



# ADVANCING YOUTH MENTAL HEALTH AND WELL-BEING

A mapping  
of policy frameworks,  
tools and services  
across Europe



## Youth Partnership

Partnership between the European Commission  
and the Council of Europe in the field of Youth



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## Acronyms and abbreviations

<b>AI</b>	Artificial intelligence
<b>ECG</b>	European Child Guarantee
<b>EPSCO</b>	Employment, Social Policy, Health and Consumer Affairs Council
<b>EU</b>	European Union
<b>HBSC</b>	Health Behaviour in School-Aged Children
<b>NEET</b>	Not in employment education or training
<b>NGO</b>	Non-governmental organisations
<b>OECD</b>	Organisation for Economic Co-operation and Development
<b>WHO</b>	World Health Organization

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1. Disclaimer: Figures 1, 2, 3, 5 and 6 have been designed using Napkin.ai templates.

# Executive summary

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**Y**oung people's mental health and well-being has received increasing attention within the public agenda, especially after the Covid-19 pandemic. Multiple issues have had an effect on young people's mental health and well-being. Elements such as socio-economic status, job precarity or lack of financial stability, combined with ongoing geopolitical conflicts, climate change, as well as digital transformation and increased social media use, have aggravated the overall situation of young people. These stressors have a strong influence on how young people perceive the world and shape their own identities.

Acknowledging the previous work of the EU–Council of Europe Youth Partnership on this topic, and the momentum of this policy priority, the study builds on the existing findings and aims to contribute to an understanding of the current realities. In this context, the study seeks to offer a general overview of European and national policies in the field and identify good practices for services and capacity building of professionals. It looks at all dimensions – policy, practice and research – in an attempt to provide a relevant state of play of the analysed issue.

The study is based on a combination of desk research and data collected through an online survey. Benefiting from the support received from the correspondents of the European Knowledge Centre for Youth Policy (EKCYP), members of the Pool of European Youth Researchers (PEYR) and other key stakeholders from the European youth sector, it brings to attention insights from 24 countries, as well as work done by major European and international organisations.

In order to understand how the main contributing factors are reflected in current policies, the study provides a selection of European, international and national initiatives – policies and legal frameworks – which are designed to advance young people's mental health and well-being. Where possible, the analysis distinguishes between general mental health instruments and specific ones for children and young people.

While not all featured policies may be focused specifically on “mental health” or “well-being” they regulate different relevant aspects of young people's lives, from education and schools to youth strategies and online safety.

Additionally, the study explores the different services and tools available to young people, offering an inventory of existing practices. The first chapter analyses key elements such as who are the main providers, what are the main age groups for which services are designed, and what are the main formats in which they are delivered (online, on premises or hybrid).

The next chapter – competences of the professionals dealing with mental health and well-being – offers an overview of the challenges and good practices observed in the sector. The professionals working in the field, including youth workers, school counsellors and other professionals, need to adapt fast to respond to emerging challenges, often with limited resources and capacities. In this context, this chapter draws attention to the different capacity-building opportunities available, and the national competence frameworks and tools that have been created for this purpose.

The final chapter draws a series of conclusions and actionable recommendations based on the insights gathered throughout the study. It highlights the main challenges and opportunities that could be further advanced by those interested in prioritising young people's mental health and well-being.

# Introduction

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**Y**oung people in Europe face many pressures and challenges that have an impact on their mental health and well-being, including increased academic demands and expectations, changing social relationships with family and peers, global insecurity and increasing exposure to new technologies.

Although for the purposes of European youth policies young people are considered to be persons between the ages of 13 and 30 (EU–Council of Europe Youth Partnership 2025), in this study, young people are broadly defined as the age group 11 to 30 years old. Based on the literature review and identified practices, there is not one clear age range, as different policies and services are addressed to varying age groups (that is, from focusing only on children under 18 to a wider spectrum from 11 to over 25 years old). The age group defined by the study covers important developmental milestones, particularly focusing on adolescence and young adulthood. For example, specific issues arise for adolescents who need to handle increasingly challenging academic demands, start preparing for their future education, and later work trajectory. Young adults need to navigate a landscape of increasing independence and different contexts, such as living away from their parents for the first time, following higher education, dealing with a precarious economic situation and working part- or full-time, while often building longer-term romantic relationships. Thus, young people are one of the most vulnerable groups in society, and many of the recent global crises have been seen to affect young people the most. Approximately one in seven adolescents experience trouble with their mental health at a global level (WHO 2024). Girls, especially, report poorer mental well-being, which also deteriorates in adolescence as they develop. While the second and third decades of life are characterised by rapid change and development, young people today have witnessed several critical changes societally as they grow: digital transformation, globalisation, migration, urbanisation and climate change (WHO 2020). According to the 2024 Eurobarometer close to one in two respondents across the EU (46%) reply that, in the last 12 months, they have experienced an emotional or psychosocial problem (such as feeling depressed or feeling anxious) (European Commission 2024a).

## Existing work in the area

This study builds on the previous work done by the EU–Council of Europe Youth Partnership on the topic of youth mental health and well-being, which started in 2020, with the onset of the pandemic. Two studies on the impact of the pandemic on young people's mental health and well-being were published in 2021 and 2022, followed by a volume of the [Coyote Magazine #32: Well-being?!](#). In 2022, the topic of mental health and well-being was addressed within the context of the [symposium Navigating Transitions: adapting policy to young people's changing realities](#). Other Youth Partnership initiatives are expected to provide new resources for both policy makers as well as practitioners, such as the upcoming [T-kit on the well-being and mental health of young people](#). In March 2025, the Youth Partnership organised a



[seminar on young people's mental health and well-being](#) to share the preliminary findings of this study and discuss the youth sector's responses and the competences needed for advancing youth mental health in Europe.

The Youth Wiki Network analysis report on [“The impact of the COVID-19 pandemic on the mental health of young people: policy responses in European countries”](#) (2022) analysed how European countries had addressed the challenges posed by the pandemic to the mental and emotional well-being of young people. In general, the report concludes that European countries have been proactive in establishing measures to support young people during the pandemic. Findings also point to some fields of action where further measures could be taken, such as youth work and sport.

Moreover, the study is published at a time when different European and international institutions are engaging in important steps to develop policies and concrete initiatives that aim to enhance young people's mental health and well-being. While this topic has been on the public agenda for almost a decade, special importance has been given to youth well-being following the Covid-19 crisis and new research findings that indicate certain challenges related to the increased adoption of new technologies among children and young people.

Commitments to advance this priority, including in relation to emergent technologies, have been noticed at different levels. For example, the [2025 Polish Presidency of the Council of the EU](#), during the informal meeting of health ministers (March 2025), discussed the mental health of children and young people in the age of technology and social media, including by calling for action to incorporate digital factors into mental health policies at the EU level. In this context, ministers have identified addiction to social media and online games, cyberbullying, exposure to harmful content, increased anxiety and depression, intensive use of screens, lack of sleep and physical inactivity as the most important problems. They stressed the need to exchange best practices at national level, including collaboration between the fields of health, education, social services and digitalisation, strengthening the resilience of young people, banning smartphones from schools, the availability of mental health services, promoting the positive aspects of digitalisation for mental health (online therapy); encouraging a greater level of physical activity; and raising parents' and teachers' awareness of the dangers of excessive use of social media and games. Furthermore, research into the impact of digital transformation and social media, accountability of social media providers and the adoption of common standards and guidelines are all needed. In order to ensure the mental well-being of young people, member states are expected to engage in experience sharing of mental health policies for children and young people via a shared collection of best practices – [EU Best Practice Portal](#) on public health. The EU Best Practice Portal on public health serves as a central resource for knowledge sharing across Europe. It provides practical, evidence-based practices that are publicly available for inspiration, adaptation and transfer. These initiatives support policy makers and stakeholders in identifying effective approaches that can be implemented in different national and local contexts. Following the adoption of the Communication on a comprehensive approach to mental health, the Commission invited member states and stakeholders to submit best and promising practices in the field of mental health. As a result, 29 new initiatives on mental health were identified and added to the portal.

A key milestone in these efforts are the [Council conclusions](#), which the Polish Presidency adopted in June 2025 during the formal Employment, Social Policy, Health and Consumer Affairs Council (EPSCO).

Another example is the informal EU Youth Dialogue breakfast meeting on the topic: “Connected but at what cost? Youth, social media and the future of online well-being”, organised by the Polish Presidency ahead of the Education, Youth, Culture and Sport (EYCS) Council (12 May 2025). Participants had stressed the importance of formulating balanced policies to safeguard young people’s well-being while maintaining digital freedom. Rising depression, anxiety and isolation had emerged as concerns linked to increased social media use. Creating a safe digital environment would require collaboration among governments, tech companies, civil society and youth organisations, with essential participation from young people in developing future digital strategies. There was a need for a clear definition of cyberbullying. Governments should ensure that appropriate regulations are in place and tech companies are required to ensure safe online environments. As the digital world also offers immense opportunities for young people, strong education would be needed to reap the benefits. The importance of addressing the issue of mental health for all, and especially for young people, has been acknowledged at the highest political levels.

Following President von der Leyen’s announcement in her 2022 State of the European Union speech, the Commission adopted in 2023 a communication on a comprehensive approach to mental health. Young people’s vision and views were reflected in the making of this initiative. During the Spanish Presidency (23 November 2023) ministers of youth approved Council conclusions on a comprehensive approach to the mental health of young people in the European Union, underlining the importance of supporting young people’s mental health, and ending the stigmatisation of mental health issues. In addition, the informal EU Youth Dialogue breakfast, ahead of the EYCS Council was dedicated to mental health. Another set of Council conclusions on inclusive societies for young people were adopted by ministers of youth during the Belgian Presidency of the Council of the EU (12 May 2024). The conclusions include the outcomes of the EU Youth Conference (held in Ghent, 2-5 March 2025), where the 300 participants (young people, youth organisations and ministerial delegates) developed concrete implementable policy measures for more inclusive societies. More specially, the participants developed six recommendations and 36 implementing measures, including a recommendation on health and mental well-being, in order to ensure young people’s access to affordable, youth-friendly and personalised quality healthcare and mental health support systems. It also included the creation of safe and open environments for young people to speak freely and learn about health and mental well-being.

Within the [Council of Europe](#), specific interest in the topic has been shown by different bodies that work to ensure a human rights approach to health. Noteworthy examples include the work of the Steering Committee for Human Rights in the fields of biomedicine and health (CDBIO), which is currently drafting a recommendation on respect for autonomy in mental healthcare, and which in 2023 organised a [Pilot youth forum on bioethics](#). This addressed, among other topics, the impact of artificial

intelligence (AI) systems on the mental health of young people and professionals working in healthcare, and the recently adopted Parliamentary Assembly Resolution 2521 “Mental health and mental well-being of children and young adults” (2023).

## Methodology and framework of the study

This study aims to explore the existing state of play in relation to young people’s mental health and well-being. The overall question leading the study was: “What are the main triggers that aggravate young people’s mental health and well-being, and what are the current responses?” In order to identify the responses to these questions, three main sub-questions were used.

- ▶ What are the relevant policies and legal frameworks at European and national level that specifically address young people’s mental health and well-being?
- ▶ What are the main practices and services available to young people, and who provides them?
- ▶ What are the capacities of professionals designing and delivering youth mental health and well-being services?

Considering the research questions above, the study aims to offer a general overview of European and national policies in the field, as well as identify good practices for services and capacity building of professionals. Last but not least, it aims to analyse potential risks and opportunities and provide actionable recommendations for stakeholders interested in advancing this priority in the future.

This research combines desk research and data obtained through an online survey. The researchers conducted a desk review of mainly secondary sources – literature review, legislation, action plans, governmental programmes, resolutions and decisions.

The online survey gathered data from the correspondents of the European Knowledge Centre for Youth Policy (EKCYP), members of the Pool of European Youth Researchers (PEYR) and other key stakeholders from the European youth sector. The online survey, included in Appendix I, was open from 1 July to 15 August 2024. In total, 360 responses were collected. After refining the data for relevance, as not all responses were complete, 67 responses from 24 countries – Austria, Belgium, Croatia, Cyprus, Czech Republic, France, Germany, Hungary, Latvia, Lithuania, Luxembourg, Malta, the Netherlands, North Macedonia, Norway, Poland, Portugal, Romania, Serbia, Slovakia, Slovenia, Spain, Switzerland and Wales – were included in the analysis.<sup>2</sup>

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2. As the study compiles a variety of national policies and strategies on mental health and well-being, as well as tools and services for young people and youth workers available in the countries listed above, the links to the documents, web pages or tools listed in this publication are largely available only in national languages.

# Factors contributing to young people's mental health and well-being

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**T**he terms mental health and well-being are often used interchangeably, but they are not necessarily synonyms. According to the World Health Organization (WHO 2013, 2022a) and the Centers for Disease Control and Prevention (U.S. CDC 2024), well-being is broader than mental health. It includes various aspects of life, such as physical, social and financial well-being. In contrast, mental health is a psychological and emotional state that allows individuals to realise their own abilities, cope with stress, work productively and contribute to the community. Mental health is a crucial part of overall well-being; in fact, it is considered a human right according to the World Health Organization (WHO 2022a). An important issue among young people is the fact that mental health is crucial for personal development, and exposure to unfavourable circumstances increases the risk of developing mental health difficulties. If these risks occur during developmentally sensitive periods, the effects can be detrimental.

