School	8	They reduce bullying, make it easier to identify, and help students learn to resolve conflicts and communicate effectively.
Collaboration with external support organisations	Community/external services	5	They provide information, educational materials and support for the prevention of bullying
Collaborative work among students	Group	3	Reinforces the idea that problems cannot be solved individually.

Integration of ethics into the curriculum	School	3	Reduces bullying, improves the identification of such situations and develops conflict resolution and communication skills.

* Level of intervention: Individual | Group | School | Community/external services
Note: Own work.

If you could propose key changes to improve emotional wellbeing and mental health support in schools, what would they be?

Table 36 shows that the proposals for improvement focus on strengthening the organisational and training aspects of the education system to enhance pupils' well-being. Of particular note is the need to strengthen **cooperation with families through protocols and policies**, which is considered a priority measure. Furthermore, the importance of **training in emotional skills**, for both pupils and teachers, is highlighted as a key area for intervention. Secondly, there is a proposal to increase human resources by recruiting more specialists, and finally, improvements to physical spaces are suggested, aimed at creating environments more conducive to well-being.

Table 36. Priority improvement proposals

Proposal for improvement	Type of change*	No. of interviews mentioning it	Perceived level of priority**
Cooperation with parents	Organisational Protocols / policies	5	High
Improving students' emotional intelligence	Educational	4	Sign up
More training for teachers and specialists	Training	4	Registration
More assistants/specialists	Human resources	3	High

More different spaces: for example, quiet spaces, play areas, sensory rooms.	Organisational	3	Medium

* Type of change: Organisational | Training | Human resources | Protocols/policies | Prevention/promotion
** Perceived priority: High | Medium | Low
Note: Own work.

Conclusion:

Overall, the results show that pupils' well-being is affected by a combination of emotional, relational and digital factors, with particular emphasis on difficulties in emotional regulation, anxiety and intensive use of technology. These issues are most pronounced among certain vulnerable groups, such as pupils with special educational needs, those in the early stages of adolescence, or those from more complex family and socio-economic backgrounds. In response to this, both preventive resources —particularly social-emotional learning programmes and anti-bullying interventions— and protective relational factors within the school environment are identified as key. In this vein, proposals for improvement highlight the need for a comprehensive response that combines strengthening emotional education, involving families, bolstering human resources and improving organisational conditions, thereby establishing a systemic approach aimed at promoting well-being and harmonious coexistence in schools.

THE PERSPECTIVE OF STUDENTS AGED 16 TO 18

1. Regarding their mental health

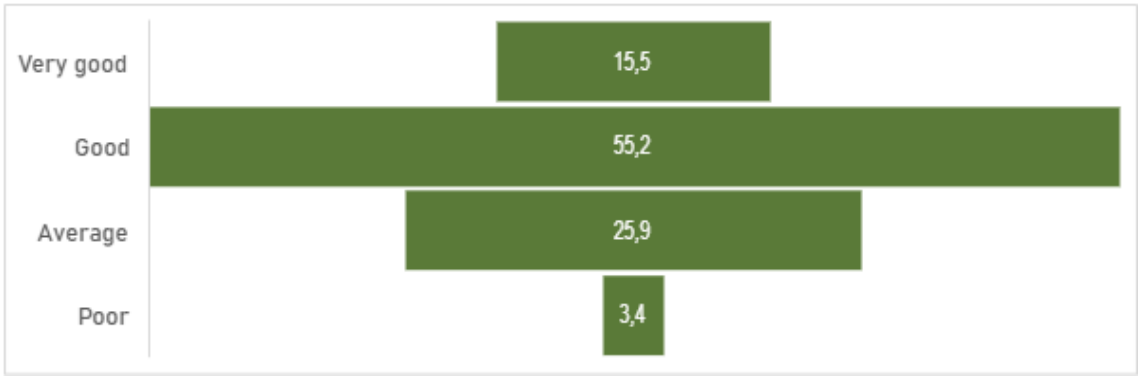
Regarding the general perception of students' mental health (Figure 25), the results show a predominantly positive assessment. **70.7% consider their mental health to be good or very good** (55.2% good and 15.5% very good), although 25.9% rate it as average and just 3.4% perceive it as poor, which suggests some signs of distress.