In this context, it is important to study the different kinds of individual and societal factors that contribute to young people's mental health and well-being. These factors include socio-economic factors and the persistent uncertainty surrounding young people's insecure work life and financial stability, global conflicts and crisis situations such as the Covid-19 pandemic, ongoing geopolitical conflicts and climate change, as well as digital transformation and the use of social media.

## **Socio-economic factors, job precarity and housing**

One of the factors that influences young people's mental health and well-being is their socio-economic status. For example, boys from lower socio-economic status families report lower life satisfaction and worse mental well-being compared to boys from higher socio-economic status families (WHO 2020). Furthermore, rising economic uncertainty poses new financial challenges to young people's financial well-being as they make their transition towards adulthood. While financial instability is not new in young adulthood, the situation is worsening for the current generation, given the ongoing trends related to global economic instability and the widening wealth gap in society. For example, since the Covid-19 pandemic, young Europeans have faced job loss and difficulties securing employment, due to limited work experience and often temporary work contracts in sectors highly impacted by closures and restrictions (such as service, retail and hospitality sectors) (Eurofound 2022, 2024; OECD 2021).

Overall, young people are often in precarious employment with irregular and insufficient income. Furthermore, in a highly competitive society, young people experience excessive amounts of stress and even burnout due to educational pressures and career planning (Salmela-Aro et al. 2021). Young people who are not in education, employment or training (NEET) are especially vulnerable as their life satisfaction is determined by their sense of lack of control over life and support from social relationships, as witnessed in a recent study of Southern European countries by Mazzocchi and colleagues (2024).

Another socio-economic factor influencing young people's well-being is difficulty in attaining independent housing and the transition to financial independence, thereby affecting overall positive youth development and causing risk of social exclusion. Since the 2008 financial crisis, the cost of living and housing has increased, resulting in young people experiencing housing insecurity, financial strain, or a lack of a suitable place to live. Therefore, they often remain living with their parents. Throughout the EU, the age at which at least 50% of people live outside their parental home has increased from 26 to 28 years from 2007 to 2019. Yet the differences between countries across the EU are profound, with Spain, Croatia, Italy, Cyprus, Belgium, Greece and Ireland facing the largest increase in young adults aged between 25 and 34 living at home between 2010 and 2019 (Eurofound 2023).

## Global health and security crises

The Covid-19 pandemic disrupted the lives of young people due to social, political and psychological stressors (ERYICA 2023), with the restrictions having the greatest effect on their mental well-being (Eurofound 2022). The studies from the Youth Partnership on the short- and long-term effects of the pandemic on young people's mental health (Mastrotheodoros 2021; Mastrotheodoros and Ranta 2022) and more recent longitudinal and cross-cultural evidence supports the findings that the Covid-19 pandemic exacerbated the mental health problems of youth. Specifically, using data from the international [Health Behaviour in School-aged Children \(HBSC\)](#) study, Cosma et al. (2023) found that, across 35 countries, the increase in mental health symptoms between 2018 and 2022 was markedly more significant than the linear increase documented from 2010 to 2018. Therefore, the Covid-19 pandemic has been seen as a major driving force of this increase.

These stressors influence the way young people shape their hopes and fears of the future (Eurofound 2022, 2024; OECD 2021) and are also associated with an increased risk for developing psychiatric disorders (Schoeps et al. 2023), depression, and even suicide (OECD and European Union 2022). Some European countries (for example Belgium, Estonia, France, Sweden and Norway) reported that depressive symptoms of young people aged 18 to 29 had more than doubled compared to before the pandemic (ibid.). Many young people with pre-existing and severe mental health issues reported that their mental health and well-being was even worse during the pandemic. While the situation has improved since then (Eurofound 2022, 2024), in some countries the prevalence of symptoms of anxiety and depression, for example, has not declined. Furthermore, an ongoing mental health crisis and new uncertainty have been further deepened by other societal circumstances and crisis situations,

such as the Russian war on Ukraine since 2022, overall world insecurity, record-high inflation and sharp rises in living costs (Eurofound 2022). Precariousness of the youth labour market has also been suggested as an explanation of the rising support for right-wing populist parties among young people (Zagórski et al. 2021).

## Climate change

Climate change is one of the key concerns of young people, and is a cause of a range of different emotions, such as worry, stress, anger, anxiety, and grief (Pihkala 2024). Research shows that the climate crisis makes young people particularly vulnerable to climate anxiety and distress (Hickman et al. 2021; Whitmarsh et al. 2022). This vulnerability may have long-lasting negative implications on young people's mental health, and climate change concerns might be one of the underlying causes of the recent declines in youth mental health (Keyes and Platt 2024).

In fact, young people across several countries report being worried and/or anxious about climate change, which is related to how they feel about the future, and to their mental health. Specifically, across 10 countries, 59% of youth reported being very or extremely worried about climate change, 75% thought that the future is frightening, and 45% reported that their feelings about climate change affect their daily lives (Hickman et al. 2021). A multi-country study mapping mental health symptoms related to climate change across 25 countries finds that negative climate-related emotions were positively associated with insomnia symptoms and negatively associated with self-reported mental health (Ogunbode et al. 2023). Review and meta-analytic evidence support the notion that climate change anxiety shows moderate negative associations with well-being (Gago et al. 2024) and positive associations with mental health problems, such as psychological distress, depression and anxiety (Cosh et al. 2024). Of note, studies also show the motivational effects of climate anxiety, as higher climate anxiety tends to be associated with more pro-environmental behaviour or climate-related action (Becht et al. 2024; Whitmarsh et al. 2022).

## Digital transformation and social media

Young people today navigate a context where the use of digital technologies is increasingly an integral part of everyday life. Use of these technologies might promote communication with friends and peers worldwide as well as promote learning, but it can also distract young people from other tasks, and lead to addiction-like behaviours. These developments have spurred research on the effects of digital technologies, in general, and social media use, particularly, on youth mental health and well-being (WHO 2020). The potential impact of smartphone and social media use on youth mental health and well-being has been a rather heated debate, with far-reaching policy implications.

One side of this debate suggests that smartphone use has “destroyed a generation” (Twenge 2017), claiming that it negatively impacts youth mental health. It warns that a youth mental health crisis is consequently underway. Some studies have found that social media use is associated with higher depressive symptoms because of higher body dissatisfaction, sleep problems and online harassment

which are often experienced in relation to digital media (Kelly et al. 2018). These links were especially apparent for youth with intense use, such as more than five hours of daily use. Also, these links have often been found to be stronger for girls, compared to boys (UNESCO 2024). Similarly, correlational, cross-sectional evidence shows that higher digital media use is related to higher depressive symptoms and suicide attempts in American youth (Twenge et al. 2018). Based on such evidence of the effects on youth well-being, some countries have applied strict and horizontal policies, such as the recent legislation in Australia banning the use of social media and smartphones for people younger than 16 years (Ritchey 2024). Several countries in Europe have banned smartphone use in schools, including Italy, France and the Netherlands (Chadwick 2024).

However, recent studies argue that social media use intensity is not the same as social media addiction-like problems. Intensity refers to how often during the day young people use social media to contact others. Whereas addiction-like problems refer to symptoms experienced (almost) daily, like being preoccupied with what happens online, not being able to control the time spent there, lying about how much time they spend, engaging in conflicts due to online interactions, and so on. Much of the evidence supporting the above-mentioned side of the debate is actually referring to addiction-like problems, not mere digital media use (Boer et al. 2020, 2021). A multi-country study (Boer et al. 2020) indicates that whereas intensity of use is linked with higher social support from friends, problematic use is linked with worse mental health. In addition, whether intensity is good or bad for youth mental health depends on the overall level of social media use in a country. The study shows that intensity of social media use was linked to lower well-being only in countries with overall low levels of intensity, while in countries with higher well-being, it was connected with overall higher levels of intensity. Furthermore, a longitudinal study found that only problematic use, not intense use, to be associated prospectively with decreased mental health during adolescence (Boer et al. 2021).

The other side of this debate argues that existing empirical data might be somewhat premature, and warns of a more cautious approach to policy making with regard to the use of smartphones and social media by youth. Meta-analytic evidence suggests that negative links between social media use and well-being indicators such as life satisfaction or depression are weak, if present at all (Appel et al. 2020). Studies that use longitudinal designs show inconsistent evidence, suggesting that the use of the internet and social media might be unrelated, weakly related or even related in the opposite direction, that is, that social media use is a consequence of pre-existing mental health problems (for example Orben et al. 2022). The latter implies that using social media might be a coping mechanism of youth struggling with low well-being and/or mental health. A study examining whether social media activity by youth affects brain functional connectivity or brain maturation failed to find evidence for such negative effects (Miller et al. 2023).

Large-scale, multi-country evidence also fails to support the idea that internet use and mobile-broadband adoption have devastating effects on well-being. A recent study of almost 200 countries examined whether the higher adoption of internet and mobile-broadband technologies over the past two decades contributes meaningfully to changes in overall well-being (Vuorre and Przybylski, 2024). Even though



there are statistically significant global increases in both negative and positive experiences (indices of well-being), these trends are weak and of little importance. Furthermore, despite some evidence that youth might be more prone to the negative effects of social media (Orben et al. 2022) or, more generally, internet-based technologies compared to older people, these negative effects are rather small, without sufficient significance.

To conclude, despite some empirical studies, publications or various non-academic articles suggesting a devastating effect of digital media exposure on youth mental health, empirical evidence paints a more nuanced picture. Overall, the effects seem small or non-existent, and do not corroborate that the use of social media is causing a disastrous, unprecedented or imminent crisis of youth mental health. Empirical results show large variability depending on research design, measures of digital media and well-being, and also across countries. Future studies are needed to better explain the underlying processes and help design targeted and nuanced policies. The current state of empirical evidence indicates a cautious, yet not panic-like, approach to related policy making.





# Review of relevant policy frameworks and strategies on young people's mental health and well-being

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**S**trong policy frameworks are key to promoting youth mental health. Several factors identified as contributing to the mental health of adolescents, which are described in the previous chapter, guide the framework and strategy implementation in the field. In the European Union, it has been estimated that the annual cost of declining mental health in children and young people is €50 billion (UNICEF 2021). Countries and regions should develop policies and strategies that focus on improving the well-being of this and future generations, drawing upon the scientific evidence collected on the physical, mental and social factors that may pose a risk to mental health (WHO 2022b). Currently, there are several strategies and policies that focus on different aspects of youth development, and directly or indirectly also tap into young people's mental health and well-being. This chapter provides an overview of different policy initiatives and strategies at a European level that focus on young people's mental health and well-being, followed by selected examples of national youth policy frameworks and strategies.

## European Union

While the effects of the Covid-19 pandemic on youth mental health and social and emotional adjustment have varied among young people at the EU level, mental health has been placed as a key priority area for policy in the youth sector.

### Youth and children specific policy frameworks and strategies

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The EU Youth Strategy is the youth policy co-operation framework for 2019-2027 at the EU level. It is implemented by a range of stakeholders, including the European Commission, national governments, local authorities, youth organisations and other partners with the aim to encourage social and civic engagement and to ensure that all young people can participate in society. The EU youth programmes Erasmus+ and the European Solidarity Corps support the objectives of the strategy. The strategy focuses on three core areas of action: Engage, Connect and Empower, and includes 11 European Youth Goals, developed by young people themselves through the EU Youth Dialogue process, and covers key aspects in young people's lives, including mental health and well-being.

The European Commission continues to promote actions aimed at improving the mental health of young people in connection with the EU Youth Strategy (2021-2027), in particular European Youth Goal 5 on “Achieving better mental well-being and reducing the stigma of mental health issues, thus promoting social inclusion of all young people”, and through the EU youth programmes such as Erasmus+ and the European Solidarity Corps.

One of the key policy areas of the [2022 European Year of Youth](#) was to boost young people’s personal, social and professional development, including attention to mental health. A number of health-related initiatives were launched during the European Year of Youth such as the [Pathways to School Success](#) and the Expert Group for supporting well-being at school. School well-being has been noted in the European Council (2022) Recommendation on Pathways to School Success and educational outcomes. Integrated and comprehensive strategies on prevention, intervention and compensation measures have been highlighted with a proposal for a new policy framework on a systematic approach for school success, including well-being and mental health at all educational levels. Guidelines on well-being in schools have been prepared by the Commission Expert Group on supportive learning environments: [Supporting wellbeing at school: new guidelines for policymakers and educators | European Education Area \(europa.eu\)](#). Building on the achievements of the European Year of Youth, the 2024 Communication on the legacy of the year deepens the youth dimension of EU policy areas including in the area of health and well-being.

The European Youth Guarantee is an economic and employment-related policy ensuring that all young people under 30 years of age have access to education, employment or apprenticeship within four months of becoming unemployed or leaving education. Eurofound’s new research “Becoming adults: young people in a post-pandemic world” (2024) provides a preliminary review of how the Youth Guarantee, which was reinforced in 2020, is closely related to the policy areas of family, housing and childcare, and to measures fighting gender and intersectional discrimination.

The [European Child Guarantee \(ECG\)](#) framework is the first policy initiative addressing childhood challenges, such as social exclusion (European Commission 2024b). The ECG aims to prevent and combat social exclusion by guaranteeing effective access for children in need to a set of key services, including free early childhood education and care, healthy nutrition and adequate housing. The European Child Guarantee, as well as the European Strategy on the Rights of the Child, also address issues related to child poverty and calls for ensuring that children in poverty have access to “early detection schemes and treatment of diseases and development problems, including those related to mental health” (European Commission 2024c). The Guarantee also relates to the mental health of youth, as it also monitors the proportion of children who report feeling low more often than once a week by gender and family affluence.

## **Mental health specific policy frameworks and strategies**

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**European Health Union.** The European Commission’s (2023, 2024d) launched a comprehensive approach to mental health under the [European Health Union](#) with supportive efforts for member states. It includes 20 flagship initiatives and significant

funding of €1.23 billion from different financial instruments for multi-sectoral, prevention-oriented and multi-stakeholder initiatives in the prevention and protection of young people's mental health during their developmentally most vulnerable years. The European Commission's Communication: a comprehensive approach to mental health specifically calls member states to collaborate on policies related to mental health and to identify children as a priority in national mental health strategies (European Commission 2023). This approach is a first and essential step, building on existing policies related to, among other topics, physical health, employment, education, digitalisation and the climate, and an overall principle of "putting people and their mental health first". Through the 20 flagship initiatives, member states are supported to adopt an approach that promotes mental health across policies and to develop and implement initiatives that promote good mental health, prevent mental health problems, improve access to high-quality mental healthcare and support young people to recover and reintegrate into society. Four key initiatives focus specifically on young people: A dedicated mental health network, innovative tools promoting healthy lifestyles and resilience, enhanced protections for children using digital services through the upcoming [Digital Networks Act](#) (European Commission 2024e) and the [Better Internet for Kids Strategy](#) (BIK+) (European Commission 2024f), and a [Prevention Toolkit](#) developed by UNICEF together with children and adolescents (2025).

**European Parliament resolution on mental health in the digital world of work.** Of relevance to working-aged young people is the European Parliament (2022) resolution of 5 July 2022 on mental health in the digital world of work. It calls on EU institutions and member states to recognise the high levels of work-related mental health problems across the EU and provide a strong commitment to actions that regulate digital work and thus prevent mental health problems, protect mental health and a healthy work-life balance, and reinforce social protection rights in the workplace. The resolution asks the EU and member states to co-operate with employers and workers' representatives in implementing the previously mentioned mental health approach, along with national action plans. The Parliament earlier recognised mental health as a fundamental human right and called for an EU action plan on mental health, aiming to set a policy standard for mental health across the EU.

## Council of Europe

In the past decades, the Council of Europe (2020, 2024) has aimed to increase the protection and rights of people with mental health issues as well as to improve mental healthcare.

**Resolution "Mental health and mental well-being of children and young adults".** The Parliamentary Assembly of the Council of Europe (2023) issued Resolution 2521 "Mental health and mental well-being of children and young adults" which emphasises that member states should foster an environment where young people feel valued and understood, and in which they can effect change. Inviting young people to parliamentary hearings will help to empower them and support their mental well-being. The Parliamentary Assembly believes that states should advance young

people's right to mental health with timely and appropriate mental healthcare and treatment, with a holistic approach to overall well-being.

**Youth Sector Strategy 2030.** As part of a long-term vision to support young people and the wider youth sector, the Council of Europe's [Youth Sector Strategy 2030](#) acknowledges the challenges young people face to their well-being, notably mental ill-health due to anxiety and uncertainties, which create increasing policy concerns.

## Other international organisations

In addition to the work done with the EU and Council of Europe, a number of international organisations, specifically United Nations bodies as well as other civil society initiatives, have advanced mental health and well-being programmes considerably since 2020. This section identifies some of them in order to illustrate the relevance of the topic discussed across the globe.

### World Health Organization (WHO)

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The [WHO European Framework for Action on Mental Health](#) (EFAMH, 2021-2025) was set as a response to mental health challenges due to the negative impact of the pandemic on socio-emotional functioning and mental health and well-being. The implementation and monitoring of this programme is powered by the Pan-European Mental Health Coalition, a flagship initiative of the European Programme of Work 2020-2025. The priority of this framework is to provide intensified efforts to promote mental well-being and to build resilience in the mental health and well-being of children, adolescents (aged 10 to 19) and youth (aged 15 to 24) after the pandemic (WHO 2022b).

The [WHO European Strategy for Child and Adolescent Health in the European Region](#) is largely based on the results of the international Health Behaviour in School-aged Children study of young people aged 11, 13 and 15 (WHO 2020). The European Strategy for Child and Adolescent Health was adopted in 2005, and a new child and adolescent health and well-being strategy in the WHO European region is being developed which started in 2019 (Weber et al. 2024). The strategies incorporate the conclusions that are being drawn from the effect of the Covid-19 pandemic on child and adolescent health. The renewed strategy is being developed in consultation with key stakeholders as well as children and adolescents themselves. Key identified problems include increasing youth obesity and mental health difficulties. For example, suicide is recognised as one of the most common causes of death for adolescents in the EU. Several actions in the renewed strategy include, for example, the development of a child health handbook and a related app, which are targeted at health professionals working with children and adolescents.

### Eurochild

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Eurochild (2024) is the largest network of organisations focusing on work with and for children. It provides policy recommendations on how to address the needs and challenges resulting from the impact and lived experiences of poverty, social exclusion and discrimination on children and their families across Europe. Based on

the information provided by Eurochild members on children's mental health, this sub-report provides practical, rights-based recommendations for addressing the needs and challenges faced by children and their families across European countries.

## National policy frameworks and strategies

This section identifies general mental health policies and strategies in European countries, as well as specific local focus themes within these policies, such as strategies or plans centred explicitly on topics related to social media use, climate change, stress, and so on. The practices selected have been identified through the online survey specifically designed for this study. Based on analysed data, it can be observed that various initiatives have emerged at the national level. However, there is not enough evidence to assess the extent to which such targeted strategies and policies exist in all European countries. Moreover, based on the examples identified, it seems that most of the contributing factors identified in the previous chapter are not reflected in most national initiatives. To maintain focus on youth-specific national policy frameworks and strategies, the analysis in this chapter has excluded general national level policies on mental health and well-being unless they have a specific section on young people. Besides, for the data gathered through this survey, it is important to mention that the information on European countries' youth policies, including initiatives on mental health and well-being, is also available through the Youth Wiki online platform. The main objective of the Youth Wiki is to support evidence-based European co-operation in the youth field. It does so by providing information on national policies in support of young people – in a user-friendly and continuously updated way. The overall purpose is to help the European Commission and member states in their decision making, by providing information on reforms and initiatives. It allows the exchange of information and innovative approaches and can substantiate peer learning activities. Currently, [34 countries](#) participate in the Youth Wiki.

### Examples of good practices of national policies and strategies on well-being and mental health of young people

**Greece** – [Child and Adolescent Mental Health Initiative](#) (CAMHI), targeted at children and adolescents. This initiative, funded by the Stavros Niarchos Foundation (SNF), is a five-year plan, launched in 2021, with the aim of promoting young people's mental health in Greece, as well as strengthening the infrastructure for the improvement of youth mental health in the country. The programme is developed and implemented by a country-wide network of public sector agencies and services, in collaboration with the Child Mind Institute (New York City). Despite being supported by the Greek Ministry of Health and the Greek Ministry of Education and Religious Affairs, the programme is fully privately funded by the SNF. However, at the end of its timeline the plan is that it will be taken over by the state. In a sense, this initiative aims to set the stage for a longer-term policy on youth mental health. The CAMHI includes several aspects and actions, such as training plans for professionals working with youth, the Youth Engagement Scheme (YES) aimed at increasing young people's voice for concerns about their mental health, mapping of all youth-focused mental health services across the country, and research to better understand young people's mental health in Greece.

**North Macedonia** – [National strategy on mental health for youth 2024-2026](#) (age group not specified). The goal of this strategy is to contribute to the improvement of the mental health of young people. The strategy is guided by the 2030 Agenda and the general principles of the UN Sustainable Development Goals. The strategy points to the need for a two-way approach to include young people in relevant policies, programmes and sectors at the national and local level, as well as focused action to strengthen their mental health. It also refers to developing a system of co-operation between the educational, social and health sectors, as well as promoting the integration between mental health services and other relevant sectors, such as education, social services and employment support. During the implementation of this strategy, it is recommended that a national co-ordinating body of all the providers of activities and projects is established, which will monitor the implementation of the strategy. The institution responsible is the Ministry of Health and Ministry of Social Policy, Demographics and Youth.

**Norway** – [National plan for children and young people's mental health \(2019-2024\)](#), targeting children and young people aged 0 to 25 years old. The national plan covers measures to ensure that more children and young people experience good mental health and a good quality of life, and that those who need appropriate and effective treatment also receive it. The plan has been developed in collaboration between the Ministry of Health and Care Services, the Ministry of Children and Families, the Ministry of Education and Research, the Ministry of Labour and Social Affairs, the Ministry of Justice and Public Security, the Ministry of Culture and Equality, the Ministry of Local Government and Regional Development and the Ministry of Agriculture and Food.

**Serbia** – [National Youth Strategy for the period 2023-2030](#) (age group not specified). This strategy targets mental health of young people in its fifth strategic goal, “Created conditions for a healthy and safe environment and social well-being of young people”, particularly through Measure 5.1: “Support to programmes that contribute to the development of healthy lifestyles and mental health of young people.” This strategic measure systematically addresses youth mental health by promoting healthy lifestyles, preventive actions and creating awareness about health risks. It includes initiatives like innovative risk prevention programmes and targeted efforts against substance use and mental health stigmatisation, as well as mental health support for vulnerable groups, particularly young refugees, and encourages extracurricular activities to reduce alcohol use among youth.

**The Netherlands** – [Mental health of us all](#). This programme is an overall strategy for mental health in the Netherlands, consisting of five pillars that aim at preventing, identifying and coping with mental health difficulties in the general population. The five pillars include: 1. Mentally healthy in the society (at large), 2. Mentally healthy at the local, neighbourhood level, 3. Mentally healthy in education, 4. Mentally healthy at the workplace, and 5. Mentally healthy online. For example, in the first pillar regarding the society at large, among other actions, the programme includes a “Mental Meetup”. The Mental Meetup” is a day during which activities around mental health are organised across the country, with the goal of raising awareness about stress, work pressure and other conditions that might affect mental health. In the second pillar, another action is setting up online meeting groups whereby youth 13 years and older, especially those suffering from social isolation and loneliness, can meet

other peers and have social interactions. Despite the “Mental Health of us all” being a general mental health programme, it does tap into the specific topic of being mentally healthy online, which includes actions such as increasing awareness about the risks of the online world, as well as tools for helping to achieve a better balance, related to issues such as gaming and online gambling. This national programme is an interdisciplinary and inter-departmental programme approaching mental health in a holistic manner. The programme has already been implemented and its main actions have been at least partially applied in a successful manner, as seen in the latest programme report ([available in Dutch](#)).





# Services and tools on young people's mental health and well-being

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**T**his chapter offers an overview of the mental health services provided by various institutions specifically to young people. The data analysed here is based exclusively on the information gathered via the online survey. For this purpose, 46 services have been identified as available to cater for young people's mental health and well-being. The analysis excludes national medical hospitals and university-provided psychotherapy services to maintain focus on youth-specific services provided by national governments, local governments or non-governmental organisations (NGOs), even though it acknowledges the valuable mental health support these units offer to young people.

The analysed services cover 18 countries – Austria, Belgium, Germany, Croatia, Czech Republic, Cyprus, France, Latvia, Lithuania, Luxembourg, Malta, the Netherlands, North Macedonia, Norway, Poland, Serbia, Slovenia and Spain.

## Understanding the diversity of services offered

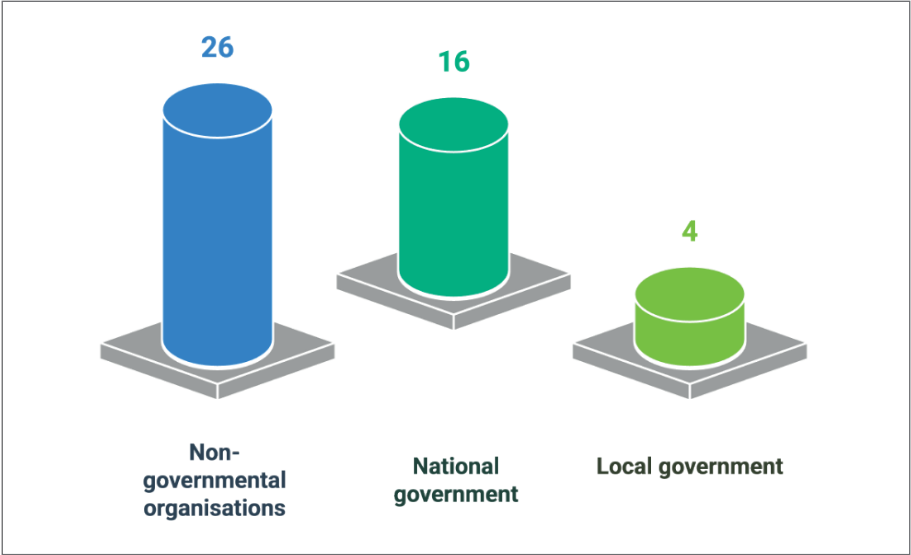
This chapter presents the descriptive data on each classification and identifies various examples of mental health services provided by different governmental and non-governmental stakeholders. Data is analysed by three main criteria – type of provider (local and national governments, NGOs), age (different age ranges for which services are designed and delivered) and type of service (online, offline and hybrid). It offers an overview on the major approaches while also emphasising the lack of consistency across countries and stakeholders.