As for changes compared to a year ago (Figure 26), the trend is favourable: **53.5% state that their mental health has improved** (39.7% somewhat better and

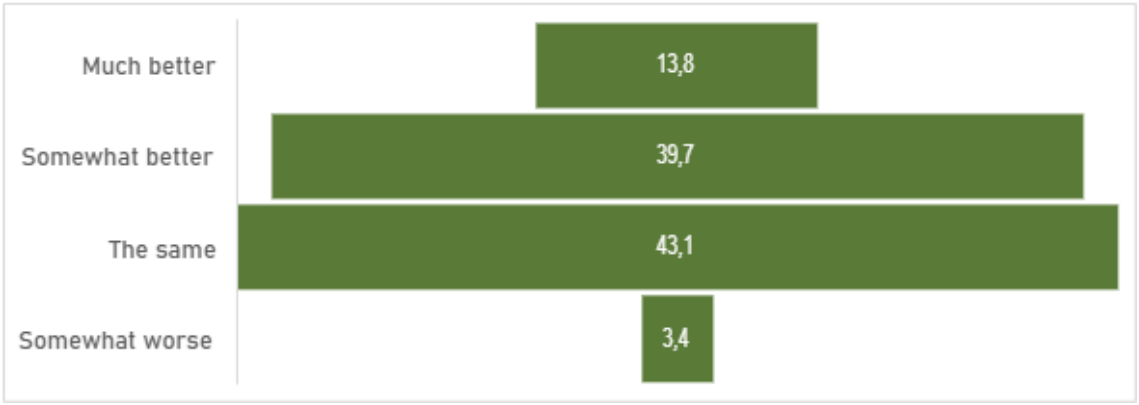
13.8% much better), whilst 43.1% indicate that it remains the same and 3.4% that it has worsened. Overall, there is a positive perception with a tendency towards improvement, although with a minority feeling uneasy and a significant proportion of students perceiving stability.

Figures 25 and 26. Self-perception of general mental health and over the last year

General mental health (% of responses)



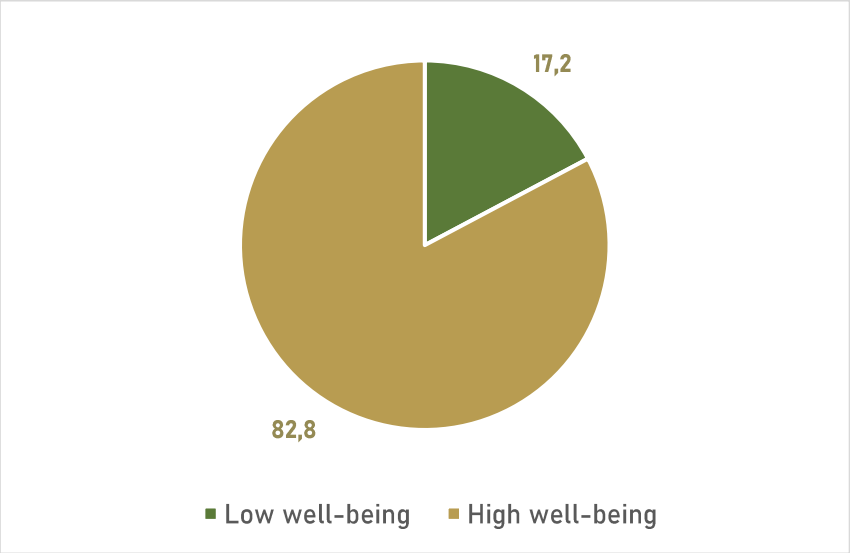
Mental health compared to a year ago (% of responses)



n: 58
Note: compiled by the author

With regard to students' perception of their emotional well-being (Figure 27), the results also show a clearly positive assessment. **The vast majority (82.8%) report high levels of well-being**, compared with 17.2% who report low levels of well-being. Furthermore, the average WHO-5 score stands at 16.51 points, above the cut-off point of 13, below which emotional distress and a risk of depressive symptoms are associated. These results suggest, in general terms, a good state of emotional well-being consistent with perceptions of mental health.