## Mental health services by provider

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The Council of Europe report on [Mental health and well-being of children and young adults \(2023\)](#) recognises states as responsible institutions for: providing mental health systems, training professionals, raising awareness within communities, integrating mental health approaches in community services and schools, and emphasising the disadvantages, and collaborating with necessary organisations and stakeholders. To determine the main providers of mental health services in this study, 46 services were categorised into three groups to identify the contributing institutions to youth mental health as NGOs, national governments and local governments. As indicated in Figure 1, NGOs are the primary providers for 26 of these services, while national governments are responsible for 16 and local governments mainly manage four services. Additionally, many mental health services are delivered through collaborations between national governments and NGOs, even though the primary service providers differ.

**Figure 1. Services by type of provider**

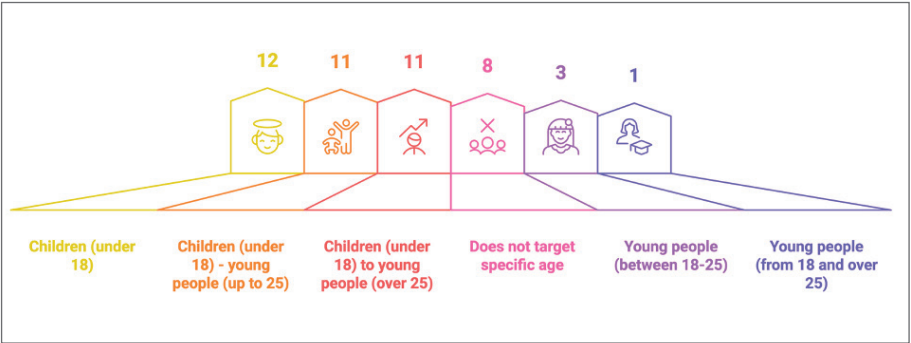


**Mental health services by age**

This section provides an overview of the services identified by grouping them according to the age of their target groups. The analysis showcases the diversity of approaches in designing and delivering services, with some having a distinct focus on children (under 18 years old) while others have a mixed approach (both children, adolescents and young adults), or even lack any specific target group (are offered to everyone).

In this context, six categories have been distinguished: services targeting children under age 18 (12 out of 46), services targeting children under 18 and over 25 (11 out of 46), services targeting children under 18 and young people over 25 (11 out of 46), services not having a specific target age group (8 out of 46), services targeting young people between the ages of 18 and 25 (3 out of 46) and services targeting young people from 18 and over 25 (1 out of 46).

**Figure 2. Services by age group**



### Mental health services by type

When looking at the types of mental health services, three primary formats have been identified: online, offline (on premises), and hybrid (online and offline combined). Online services use only digital tools, including hotlines, chat services, e-mailing, applications, digital training materials and digital consulting services. On-premises services involve physical places allocated to provide mental health services with limited digital material, but not providing consulting services on online platforms. Hybrid services combine both approaches by providing services in physical premises and also offer consulting services and rich digital material on digital tools.

Online services (13 out of the 46) offer access to tools like mobile applications, telephone hotlines, chat services, e-mail services, and online educational and informative resources, as well as online consulting and psychotherapy support. On-premises services (12 out of 46) are traditionally provided within schools, community centres and clinics. They are often used for more intensive support needs, including counselling, assessment, skills training, awareness raising and advocacy actions. Hybrid services (21 out of 46) combine digital accessibility with in-person components, offering flexibility that meets diverse youth needs and accounts for almost half of the reported mental health services. They enable services to reach young people across diverse geographic and social settings while preserving the benefits of in-person support. Considering a recent finding that 97% of young people (16-29 age) in the EU have daily access to the internet compared to 86% of the general population (Eurostat 2024), the provision of hybrid services becomes an important and effective tool to reach young people.

**Figure 3. Mental health services by type**

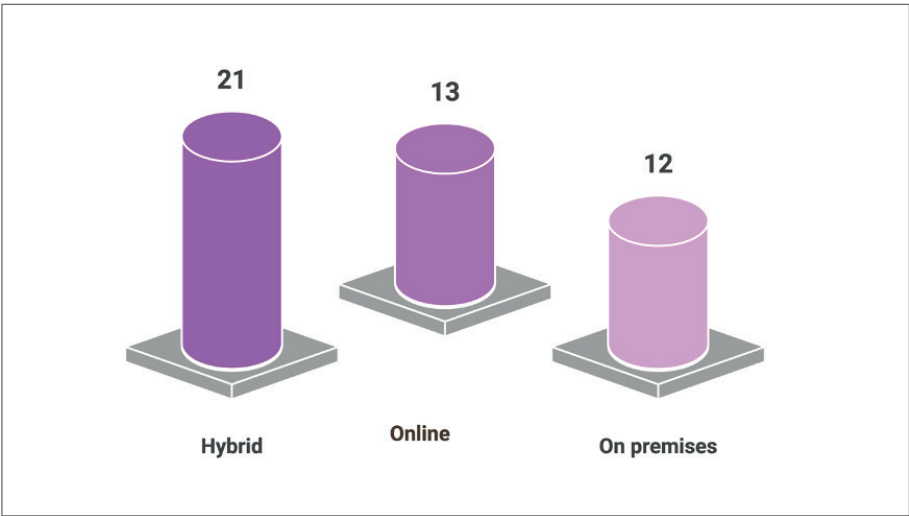
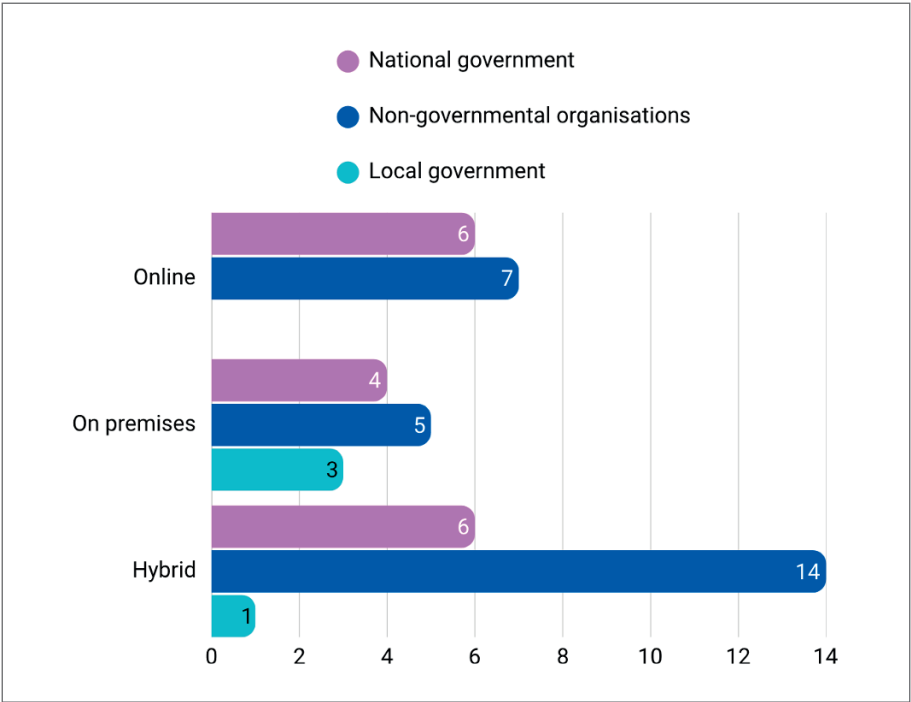


Figure 4 below reflects the service by type and responsible institution. NGOs are highly dominant in hybrid services, while local governments provide mostly in-person/on-premises service.

**Figure 4. Service by type and by responsible institution**



**Examples of services**

The aim of this section is to highlight good practices identified through the online survey and provide inspiration to those interested in developing similar initiatives.

**Online services**

Online services encompass a range of digital platforms and applications designed to provide mental healthcare. These services include counselling, therapy and psychiatric support delivered through e-mails, chats, videoconferences, interactive tools and applications. The aim of these tools ranges from awareness raising to educational resources and training materials.

The concept of telepsychiatry began in the 1950s with the use of videoconferencing for psychiatric consultations and evolved with the developments in technology and the internet. The use of online tools in mental health services did not increase notably until the Covid-19 pandemic. The pandemic had a profound impact on the demand for digital support for mental health conditions. Online mental health services offer some benefits. They provide available mental health services to people in remote or underserved areas who might not have easy access to traditional in-person services. Users can schedule sessions at times that fit their schedules, and disadvantaged groups can benefit from free-of-charge services.

**Norway** – [National online health services in Norway](#) are offered by the Directorate of Health to increase awareness and accessibility of health services via digital tools. The platform provides health tools including for cancer, kidney disease for the general population, a nutrition planner, sexual diseases, and well-being for individuals over the age of 13. The mental health tools aim to reduce and prevent mental health conditions and provide accessible tools for young people on mental health information. For this purpose, 17 digital tools are offered to address specific conditions such as depression, psychosis, sleep problems and social anxiety. These tools include self-help material, videos, self-assessment surveys, mental health information provided by experts, online consultations, and institutions offering additional support. Some examples of these services are given below.

- ▶ [Self-Help \(Selvhjelpen\)](#) is one of the latest launched digital applications aimed at young people aged 13-20. It provides a self-assessment tool to detect possible mental health conditions and information related to the individual's condition which may be helpful to them. The tool assesses the situation and the individual's thoughts on sleep, anxiety, life satisfaction, stress, depression and subjective well-being. Based on the assessment, the tool identifies the existence and severity of the disturbance and offers specific online courses to guide individuals on the self-help process.
- ▶ [Young Spotlight \(UngSpotlight\)](#) is a specific application aimed at young people aged 13-18 who are afraid to speak in front of the class, and which affects their activity in the school environment. It includes self-assessment on anxiety in public speaking and offers six-week online classes to provide information on self-help tools and strategies to practise.
- ▶ [Young Face It \(Ung Face It\)](#) is a self-help tool for young people with a condition or injury that affects their appearance. The tool aims at young people aged 12-17 but is open to any audience. The tool provides chapters dedicated to steps to better understand the level of emotional suffering and the impact of emotions on the individual. The application uses several methods to intervene in the emotional load by providing tips to reframe the reaction to emotions, reframing the individual story, and gives examples from young people with the lived experience of a similar situation.

**France** – [Fil Santé Jeunes](#) is an interactive website supported by the National Public Health Agency of France. The platform aims to reach 12-25-year-olds and is focused on health concerns in general; notably, sexual and mental health is also included. The main aim of the platform is to provide information on these topics by offering online quizzes, surveys and information blogs created by experts. Topics are not only targeted at mental health, but also cover issues such as sugar consumption, the impact of video games on violence, nutrition, and many others. The platform also provides access to a forum where individuals can read and share on a topic with their peers and remain anonymous. The main topics in the forum include sexuality, addiction, body health, living with disabilities, living with illness and relationships. Users can open a new discussion under these topics or contribute to a previous discussion. A chat and phone line are also available to direct questions to doctors, psychologists, educators and counsellors at allocated times.

**France** – [Nightline France](#) is an NGO which was founded in 2016 in order to improve specifically the mental well-being of college students. The organisation aims to reach this goal by offering online peer support during the night, providing an inventory of the institutions offering psychotherapy to students and publishing some informative tips on mental health. The phone line and chat service are volunteer-based peer-to-peer support provided only between 9 p.m. and 2 a.m. The online helpline generally aims to provide support during emergency situations such as suicidal thoughts or immediate anxiety, but is not limited to those. The informative documents on the website include a mental health first aid kit for the user, tips and signs for detecting the mental health situations of friends, and how to get help. Since the organisation does not offer psychotherapy services, there is a section on the website where users can access information about institutions providing psychotherapy support. The platform provides support in both French and English, giving broader access to students in the country.

**Austria** – [Rat auf Draht](#) was established in 1987 as a contact point for children, adolescents and adults in crisis in Austria. Starting as an individual emergency hotline, the organisation expanded its services to e-mail consultation, web-based information sharing and consulting, a hotline for missing children, online chat consultation options, peer consulting for young people, and finally a digital information centre for parents with materials including a podcast series. The peer consultation and chat consultation serve 16-23-year-olds, while support for parents and the hotline serve broader age groups. The website provides information and quizzes on various topics, including family relationships, sexuality, friendship, violence, general health, mobile phone use, school and personal matters. The materials and consulting services are provided by psychologists, clinical/health psychologists, life and social counsellors, social educators and lawyers.