Figure 27. Levels of emotional well-being (% of responses)

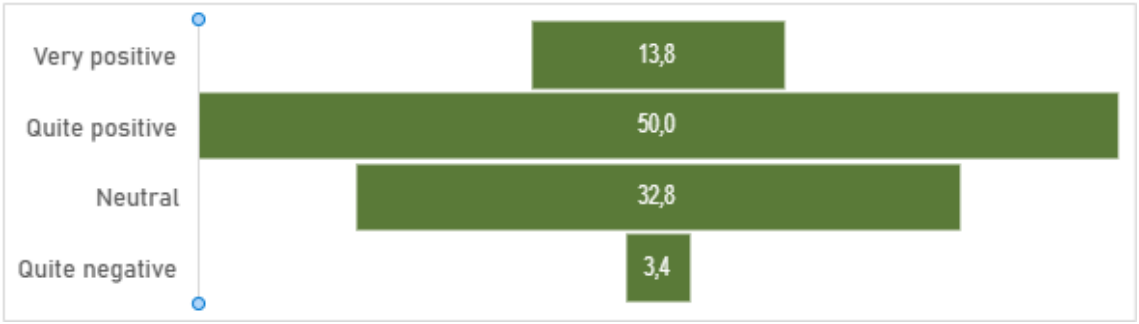


n: 58, m= 16.51/25
Note: Chart based on the WHO-5 well-being index, with the items: cheerful and in a good mood/calm and relaxed/active and energetic/fresh and rested/a life full of things that interest me. Own creation.

2. Regarding their well-being at the school

As for the overall assessment of the experience at the educational centre (Figure 28), the results again show a predominantly positive perception. The most frequent response is **'quite positive' (50.0%), followed by a neutral assessment (32.8%)** and 13.8% who consider it very positive. At the other end of the scale, only 3.4% perceive their experience as quite negative, with no 'very negative' ratings recorded. Overall, the data reflect a generally positive experience, although a significant proportion of students remain in an intermediate position.

Figure 28. Overall assessment of the experience at the school (% of responses)

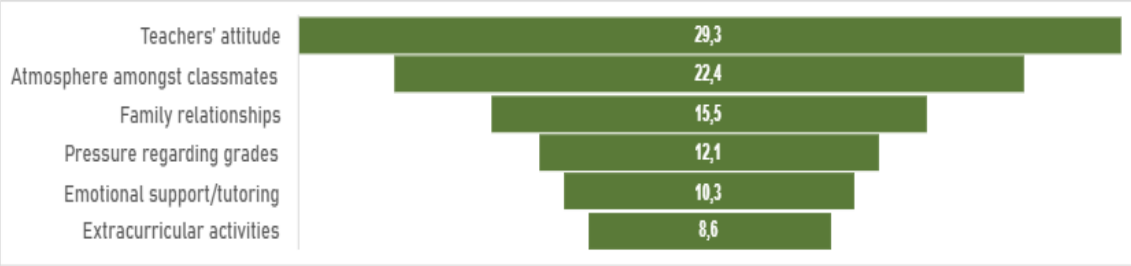


n: 58
Note: own compilation

Figure 29 analyses the factors that most influence pupils' well-being within the educational environment. **The most prominent factor is the treatment by teaching staff (29.3%), followed by the atmosphere among peers (22.4%)** and family relationships (15.5%). Some way behind are pressure regarding grades (12.1%) and emotional support or tutoring (10.3%), whilst extracurricular activities carry the least weight (8.6%).

Overall, the data show that pupils' well-being is primarily influenced by relational factors both within and outside the school, whilst academic aspects, such as pressure regarding grades, have a more moderate influence.

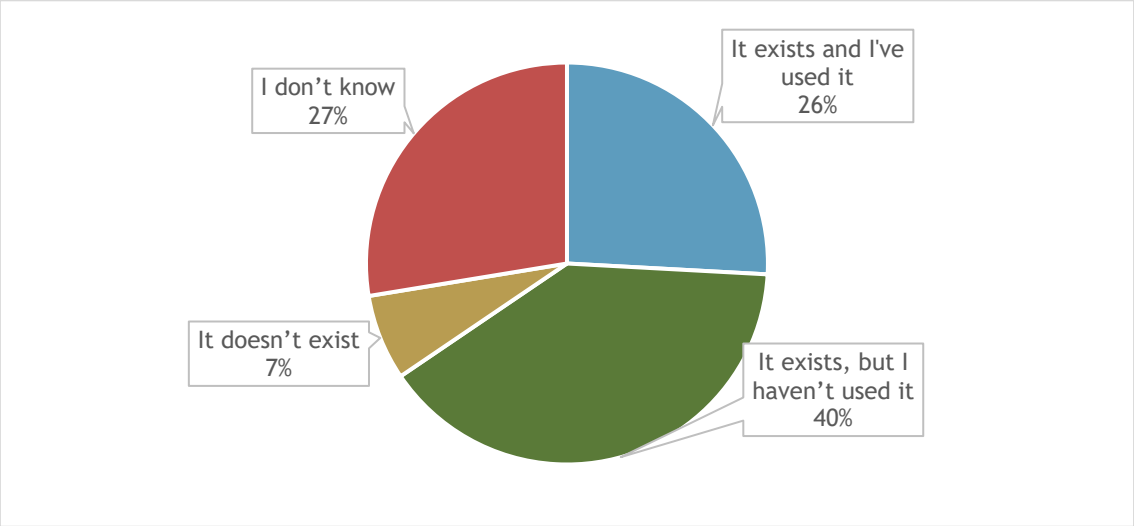
Figure 29. Main factors influencing pupils' well-being in the educational environment (% of responses)



n: 58
Note: own compilation

With regard to emotional or psychological support resources in the school (Figure 30), the results show that, although these exist, their use is limited. **40% of students state that the resource exists but they have not used it, whilst 26% say they have made use of it**. On the other hand, 27% indicate they do not know if these resources are available and 7% state that they do not exist in their school.

Figure 30. Availability and use of emotional/psychological support resources at school (% of responses)



n: 58
Note: own compilation

3. Resources or initiatives to be implemented at school

From a proactive perspective, pupils identify various resources to improve their emotional wellbeing. Table 37 shows that **the** main **priorities** are **spaces to talk about how they feel (55%) and guidance on managing stress, anxiety or frustration (52%).** This highlights, as the professionals did, the importance of emotional expression and the development of coping strategies.

In second place are sporting, artistic or personal expression activities (45%), as well as access to emotional support professionals and activities that foster social interaction and empathy (both at 43%). Peer support also features significantly (40%). Finally, quiet or relaxation areas within the school are the least frequently mentioned (19%).

Overall, the data reflect the need to combine spaces for listening, emotional education and relational resources to strengthen students' well-being.

Table 37. Resources that would help improve emotional wellbeing in the educational environment

	% of students who mention it
More spaces to talk about how we feel in groups or with teachers	55%
Guidance on how to manage stress, anxiety or frustration	52%
Sports, arts or personal expression activities	45
Access to emotional or psychological support professionals	43%
Activities that promote coexistence, respect and empathy	43%
Peer support (groups, mentoring or school mediators)	40%
Quiet spaces or relaxation areas within the school	19%

n: 58
Note: own compilation

With regard to the digital sphere (Table 38), pupils mainly request support and guidance. **The need for access to professionals to resolve digital problems stands out clearly (76%),** ranking well above the other options. In second place are training in digital skills (45%) and peer support (43%), followed by activities to promote responsible use of social media and apps (38%) and resources to prevent cyberbullying (31%). Finally, reducing the pressure associated with digital tasks (28%) and training in security and privacy (12%) are given less weight.

Table 38. Resources that would help students feel more confident and comfortable using technology and the digital environment at school

	% of students who mention it
Support from professionals (tutors, counsellors or psychologists) to resolve digital problems	76%
Spaces to learn and practise digital skills (programming, editing, design, etc.)	45%
Peer support (mentoring or support groups for using technology)	43%
Activities that encourage the responsible use of social media and apps	38%
Resources to prevent cyberbullying and resolve online conflicts	31%
Less pressure or demands related to digital assignments or online exams	28%
Workshops or classes on internet safety and privacy	12%

n: 58
Note: own compilation

Regarding changes to improve well-being in the school (Table 39), pupils prioritise **teacher training in emotional well-being and social interaction (47%),** ranking this as the top measure. In second place are more cooperative and less competitive activities (34%) and greater pupil involvement in decision-making (28%). Next come the promotion of respect and inclusion (26%) and improved communication between teachers, families and students, along with the creation of more rest areas (both at 24%). Finally, peer tutoring or mentoring programmes carry less weight (7%).

Overall, the results point to the importance of strengthening community spirit, participation and the role of teachers in promoting well-being.