**Czech Republic** – [NEPANIKÁŘ project](#) is an initiative that offers the first digital application on mental health in the Czech Republic. Even though they state that they have over 100 volunteers, mainly consisting of students, the tool does not target a specific age group. Their website and application provide quick information on mental health, counselling via e-mail or chat, and a help map where users can reach information about relevant institutions, including emergency centres, hospitals and psychotherapists. They also offer paid services such as psychotherapy, training courses for individuals and institutions on crisis information, and workshops for schools, educators or companies on various topics including school stress, how to help a friend experiencing stress, signs of mental conditions for educators, how to deal with work stress, and burnout prevention for companies.

**Germany** – [JugendNotmail](#) is an online non-profit platform that provides consulting services on web and application-based tools to young people between the ages of 10 and 19. The platform does not offer phone counselling services but has a text-based structure via e-mails or chat options for consulting and advice. Young people can benefit from chat services such as individual chat consulting and group chat options with peers and experts at allocated dates and times. If the need arises for more advanced intervention, counsellors refer young people to competent institutions. Articles and guidelines with tips on dealing with specific situations, such as severe distress, challenging emotions, sexuality and disorders are also offered on the website.

**Germany** – [Mein Kompass](#) is a digital tool developed by the Department of Clinical Psychology at the University of Ulm as a part of the “Healthy for life” funding initiative. It is financed by the Federal Ministry of Education and Research (BMBF) and was implemented between 2018 and 2022. There is no specific age defined for the tool. Its aim is to recognise early symptoms of mental health conditions and inform young people about necessary services. The tool provides a short, clear description of mental health conditions, including fear, compulsions, depression, addictions, problems with sex, trauma, and more, with facts and myths, signs of the disorder, causes, where to seek help, and treatment options. The website also provides links to other services from the same programme as well as other sources from which young people can seek help. Although the project duration has ended, the website is still functional.

## On-premises services

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On-premises mental health support refers to traditional, in-person mental health-care services. These services include counselling, therapy and psychiatric support provided in settings such as clinics, hospitals and private practices. The aims of these services are varied, including raising awareness, providing educational resources and offering training materials.

These types of services offer several benefits. They provide direct, face-to-face interaction, which can be essential for building trust and rapport between clients and providers. These services also allow for immediate, hands-on interventions and access to a wider range of therapeutic modalities and resources.

**France** – [Quartier Jeunes](#) is a community centre in Paris for youth aged 16-30 under the authority of the Paris Municipality. The centre approaches youth well-being with a holistic understanding by providing support on job enhancement, legal advice, access to social and cultural activities and health consultation free of charge. Services are various, including offering shared study places, food provision under certain conditions, workshops on diverse topics such as resumé preparation, art therapy and legal advice related to immigration law, as well as criminal law. Health consultation is a major part of the services provided and is offered in collaboration with experts and volunteers from various associations. Sexual health consultation on sexually transmitted diseases, screening for HIV (human immunodeficiency virus), HBV (hepatitis B virus) and HCV (hepatitis C virus). Psychosocial support includes individual or group counselling with psychologists/psychiatrists on the topic requested by the young person, with a special focus on addiction prevention.

**Germany** – [The Mental Health Coaches in Schools project](#) started in the 2023/24 school term under the authority of the Federal Ministry for Family Affairs, Senior Citizens, Women and Youth (BMFSFJ) as part of another federal programme, Future Package for Health, Culture, and Movement. The target group is students at secondary level (12-27-year-olds), and 100 schools within 88 locations in Germany have been assigned for the first implementation period. The programme aims to prevent the emergence and continuation of psychological distress by strengthening the resilience, mental health and well-being of young people. Mental health coaches in the programme are independent experts in social work, educational science and



psychology who are assigned to a school as coaches and work in collaboration with teachers and school social workers. The structure of provided support and services varies based on the needs and demands of young people in schools and can include workshops, training, discussion groups and art sessions. These services aim to provide a space to increase resources for young people to deal with daily challenges and also decrease stigmatisation of mental health conditions. Coaches do not provide long-term individual counselling services; however, they make connections with the relevant institutions when necessary.

The programme collaborates with Youth Migration Services (Jugendmigrationsdienste (JMD)) in almost 500 locations. JMD offers individual guidance, educational courses and professional advice, focusing on linguistic, educational, professional and social integration to young people with immigration backgrounds. Young people can access free support for school-related issues, apprenticeship searches and navigating formal processes, with services available in multiple languages.

**Serbia – Hey We Are Here! (Hej Tu Smo!)** is a programme implemented by the National Association of Youth Workers (NAPOR), the National Youth Council of Serbia (KOMs), the National Association of Youth Offices, the Association of the Local Youth Associations (OPENS), and the Union of Scouts of Serbia with the support of Serbia's Ministry of Tourism and Youth. The programme is the first attempt to launch a standardised national youth work programme on preventing the development of mental health conditions. Launched in 2023, it aims to increase awareness of mental health conditions, the availability of support services, and reduce the stigma associated with mental health conditions. The project also supports the development of youth work, along with standardisation in the system of non-formal education and peer education at high schools in 10 local communities. Within the programme, school psychologists, health professionals and social services are collaborating to ensure a supportive environment for young people. The programme has several dimensions in order to reach its objectives: peer educator support is provided by training 15-18-year-olds on the signs of mental health conditions and sources that young people can benefit from, a supervision programme and training for youth workers who demonstrate burnout and high levels of stress, advising students and their parents on the preservation of mental health, and providing activities to engage the community in order to decrease stigma.

**Croatia – Zagreb Youth and Child Protection Centre** is a public service founded in 2002 by the local government to provide effective and immediate support to children and youth up to the age of 18. The centre specialises in traumatised children and their families. This includes sexual, physical and emotional abuse, and neglect, as well as the impact of war or displacement. Children with learning difficulties, ADHD (attention deficit hyperactivity disorder), chronic diseases, preterm infants, children from families with impaired dynamics and at-risk families, and children whose parents are under intensive pressure from parenting or general stress who are assessed as children at risk of neglect and are offered services at the centre. In addition to diagnostic and forensic assessment at the individual level, experts from the centre provide individual and group counselling and support for children and their parents. The centre also offers training and supervision to experts working in similar areas of study on topics such as prevention of abuse, basic facts on abuse and

neglect, children's rights, how to protect oneself, and what to do in cases of abuse. The target group for the professional training is broad, including health professionals, gynaecologists, paediatricians, kindergarten nurses, teachers, judges, prosecutors, policemen, lawyers, special educators and social workers.

## Hybrid services

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Hybrid mental health support combines both online and offline mental health-care services. This approach includes counselling, therapy and psychiatric support delivered through a mix of in-person sessions and digital platforms such as e-mails, chats, videoconferences, interactive tools, information and mobile applications. In parallel with online services, this concept has gained traction with the advancements in technology and the increasing demand for flexible care options, especially after the Covid-19 pandemic. Hybrid mental health services provide the flexibility of online services while maintaining the personal touch of in-person interactions. This approach can enhance accessibility, convenience and continuity of care, allowing users to choose the mode of support that best fits their needs and circumstances.

**Austria** – [Healthy from the Crisis](#) is a joint project of the Professional Association of Austrian Psychologists (BÖP), the Austrian Federal Association for Psychotherapy (ÖBVP) and the Austrian Professional Association of Music Therapists (ÖBM). The project was designed after the emergence of a mental health crisis among youth during the Covid-19 pandemic. The target age is 0-15, while individuals over 14 can register individually on the website to benefit from the free of charge 15-session psychotherapy service. Sessions are designed individually or in group settings based on the needs of the individual. For children under 14, their legal guardians must complete the registration and be involved in the process. Sessions are provided either online or face-to-face based on the user's preferences. Face-to-face sessions take place in the nearest location to the user and on the therapist's premises.

**Luxembourg** – [Portail d'information sur la santé mentale](#) is a government-led initiative that aims to provide essential information about the mental health services available in the country. The Help section of the platform offers access to various resources and support tools such as helplines, psychological and psychiatric support, therapy groups etc.. Although the platform is not specific to the youth population, it provides information and articles to general users, including a notable focus on youth mental health. The platform also offers training on specific topics such as mental health first aid, both online and in-person.

**Netherlands** – [MIND US](#) is an NGO working on the promotion of well-being and prevention of the emergence of mental health disorders among young people aged 12-27. Following a different approach, the organisation aims to reach young people through three different spaces where young people spend most of their time: online, school/training and neighbourhoods. With their ongoing project capturing the online space, they aim to create an environment in which mental health is discussed openly through campaigns with seven partner organisations. Content creators and influencers on social media platforms receive training on how to involve and engage with their communities to raise awareness on youth mental health. The organisation wants to support schools and training institutions via both online practical support

and guidelines for creating a supportive environment for young people dealing with academic pressures, and tips on promoting mental health among young people. In addition, the organisation welcomes young people at residential activities during mental health week in order to open up space for discussion on the mental health challenges they face and possible actions to take. Considering mental well-being in a holistic way, the organisation wants to contribute to transforming communities and leisure time activities in which young people are involved. For this purpose, in collaboration with several municipalities, the organisation works to enhance young people's voices within municipal processes as well as providing space for local governments to discuss and learn from each other's experiences.

**Slovenia** – [MIRA](#) is a national mental health programme from the National Institute of Mental Health of the Republic of Slovenia. The programme launched in 2018 as part of Slovenia's first strategic document in the field of mental health for a 20-year period. The aim is to connect existing mental health services within the country and establish 50 child and adolescent mental health centres and adult mental health centres. Based on the information on the programme's website as of 2024, 20 centres for child and adolescent mental health and 19 centres for adults have been offering services for users. Individuals can consult child and adolescent mental health centres directly, or parents, legal guardians and teachers can refer children and teenagers. The centres provide individual and group psychotherapy consultation for individuals and parents, and training and awareness programmes for parents and guardians. Educational centres may also offer services to children and young people with special needs. As well as in-person services, the website provides materials on the topics of helping oneself, helping others and mental health in the workplace. It also includes guidelines, tips for dealing with challenging situations, and the various signs that may indicate when someone needs help.

**Latvia** – [The Adolescent Resource Centre \(PRC\)](#) is a social non-profit organisation founded by the Children's Hospital Foundation. The centre provides online and in-person mental health support to adolescents between 10 and 18 years of age for up to six months. Their main specialist programmes are addiction risk reduction, depression risk reduction and dialectical behavioural therapy, with each having a different target situation. Their services are provided by clinical psychologists, doctors, child psychiatrists, family therapists, adolescent narcologists, nutritionists, sports coaches, physiotherapists, career counsellors and social workers. Consultations are provided in nine cities on physical premises or via online platforms. Their website also offers chat options, videos and blog articles for adolescents and parents. In addition, supporting materials are available for mental health specialists. Training for the three target groups takes place both in person and online. The training courses include topics such as dealing with emotions, protecting oneself from addiction for young people, understanding and helping with anxiety and depression for parents, and understanding and dealing with emotional difficulties at school for specialists.

**Netherlands** – [Ease Foundation](#) is a non-governmental organisation founded in 2017 in the Netherlands to provide easy and accessible psychosocial support, preventing the emergence of mental health conditions, and stimulating the strength and independence of young people aged 12-25. There is no waiting list. The foundation offers in-person support at 12 locations in the Netherlands, collaborates with

schools/parents to raise awareness on the early signs of mental health conditions, informs about their services, and provides digital support on their website. Volunteers welcome young people at in-person centres by ensuring a safe place to identify the needs of young people and plan the next steps when necessary. The online chat option on their website offers individual support on specific days and times, working to the same principle as the in-person support.



# Competences of youth sector professionals in the area of mental health and well-being of young people

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**T**his chapter explores the overall readiness and competences of youth sector professionals, trainers or educators in dealing with young people's mental health and well-being. The realities of professionals working in various countries differ, as there is no common definition or a unique professional standard for mental health specialists, especially in the youth sector, where services and initiatives dedicated to young people can be provided both by professionals and volunteers. At the same time, since the youth sector has often been at the forefront of addressing emerging challenges, such as mental health, new digital behaviours or social and humanitarian crises, its intervention has been primarily driven by the urgency of the situation rather than waiting for the development of competence frameworks or standardised approaches. Such situations have enabled experimentation and innovation, but have also led to increased fatigue and challenges in understanding how to make the interventions sustainable.

Another important dimension to be taken into account when discussing the readiness of various volunteers and professionals in dealing with mental health issues is the vastness of the topic itself. As mental health and well-being of young people are broad concepts, as identified in the first section of the study, measures aiming to address them can have different focuses and approaches. In this context, starting from the responses received to the online survey, this chapter explores the challenges encountered by organisations and institutions involved in designing and delivering capacity-building opportunities, with different practices advanced in the past years, especially after the Covid-19 pandemic, as well as potential recommendations that could be further addressed in increasing the readiness of the youth sector in supporting young people in the area of mental health and well-being.

## Understanding challenges

In order to gain a better insight into the existing practices, it is essential to start by mapping the challenges experienced by those engaged in providing services for mental health and well-being. Without being an exhaustive list, the insights identified below offer a picture of the major issues faced by the professionals in this field.