Table 39. Changes or initiatives to improve the sense of well-being and support in the school

	% of students who mention it
Teacher training in emotional wellbeing and social cohesion	47%
More cooperative and fewer competitive activities	34%
Greater student involvement in school decision-making	28
Promoting respect and inclusion for everyone (without discrimination)	26
Better communication between teachers, families and students	24%
More safe and pleasant rest or recreation areas	24%
Peer tutoring or mentoring programmes	7%

n: 50
Note: own calculation

Conclusion:

Overall, the results show a largely positive perception of students' emotional well-being, with high levels of mental health and a general trend towards improvement, although a significant proportion perceive stability or neutrality. This state is mainly linked to relational factors, such as the treatment received from teachers, the atmosphere amongst peers and the family environment, whilst academic factors carry a more moderate weight. At the same time, clear areas for improvement have been identified, centred on creating spaces for listening and emotional support, developing skills for managing distress, and providing greater support in both educational and digital contexts. Finally, students point to structural changes that reinforce coexistence, participation and the role of teachers, highlighting the importance of placing emotional well-being at the heart of the educational environment.

COMPARATIVE SUMMARY

A comparative analysis of the results obtained in Romania, Lithuania, Spain, Cyprus and Iceland reveals shared structural patterns regarding students' mental health, whilst highlighting significant differences linked to educational models, institutional conditions and academic cultures within each national context.

One of the most consistent findings of the study is the **divergence between the overall self-perception of mental health and levels of emotional well-being** measured through specific indicators. Generally speaking, students tend to assess their mental health in positive or stable terms; however, analysis of specific dimensions—such as the quality of rest, emotional arousal or a sense of calm—reveals the presence of significant levels of low well-being. This gap is most pronounced in Romania, where the difference between the perception of good or very good health and measured well-being (WHO-5) is the most marked (a difference of 21.8 percentage points), suggesting greater structural emotional fragility. Spain (9 percentage points difference) and Lithuania (8.6 percentage points) occupy intermediate positions, whilst Iceland and Cyprus show greater convergence between the two measures, ranking as the contexts with the most favourable indicators (between 70–90% in both measurements).

In terms of explanatory factors, a set of cross-cutting determinants has been identified that operate in an interrelated manner across the five countries. Firstly, **the family environment emerges as a central axis**, particularly in situations characterised by instability, a lack of emotional support or fragmented care structures. Secondly, **relational dynamics in the school environment—both with peers and with teaching staff—are ambivalent factors,** capable of acting simultaneously as protective or risk factors. Added to this is the role of the digital environment, the intensity of use of which is consistently associated with overstimulation, social pressure and attention difficulties. These elements, combined with developmental factors specific to adolescence and socio-economic inequalities, create a scenario of cumulative vulnerability.

Although these factors operate across the board, their significance and how they manifest vary between countries. In Romania, the family environment takes on a particularly prominent role, linked to labour migration dynamics, parental absence and fragile support structures, which intensifies its impact on emotional well-being. In Spain, whilst this factor is also present, distress appears to be more heavily influenced by the school environment, particularly by academic pressure and assessment dynamics. In Lithuania and Cyprus, a

greater interaction between relational and digital factors is observed, where the importance of peer relationships and the use of social media takes on specific relevance in shaping well-being. Meanwhile, in Iceland, although these elements are equally present, their impact appears to be more muted, suggesting the existence of more protective educational and social environments or higher levels of integration of emotional well-being.

Within this framework, **academic pressure emerges as one of the main drivers of emotional distress, although its relative significance varies across contexts**. In Cyprus and Spain, it emerges as the most decisive factor affecting well-being in the school environment, with 68% and 44.7% of respondents citing it as the main factor. This highlights, from the young people's perspective, a system that is strongly focused on performance and assessment. In Romania, whilst it shares this centrality (36.4%), its impact is particularly linked to critical moments in the educational journey, such as transition or assessment processes. In Lithuania, academic pressure remains a significant factor (29.4%), but is part of a more balanced system of factors. Conversely, in Iceland its impact is comparatively lower (12.1%), suggesting the existence of educational models less centred on a competitive logic.

These differences cannot be understood solely in individual terms, but rather point to **national educational cultures**, particularly with regard to assessment systems, curriculum organisation and institutional expectations. In this sense, the recurring demand from students to reduce the workload and demands associated with assignments and exams takes on a structural dimension, reflecting tensions inherent in educational models primarily geared towards performance.