**Voluntary versus paid staff.** As mental health and well-being services and initiatives are developed with the engagement of both professional paid staff and volunteers, it becomes important to understand the different outcomes and what can and cannot be achieved by each of them. Higher expectations are often placed on volunteers when they are already dealing with limited resources.

**High professional expectations.** Professionals engaged in mental health activities can often be overwhelmed by the tasks they have, with many of them experiencing fatigue and mental and psychological stress. An additional burden that youth work professionals experience is the organisational or self-induced expectation that they alone are responsible for the well-being of young people.

**Competences for youth workers, educators and school staff.** Various respondents perceive youth workers, educators and school staff (school psychologists, counsellors, etc.) as not being sufficiently qualified to deal with young people's mental health difficulties. There is a potential for generating frustration both for the young people, who might feel more misunderstood, as well as for the professionals themselves, who might feel powerless or not effective enough in the process. Even where there are programmes for supporting youth workers' competences, they seem to be insufficient or they do not cover all relevant competences. The pressure felt by professionals (from lack of readiness or a fast work pace) can also translate into a lack of time to reflect on the quality of services or the competences needed to improve their work.

**Burden of complex procedures.** Another class of challenges includes the complexity of procedures that certain organisations and institutions might require in delivering mental health and well-being services. Considering that mental health interventions are sensitive in terms of the nature of the information they collect about individuals, the procedures for collecting and recording data and consent have been noted as specifically burdensome.

**Lack of resources.** Similar to other youth sector issues, activities related to mental health are not proportionally supported with financial and human resources. Funding for such initiatives, including for capacity building of professionals and volunteers, is usually provided by national institutions dealing with health (such as Austria, France and Malta), or youth issues (such as Latvia), by international donors (such as UNICEF and UNFPA), but also through the efforts of various NGOs which have embraced their responsibility to contribute to the professionalisation of the sector. However, existing efforts seem to fall short of meeting all needs, lacking sustainability and equal distribution across regions. The very affordability of capacity-building opportunities for youth professionals is also a challenge, as in addition to the lack of opportunities, their cost can represent an additional hindrance. At the moment, not all countries have national programmes that subsidise capacity-building opportunities in this field; thus, not many organisations can afford to organise them or cover the associated expenses.

**Dealing with stigma and prejudice.** Historically, mental health has been seen as a medical condition, often with negative connotations associated with it. While the scope of services provided for young people's mental health and well-being has expanded in the past decades, professionals working in schools and youth settings feel that the stigma and prejudices associated with those perceptions still prevail.

Consequently, additional barriers are experienced in direct work with young people who might lack trust in professionals, ultimately hampering their access to the services offered.

**Support mechanisms.** Taking into account the pressure felt by professionals working in this field, combined with the lack of insufficient resources and capacity-building opportunities, various organisations mention the need for school staff and youth workers to access support mechanisms such as counselling, contact points, mentoring, coaching or peer networks. Even if efforts have emerged to address this, current work is predominantly perceived as happening in isolation, hence the burden experienced by the professionals.

**Access to professional services.** While some countries offer access to psychologists and psychotherapists as part of their national health schemes, fully or partly covered by the public health system (such as Germany, Latvia and the Netherlands), this measure is seen as insufficient. Either because the number of professionals included in the health plan is too small for the needs of young people or because, in some countries, such services are not covered at all (for example Bulgaria only covers psychiatric services). This limits the possibilities of young people who can access such services and in the long term discourage them from seeking active support, even when relevant services might be offered for free.

**Addressing emerging issues.** Mental health and well-being are fields of work that require the capacity to respond to new challenges constantly. Starting with the Covid-19 pandemic, the overall fast pace of the digital environments and the multiple political and economic crises, the so-called polycrisis that young people are experiencing today add an equal challenge to specialists expected to deliver mental health services. The situation has often added to the pressure of specialists working in the field as they struggle to keep up with delivering services while also upskilling themselves, without proper guidance or sufficient time to reflect on their own knowledge needs and gaps.

**Regulation of specialised professions.** Some countries, such as Slovenia, as reported by the Slovenian Youth Council, experience substantial obstacles, as professions such as psychotherapy are not yet regulated. Thus, there can be significant differences in the quality of services provided, which could increase the risks to young people who might access such services. On the other hand, countries such as the Netherlands have a well-standardised system where youth professionals (identified as youth care workers, youth and family professionals, pedagogues or psychologists) have to register on the [Youth Quality Register](#), a system designed to ensure specialists meet a certain set of criteria while also undergoing professional supervision.

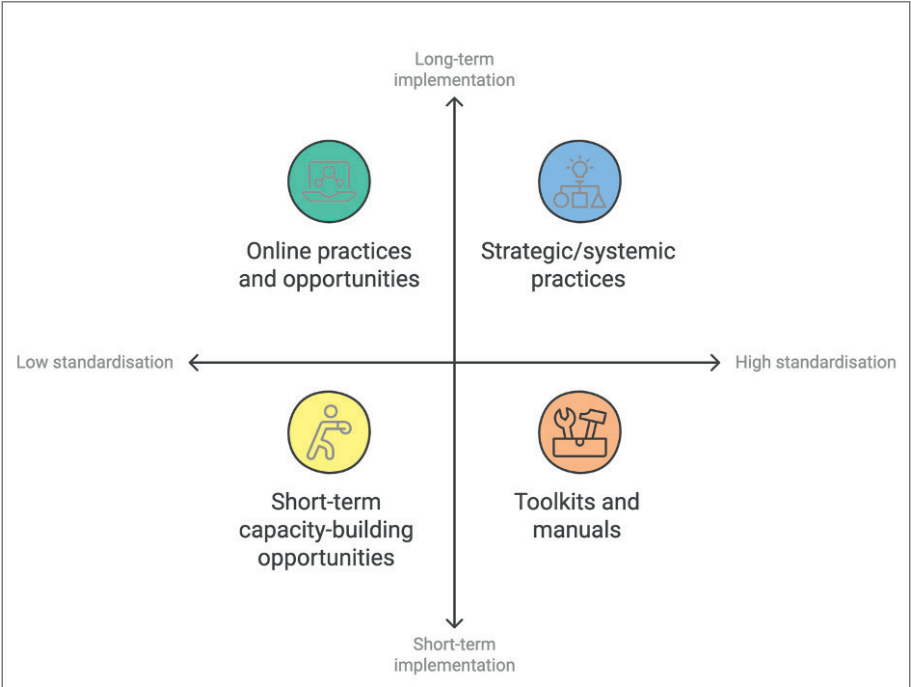
## Programmes and tools enhancing competences and readiness

The practices identified through the online survey bring to light efforts made by both public institutions and the NGO sector working with young people in different contexts. The first part identifies practices that were designed as large-scale programmes beyond the effects of a one-time project, including the development



of national frameworks, competence curricula or standardised training design. The second part identifies various toolkits/manuals and online opportunities developed through projects or which are offered by organisations to support a lifelong learning approach of professionals working in the field. The last part includes examples of several projects or activities predominantly organised by youth (work) organisations, funded by the EU and other donors, who often fill in the gaps in communities where public or systemic interventions do not exist.

**Figure 5. Categorisation of programmes and tools enhancing competences and readiness of professionals**



**Strategic/systemic practices**

The practices identified in this section have been designed as large-scale programmes, with effects beyond a one-time project or activity, including examples such as the development of national frameworks, competence curricula or standardised training design.

**Wales – Framework on embedding a whole-school approach to emotional and mental well-being.** Adopted by the Welsh Government in 2021, following the early impact of Covid-19, the framework serves as a guidance instrument for school staff supporting the learning and well-being needs of school-age learners. While focused on school settings (specifically identifying not just teachers but also senior leadership and other school staff), it sets additional roles for other actors expected to support school efforts – regional bodies, the NHS and others in the wider community, such as youth services, youth worker organisations, youth offending teams, etc. The framework

can be seen as a systematic approach to improving the mental well-being of young people through an integrated approach. Content-wise, it addresses well-being from a resilience and preventive action perspective for both learners and professional staff. To support professionals working in school settings, the framework includes measures such as conducting, documenting, consulting on risk assessments, skills assessments and workload impact assessments. Regarding leadership and staff training, it foresees new elements related to the emotional and mental well-being of learners to be added to the initial teacher education or upskilling of dedicated staff such as school counsellors, school nurses, educational psychologists and education learning support assistants. It is important to note that the framework is not a prescriptive tool – it does not provide one set of rules to be applied by all stakeholders, but instead focuses on principles and various good practices that can offer inspiration. Good practices show the added value of networking, consultations to identify training needs or peer support groups within school settings.

**Latvia** – The [Youth Workers Excellence Programme](#), developed by the Latvian Agency for International Youth Programmes, part of the Ministry of Education and Science, offers an example of an approach to upskilling the competences of professionals working with young people both in local governments and NGOs. The residential programme, implemented since 2022, includes four modules (three days each) for two levels of proficiency and promotes a wider approach to mental health and well-being. The introductory level focuses on topics such as psycho-emotional health problems of young people, understanding discrimination or violence, cultural differences (ethnic minorities), and developing initiatives for young people with fewer opportunities. The advanced level is dedicated to those who have completed the first level and covers topics such as psycho-emotional health and well-being of the youth worker and others, working with antisocial or risky behaviour and conflict resolution, addictions of young people (substances and processes), and good practices in working with young people with fewer opportunities. Additionally, the Latvian Ministry of Education and Science offers supervision and mentoring sessions for youth workers within its Annual Youth Policy State Programme.

**Serbia** – [curriculum, training and mentorship for youth workers](#), developed by the National Association of Youth Workers in Serbia (NAPOR) in 2024 (final format of the training to be implemented in 2025) and funded by the Serbian Ministry of Tourism and Youth. Following a nationwide research and testing phase, NAPOR has developed two curricula as part of the National Programme for Youth Mental Health. The first is the curriculum for the education of youth workers who will implement the programme at the local level. It is designed as an initial training of youth workers for the planning and implementation of outreach youth work with young people, including co-ordination of the work of peer educators in high schools, conducting training for the implementation of peer education workshops, and supervision of peer educators. The second is a curriculum for youth workers implementing the National Programme for Youth Mental Health. The training is focused on: empowering youth workers to use group resources and to create a safe space to work in a mental health context with different groups of young people; improving knowledge about basic terms and challenges in the mental health of young people; raising awareness of youth workers about personal capacities and challenges in the field of mental health

and improving their practices on taking responsibilities and setting professional boundaries; empowering youth workers to use different crisis response techniques; improving communication skills; and identifying institutions and resources (important for youth mental health) in local communities. After the training, youth workers are offered mentorship in the process of creating and implementing youth work programmes for various groups of young people, which are expected to include at least eight sessions with young people.

**Luxembourg** – [Mental Health First Aid Youth](#) is a training programme provided by Formation Enfance Jeunesse Luxembourg, the national institute of lifelong learning for the educational field, under the authority of the Luxembourg National Ministry for Education, Children and Youth. Addressed to professionals working in the mental health field, the training aims to provide basic knowledge about mental disorders and practical first aid measures in the event of psychological difficulties or crises. Participants learn about the frequency of mental disorders and reflect on how they are perceived in our society. The most common and disabling mental disorders (depression, anxiety disorders, psychotic disorders, substance use and eating disorders) are discussed. The curriculum includes an emphasis on knowledge (understanding mental health issues connected to young people and their behaviours) as well as attitudes and values (reflected in the behaviours and approaches of the professional).

**France** – [Youth Mental Health First Aid](#) is a new youth module for professionals who work with adolescents 12-18 years old (teachers, sports coaches, social workers, parents, etc.). The new module has been implemented since 2022 by the Premiers Secours en Santé Mentale France (PSSM), a non-profit organisation working to combat stigmatisation and mental disorders. Designed as a standard training module, it is focused on two main components: dealing with mental health disorders (depression, anxiety, psychoses, addictions, eating disorders) and with crises (non-suicidal self-mutilation, suicidal crisis, panic attack, traumatic event, severe psychotic state, severe drug and alcohol effects, aggressive behaviour). The training is complemented by a mandatory mentorship phase.

**Ukraine** – [three-day training course “Trauma Informed Youth Work” within the state programme Youth Worker](#). In co-operation with the Ministry of Youth and Sports of Ukraine and the All-Ukrainian youth centre, the Council of Europe project [Youth for Democracy in Ukraine](#) developed the specialist course “Trauma Informed Youth Work” within the state programme Youth Worker. A training manual for professionals working with youth was designed and written in [Ukrainian](#) and translated into [English](#). It is available online free of charge.

The training course follows the occupational standard “Youth specialist (youth worker)” in Ukraine<sup>3</sup> which ensures the reflection of youth work realities in a time of aggression by the Russian Federation against Ukraine. In 2022, the Council of Europe organised a focus group discussion of trainers of the programme Trauma Informed Youth Work. As a result of the work of the focus group, the final text of the occupational standard includes the following knowledge and skills: “Ability

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3. [www.coe.int/en/web/kyiv/-/the-occupational-standard-for-the-profession-youth-specialist-youth-worker-has-been-approved](http://www.coe.int/en/web/kyiv/-/the-occupational-standard-for-the-profession-youth-specialist-youth-worker-has-been-approved).

to identify one's own needs for improving the professional level and the needs of persons involved in youth work" (D1): basic knowledge in the field of mental health; personal, organisational and informational opportunities for receiving special help for oneself and others (professional burnout, stress, knowledge of a traumatic event, compassion fatigue); the ability to determine the need to receive special help for oneself and others (professional burnout, stress, knowledge of a traumatic event, compassion fatigue); use information about available personal, organisational and informational opportunities for receiving special help.

## Toolkits and manuals

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This section identifies various toolkits, manuals or handbooks that have resulted from various projects and initiatives. They serve as resources for organisations interested in learning more about the topics and for discovering new tools and approaches to working with young people and their carers in the context of well-being and mental health.

The **Toolkit on Mental Health, Social Well-being, and Healthy Habits of Youth** was created by the Psychosocial Innovation Network with the support of UNFPA Serbia. It consists of theoretical and practical sections covering the topics of mental health, well-being and habits of youth, and was developed through a co-creation approach actively involving youth. The toolkit was part of the project Wellbeing, Habits, and Mental Health for Youth Advancement (WHAM), aiming to improve the mental, social and physical well-being of youth in Serbia through the creation of a sustainable educational tool (toolkit) intended for local Youth Offices; improving the knowledge and skills of local Youth Offices staff and increasing effectiveness and broader applicability of the toolkit by addressing the diverse needs of young people across various contexts.

**Toolbox Psychosocial TOPSY** was developed by the Austrian League for Child and Youth Health (Kinderliga) and the Federal Youth Council (BJV). The toolbox was created by experts from the fields of psychiatry, psychology, psychotherapy, child and youth work together with future users during the project with the same name in 2022-24. It was primarily designed for youth workers and healthcare professionals and intended to support awareness raising, destigmatisation, crisis support, and networking for interventions relating to mental health crises and mental illness in young people. In the second stage, a training course was delivered based on the toolbox, where participants gained practical knowledge on exercises, methods and suitable procedures to address concerns about the well-being of children and young people. The ultimate goal was to reach young people within the structures where they were already engaged, leading to a sustainable embedding of actionable competences in the respective organisations.

**Psychological First Aid Training Manual for Child Practitioners** (PFA) was developed by Save the Children Denmark for the Child Protection Initiative. It is an integral part of training modules dedicated to psychological first aid, focusing on distressed children and primary caregivers. It was designed to support the competences of Save the Children staff, partners and professionals such as teachers, educators, health and social workers or volunteers working directly with children in emergencies or

in the aftermath of conflicts, natural disasters and other traumatic events, including small-scale ones such as a fire at school, robbery, interpersonal violence or personal loss. The training consists of three days in total: two are focused on psychological aid relating to children, covering topics such as understanding what psychological first aid is, children's distress and reactions to crises, and communicating with parents and caregivers in distress; and one day is focused on the stress management of staff, aiming to support them, among others, in identifying and reducing stress factors, and dealing with over and under involvement.

**I Support My Friends** is an initiative developed by UNICEF on the principles of psychological first aid to equip older children and adolescents with the skills and knowledge to support their friends in distress under the mentorship and guidance of trusted adults. Designed as a training programme, it includes a series of resources that can be used in other contexts as well – the theory and implementation guide, general training manual, participants' workbook, and the manual for training of facilitators and focal points.

**Psychoeducational Workshop Programme – Handbook for Facilitators** was created within the “Youth for change: building the resilience of Serbian youth through engagement, leadership and development of their cognitive and social-emotional skills” projects, implemented by the Psychosocial Innovation Network with the support of EU funding. Designed as a practical tool, the handbook provides educators with a methodology design for activities related to perspective taking and conflict resolution, empathy and acceptance, and strengthening self-confidence, among others.

**Juleica module** on mental health is a toolkit created as part of a standardised nationwide training model for young volunteers who are involved in youth associations. The training module, organised in residential settings, was developed in Germany by the Landesjugendring Brandenburg e.V. association in order to increase confidence in this field. The toolkit provides an overall understanding of the concept of mental health and different tools and methodologies that organisations can use directly when working with young people.

Apart from the toolkits identified through the survey, it is also important to mention the **European Mental Health Capacity Building Initiative**, which includes the development of a toolkit for a multidisciplinary approach to mental health capacity building. The European Commission is funding a multidisciplinary training and exchange programme on mental health with €9 million under the Eu4Health programme (EU-PROMENS 2025).

## Online practices and opportunities

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This section maps several online learning platforms developed through projects or offered by organisations aiming to support the development of lifelong learning opportunities for professionals working in the field of well-being and mental health.

**Campus FAD Juventud** – is an online platform created by Fundación de Ayuda contra la Drogadicción (FAD) in Spain, which organises online programmes, training and resources focused on prevention addressed to young people, families, as well as professionals working in the sector (for example educators, teachers and social

workers). The programmes cover topics such as well-being, prevention of risk behaviours and gender. During 2024, professionals from public and private organisations had access to resources such as [Young people and screens: use and risks in digital environments](#), [Life goes by: selective prevention of cannabis consumption](#); [Purple glasses](#) (focused on how gender affects addictive behaviours).

**Mental health online modules** offered by Josefstal Studienzentrum in Germany include a series of online modules (2-3 hours each) based on videos, reading materials and interactive tasks. They provide the basics of topics such as [Addiction prevention in child and youth work](#), [Mental health in child and youth work](#), [Conducting discussions in \(school groups\)](#), [Dealing with stress and self-protection online](#), [Dealing with crises in children and adolescents](#), [Violence in the digital space](#).

**Online information service** for school professionals and educational staff on pandemic-specific aspects of the mental health of children and young people was an initiative developed by Psychosomatics and Psychotherapy (DGKJP) in partnership with the Federal Centre for Health Education (BZgA) during 2021-22. It was the result of the DGKJP's involvement in the interministerial working group "Health effects of coronavirus on children and adolescents", chaired by the Federal Ministry of Health (BMG) and the Federal Ministry for Family Affairs, Senior Citizens, Women and Youth (BMFSFJ). While not continued, the platform includes a series of 11 video materials dedicated to school professionals and educational staff interested in mental stress and mental disorders in children and adolescents in connection with the coronavirus pandemic. The platform covers, among others, topics such as dealing with feelings, sadness, emotional or depressive disorders, coping with fear and resilience.

Deutscher Bundesjugendring e.V., an umbrella organisation for youth organisations and regional youth councils in Germany, offers regular online exchanges dedicated to their membership on topics such as "Mental health on youth trips and international encounters", "Mental health and volunteering", or the phenomenon of climate anxiety. This allows the organisation to explore practical questions in an informal way, together with young people and youth psychologists.

## Short-term capacity-building opportunities

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The last section includes examples of various projects or activities predominantly organised by youth (work) organisations, with the support of the EU or other donor funding, often filling in the gaps in communities where public or systemic interventions do not exist.

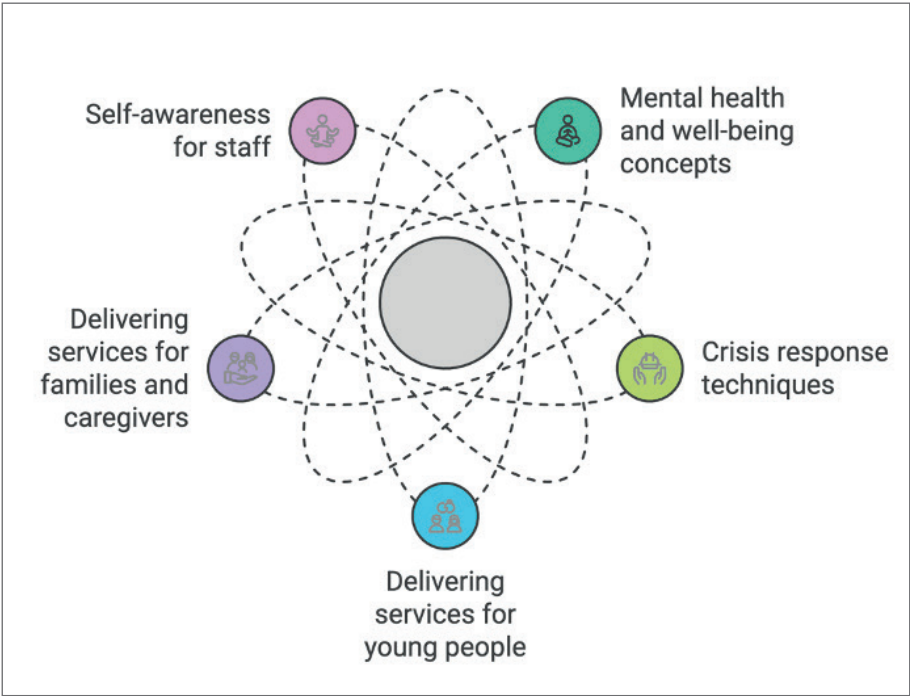
**Let's Talk project** aims to strengthen youth workers' capacity to support young people's mental health, focusing on the effects of Covid-19 on children and young people and gender-sensitive approaches to mental health issues. It is carried out by a consortium of organisations from Croatia, Greece, Italy and Serbia within the Erasmus+ programme.

**Peer School for Youth Mental Health** project's main aim is to train and educate young people on mental health topics in order to become peer educators by ensuring that mental health is dealt with systematically, but only ad hoc and in the short term. It is implemented by the Youth Association YMCA Bitola – North Macedonia,

within the framework of the regional programme for local democracy in the Western Balkans 2 Reload2, financed by the EU.

**Reinforce mental health practices (MIND) project** aims to strengthen the capacities of VET professionals to reinforce their mental health practices and promote socio-emotional well-being for VET learners in mobility projects. It is organised by a consortium of organisations – ADICE (France), Fundación Plan B Educación Social (Spain) and Volunteers Centre Skopje (Macedonia), within the Erasmus+ programme.

**Figure 6. Illustration of main learning objectives and capacity-building initiatives for professionals working in the field of mental health and well-being**



The Council of Europe’s European Youth Foundation (EYF) also supports a range of projects on youth mental health and well-being which provide different training and capacity-building opportunities.

**Healthy ME Healthy YOUTH**, implemented by Rural Youth Europe in 2023, aims to support young people in rural areas in accessing their right to the enjoyment of the highest attainable standard of physical and mental health. It builds the knowledge and tools that youth clubs and organisations need to support young people in exploring issues such as healthy living, healthy and sustainable food, circular economy, exercise and mental health.

**Mental health within youth work** was a five-day capacity-building activity for 18 participants aimed at improving the quality of youth work in the participants’ organisations, taking into account the effects of the pandemic on the mental health



of the children and young people they work with, particularly the most excluded ones. The aim was to improve the skills of youth workers in dealing in appropriate ways with young people's mental health. This was focused on tactics such as relaxation exercises, mindfulness, yoga, healthy diets, instead of counselling, and they also explored the safeguarding policy (for example, youth workers can refer a young person to a psychology or counselling professional). The activity was organised by Don Bosco Youth-Net ivzw in 2023.

The **Trauma Informed Youth work programme** is part of the Council of Europe project **Youth for Democracy in Ukraine**. From 2022, to reflect the needs of young people and youth workers in wartime, the Council of Europe project Youth for Democracy in Ukraine has developed the competences of youth trainers in the field of trauma-informed youth work in co-operation with the Ministry of Youth and Sports of Ukraine and the All-Ukrainian youth centre. The first group of trainers from 12 partner youth centres in Ukraine received training during a four-month programme in 2022; the second group of trainers – youth workers, psychologists and social workers – from youth centres and organisations working with internally displaced persons and returnees in Ukraine have been attending a one-year programme since 2024. Following growing requests, each year all trainers improve their competences in the field of human rights and the trauma-informed approach during an advanced training of trainers, organised jointly by the Council of Europe projects **Youth for Democracy in Ukraine** and **Facilitating access to human rights and essential services for internally displaced persons and returnees at the community level**.





# Conclusions and recommendations for the future

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**T**he study brings to light the ever-changing landscape in which young people and the wider youth sector are called to navigate. As mental health and well-being become important issues on the public agenda, current practices show noteworthy efforts made by both state and non-state actors, but numerous challenges keep emerging. In this context, the study provides insights into three main dimensions – policies, services and competences of professionals. In order to efficiently advance any of them, it is important to be aware of what is in place, what the good practices are, and what the structural issues are that need to be taken into account.

## Main conclusions

While mental health and well-being have already been prioritised since the previous decade, their importance gained particular momentum during and after the Covid-19 pandemic. The negative impact of the pandemic on young people and the professionals working with them has been intensively studied in recent years, bringing to light lasting negative changes in their behaviour. However, as policy makers have tried to respond with new measures to address this challenge, the reality remains difficult to fully grasp as new social and political challenges continue to arise.

Above all, it has become clear that we are not dealing with the effects of a single crisis but that of a polycrisis. As presented in the introductory chapters, young people are exposed to various factors that contribute to increased mental health and well-being issues – from economic uncertainty to climate change, fast adoption of new technologies, and new political and social crises, including war and rising populism. The pressure these challenges exert on youth can lead to increased risk of poor mental health and well-being. Stronger policies are needed to target these specific threats to youth well-being by developing and employing preventive and intervention strategies to promote or protect youth well-being. Based on both the desk research and the survey conducted for this study, almost no policies were identified that focus on youth well-being specifically. Furthermore, there seems to be a lack of effective policies that target the specific threats to youth mental health.