With regard to intervention strategies, the active involvement of families, the strengthening of peer support and the use of digital resources adapted to young people's communication styles stand out. However, in countries such as Spain and Romania, proposals are largely geared towards addressing structural deficits—particularly in terms of human resources and specialised training—which indicates that systems in the field of school mental health are still in the process of consolidation. Lithuania and Cyprus occupy an intermediate position, combining structural needs with progress in incorporating preventive approaches. In contrast, Iceland presents a more consolidated model, where emotional well-being appears to be more integrated into the day-to-day functioning of the education system.

Another cross-cutting issue is **the gap between the formal availability of emotional support resources and their actual use** by pupils. Despite the presence of guidance and psychological support services in most contexts, their use is limited, suggesting the persistence of symbolic and practical barriers, such as stigma, lack of trust or the perception that these resources are poorly suited to actual needs.

Finally, regarding **the resources students request to improve their well-being**, the hierarchy varies significantly between countries. The need for guidance and practical tools to manage stress and anxiety is the overwhelming priority in Cyprus (84%) and, to a large extent, in Romania (61.1%), highlighting a marked shortfall in the day-to-day management of distress. In Iceland, this demand (52%) shares prominence with the need for more spaces to talk about feelings (55%). Meanwhile, in Spain (40%) and Lithuania (30%), the call for emotional guidance remains highly significant, but is more evenly balanced with the demand for other spaces, such as the promotion of sporting and artistic activities in Spain (39%) or the creation of relaxation areas and quiet spaces in Lithuania (31%).

Overall, the comparison between countries shows that students' mental health in Europe follows common patterns — such as the normalisation of distress, the burden of academic pressure and the gap between perceived and actual well-being — but manifests itself differently depending on educational and cultural contexts. This diversity confirms that, although the challenges are shared, responses must be adapted to each context, incorporating emotional well-being as a structural pillar of the education system.

CONCLUSIONS

The analysis presented throughout the report highlights that **students' mental health and emotional well-being have become a central element in the functioning of education systems,** shifting from a peripheral issue to the core of the school experience. Far from being determined by isolated factors, students' well-being is the result of a complex interaction between personal, relational, institutional and socio-cultural dimensions.

One of the most significant findings to emerge from the study is **the difficulty in identifying and recognising emotional distress in adolescence**. The coexistence of a generally positive perception of mental health alongside objective indicators of low well-being reflects a certain normalisation of fragile emotional states, which limits the capacity for early detection and response. This situation highlights the need to strengthen not only support systems, but also the emotional skills of the students themselves and the educational community as a whole.

At the same time, the results show that education systems continue to operate, to a large extent, according to a logic that prioritises academic performance over well-being. **The pressure associated with assessment, workload and external expectations remains a defining feature of the school experience, with direct effects on pupils' mental health**. This fact calls for a re-examination of dominant pedagogical models and a rethinking of the balance between academic demands and emotional care.

Furthermore, the existence of support resources, whilst necessary, is not sufficient unless accompanied by conditions that facilitate their effective use. The persistence of stigma, the perceived distance between students and support services, as well as the lack of integration of these resources into the school's daily life, limit their real impact. In this regard, the challenge lies not only in expanding the available resources, but in transforming school cultures so that emotional well-being becomes a visible, accessible and legitimised element.

Another key element is the need to move towards more holistic approaches that go beyond one-off, fragmented interventions. Pupils' mental health cannot be addressed exclusively through specialised services, but requires the cross-cutting involvement of the entire educational community, including teachers, families and the pupils themselves. This entails **incorporating emotional well-being into teaching practice, the organisation of the school and the relational dynamics that arise within the school environment.**

In this context, students' demands take on particular significance, as they clearly point to the areas where the greatest shortcomings are perceived: the **need for practical tools to manage distress, the creation of spaces for support and listening, and the building of closer and more meaningful educational relationships**. These demands not only reflect individual needs but also challenge the ways in which the educational experience is currently organised.

In short, the report's findings show that making progress in improving students' emotional wellbeing requires a profound transformation of education systems. It is not merely a matter of incorporating new resources or programmes, but of reconfiguring priorities, practices and institutional cultures to place well-being at the centre. Only through this approach will it be possible to respond to a challenge which, far from being temporary, constitutes one of the main educational and social challenges in the current European context.

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