For example, given that socio-economic factors such as income insecurity and unaffordable housing are important threats to youth well-being, the fact that economic inequalities remain high in the EU ([European Commission 2024](#)), and that the housing crisis is still evolving ([European Parliament 2025](#)), indicate that the existing

related policies should better target young people's economic needs and transition to independence. As another example, the potential threat of new technologies to youth mental health and well-being remains relatively poorly understood. This is also reflected in the existing policies, which, for the most part, revolve around banning smartphones in schools – a policy with an unproven effectiveness. More empirical research is needed on this topic, and to this end, governments and intergovernmental institutions need to invest more resources in research. Research on the effects of digital media use on youth mental health is currently hampered by the data-sharing policies of the large private companies that own the main social media platforms. Such companies, with very few exceptions, do not share usage data, a decision that hinders the acquisition of scientific knowledge on the effects of these technologies on youth well-being.

When looking at the available services, the study takes note of the diverse approaches and methodologies adopted to meet the needs of youth populations. The findings emphasise the predominant role of NGOs as service providers, often in collaboration with government institutions, showcasing the significance of partnerships in delivering effective support. Nevertheless, the funding for a majority of these NGOs relies on government funding opportunities, reflecting the critical role of public resources in sustaining these services.

In some countries (such as Germany, the Netherlands and France), national governments collaborate extensively with NGOs, fostering comprehensive frameworks that enhance the accessibility and effectiveness of mental health services. Increasing emphasis on youth mental health through the development of national strategies and plans is a promising development (such as Slovenia) since it is linked with availability of services. Additionally, it is encouraging to see that national services include physical centres in various locations across countries, which enables rural youth to access these services (for example Germany and Slovenia).

Although limited, some services are offered in multiple languages, which is crucial for accessibility, especially in diverse and multicultural regions, thereby increasing the inclusivity of the services (for example France and Germany). Even though young women experience more mental health issues, there is limited input on specific services for these groups, as well as for other disadvantaged groups such as youth with migration backgrounds, or youth with disabilities.

When assessing at the diversity of online, offline and hybrid service types, different benefits and challenges can be noticed. Some physical centres have the opportunity to provide comprehensive services, including educational specialists, family involvement, nutritionists, sports coaches, vocational counselling, sexual health counselling, psychological counselling and addiction therapy all on the same premises (for example France, Latvia, Croatia). Online services, on the other hand, have the flexibility to target more specific needs, such as social anxiety, public speaking or worries about appearance due to scars and injuries (for example Norway). Besides, hotlines and text-based options via chat and e-mail offer easy access to counselling services. The increase in hybrid services is notable; however, many hybrid services fall into this category primarily because they include online informative material on their websites.

When looking at the capacities of professionals, it can be observed that there is a diverse ecosystem involved in supporting young people's health across the countries – it ranges from specialist professionals such as psychologists, school psychologists/counsellors, social workers or youth workers. While diversity is expected, the underlying problem remains the lack of a minimum standardisation – who are the mental specialists and what is their role? If in other sectors, such as education, we can speak about a uniform understanding of the role of a teacher, even if there may be differences in how they are trained or the methodologies they use, the situation is not even half comparable in the mental health sector. The diversity of professionals involved differs considerably; overall, it is hard to compare across countries. Moreover, as these professionals can be involved as both paid professionals and volunteers, there are additional challenges that can emerge, from the quality of the service to its sustainability.

One of the reasons that could explain this diversity is the novelty of the issues at hand and the continuously changing landscape of the factors influencing youth well-being. For example, the factors that contribute to the precariousness of mental health, such as dealing with anxieties generated by climate change, the effects of new technologies or extremist political movements has not been covered by traditional health specialists. Therefore, there are few competence frameworks for supporting young people in this area.

The limited number of capacity-building opportunities and competence frameworks identified through the survey indicates either a low awareness of such practices or even the lack of actual dedicated programmes for professionals working in the field of mental health and well-being. While the research and survey have identified 46 services in 18 countries, only 14 of these initiatives are dedicated to building capacities, without counting the short-term projects. This becomes particularly important as two scenarios emerge when we discuss the readiness of the mental health sector. One where there might be a diversity of services provided but not delivered by specialist professionals, and another where information about the training of professionals in this field is limited. The situation requires additional research into national contexts in order to understand the real causes of this limitation, potentially considering it also from the perspective of a shortage of professionals, as identified by various respondents to the online survey.

In terms of understanding the new challenges encountered by young people, there seems to be an increased interest in developing the capacities of professionals related to the impact of social media and digital technologies. This tendency was noticed specifically after Covid-19, but it can be anticipated to be even more needed since the new technological developments such as artificial intelligence can augment the negative impact on young people's behaviour (for example algorithms that shape identity and self-esteem) and perception of reality (for example deep-fakes and AI-distorted images/videos).

When zooming in on the youth work context, we can find examples of programmes that specifically address the advancement of youth workers' competences in dealing with young people's well-being (see Latvia and Serbia). Yet, it is crucial to differentiate between everyday youth work practice and services which require more specialised interventions, even if they do not entail involvement of professional specialists such as psychologists.

## Key recommendations

This section provides a series of recommendations aiming to improve the status quo of mental health and well-being, with a focus on policies, services, capacities of professionals and research.

### Youth mental health and well-being policies

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**Youth focus in mental health and well-being policies:** as young people's mental health is affected by multiple factors, policies at all levels need to identify solutions that address the various identified issues. In this context, policy solutions need to target young people's needs specifically as a distinct age group by creating tailored policies in addition to other general mental health frameworks. Alternatively, national frameworks should be complemented by clear guidance on how they apply to young people and how they facilitate their access, including key indicators that can be measured periodically.

**Youth participation:** similar to other policy priorities, youth voices and perspectives need to be an integral part of any policy and practice designed to cater to their needs. While mental health has been initially integrated into wider health policies, it is essential that new policy processes recognise young people as rights holders in designing the measures that can impact their well-being.

**Mapping and monitoring policies with an impact on young people's mental health and well-being:** considering the diverse factors that influence young people's situation, it is important to have a good overview not only of the policies traditionally dedicated to mental health, but also how other policies address youth well-being, for example those related to climate change, economic development, youth autonomy and conflict management. Such processes should be aligned with prevention strategies and strategic co-ordination of youth policies.

**Cross-sector collaboration:** providing spaces and opportunities for collaboration between different sectors, such as education, health, social and youth services, in order to create comprehensive support systems for young people. Establishing multidisciplinary teams and crisis intervention units could be one outcome of such a collaboration.

### Mental health services

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**Strategic planning:** mental health services can be provided in different forms and by different stakeholders. In order to ensure a sustainable impact, there is a need for long-term strategic planning and monitoring, including by identifying relevant resources and stakeholders at all levels.

**Expand service scope:** service providers should broaden the range of services to incorporate the perspectives and needs of diverse youth demographics, including marginalised groups. Such solutions could include, without being limited to: ensuring accessibility of services in rural areas and providing multilingual access.

**Service design:** considering the diversity of age groups in the mapped mental health and well-being services, it is important to ensure that future services are carefully

designed, considering the specific characteristics of each age group. Such services should be appropriately tailored to the developmental and transitional needs of every age group at various developmental and educational level, and career transition in the youth life course, providing targeted support that addresses their unique challenges and opportunities. Furthermore, engaging young people in service design could contribute to their effectiveness.

**Leverage digital tools:** NGOs and government institutions can utilise the flexibility of digital tools to bridge accessibility gaps, ensuring that mental health services are available to all young people, regardless of their location, identity and specific needs. This approach requires mindfulness and understanding that digital tools also have their limitations and might not be as effective as other traditional approaches.

**Maintain physical premises:** due to the scope of their services, physical centres need to be well equipped and accessible, notably by expanding to rural areas in order to provide comprehensive, multifaceted support. However, as the limitations of digital tools should also be understood, it is equally important to diversify the choices of tools and consider complementing physical premises with digital environments when suitable.

**Quality assurance and the role of youth workers:** the quality of mental health and well-being services is an essential aspect. In this context, while services can be created based on needs and, sometimes, even as a crisis response, it is equally important to ensure they benefit from careful planning and are delivered by qualified staff. Moreover, it becomes critical to differentiate between three types of service: mental health services provided only by qualified professionals (psychotherapists, psychiatrists); services provided by youth workers and other professionals following a specialised training related to young people's mental health and well-being; general youth services that do not require additional training but still contribute to young people's well-being. This differentiation can be critical to ensure the effectiveness of the services, but also to build trust between young people and service providers.

## Capacity building of youth sector professionals

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**Understanding mental health and well-being:** youth workers, school staff and other relevant professionals need more capacity-building opportunities to recognise signs of mental health issues, understand various conditions and provide initial support or referrals.

**Key competences:** future national frameworks or competence development initiatives need to take into account the diverse set of competences required of professionals, allowing space to upskill their practices in the context of the polycrisis (taking into account current developments and anticipating new ones). Specialists need clear methodological guidance, as well as a strong support mechanism (coaching or supervision) that empowers them to work in a safe environment.

## Research and data collection

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**Enhanced data collection of services:** service providers and policy makers should have in place data collection and impact analysis procedures. The outcomes should feed into assessment mechanisms looking into the effectiveness and potential scalability of mental health services.

**Inventory of services:** in order to ensure sustainable development and use of mental health and well-being services, it is essential to ensure they are known and visible. In this context, a national inventory or repository of available services is recommended. Such inventories can include both services provided by state and non-state actors.

**Future research:** as identified throughout the study, future research needs to complement present findings. From the policy perspective, additional research is needed to understand how states include the voice of young people in their mental health policy design and how they are addressing all factors that aggravate young people's mental health and well-being. From the services perspective, it is important to know how service design is developed and the specific challenges to ensure their sustainability. From a capacity-building perspective, it is important to also look into what the commitments of both public and private stakeholders are, including any need to design new standards or improve current qualification frameworks.

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# Appendix I

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**T**he research on young people's mental health and well-being aims at mapping existing/upcoming policy processes and practices in the field, at national and European levels. It is organised under the umbrella of the partnership between the European Commission and the Council of Europe in the field of youth (Youth Partnership) and is undertaken by a team affiliated with the Pool of European Youth Researchers (PEYR). You can [read more](#) about the partnership's work on mental health and well-being.

We kindly ask you to support this process by providing information about policies and/or practices in your respective country/region (including services, information about tools and online platforms, competences and readiness of professionals working in the field). This survey will take about 20-30 minutes to complete.

Participation in this survey is voluntary. For questions or more information about the research, please contact Veronica Stefan, member of the research team, at [veronica.stefan@digitalcitizens.net](mailto:veronica.stefan@digitalcitizens.net).

Please fill in the survey below by 15 August.

## Personal data processing notice

The Youth Partnership is processing your data in accordance with the official [Privacy Notice](#). Please read the document before proceeding further.

I agree to the terms and conditions mentioned in the Privacy Notice.

- ▶ Agree
- ▶ Disagree

## Personal details

First and Last Name:

Organisation/Institution:

E-mail address:

Country (of residence for which you are providing the examples below):

## Policies

**In this section, you can provide details about relevant policies at the national or European level. Please add each policy one by one; you can add up to 3 policies for each level.**

1. Are you aware of any policy frameworks (laws [proposed or adopted], strategies, other policy initiatives) in your country addressing young people's mental health and well-being?
  - ▶ Yes
  - ▶ No [route to question 2]

IF YES:

1a) Please specify the title of the policy. [open-ended]

1b) What is the topical focus of the policy (please choose all that apply):

- ▶ Economic factors and young people's mental health
- ▶ Climate change anxiety and young people's mental health
- ▶ Digital media use (including social media) and young people's mental health
- ▶ Covid-19 and young people's mental health
- ▶ Social segregation (migration, immigration) and young people's mental health
- ▶ Precarity (including housing crisis) and young people's mental health
- ▶ Global conflicts (insecurity) and young people's mental health
- ▶ The policy does not have a topical focus (it addresses young people's overall mental health)
- ▶ Other: \_\_\_\_ [open-ended]

1c) Please provide a brief description of the main elements included in the policy (e.g. measures included, mechanisms for implementation, etc). [open-ended]

1d) What institution is responsible for the policy and the funding provided? Please mention if there is a different institution ensuring the funding. [open-ended]

1e) Please provide a link to the mentioned document or to further information, if available, in English or the national language.

1f) Please provide any personal reflection on the respective policy (e.g. shortcomings or strengths of their provisions).

1g) The policy process focuses on (choose all that apply):

- ▶ Children (under 18)
- ▶ Young people 18-25
- ▶ Young people over 25
- ▶ The policy process does not specify age
- ▶ Other [open-ended, specify age]

Would you like to include details about another policy/strategy? (repeat twice)

- ▶ Yes (show the same questions above)
- ▶ No (jump to the next question)

2. Are you aware of other policy frameworks or strategies addressing young people's mental health and well-being, at the European level?

- ▶ Yes
- ▶ No [route to question 3]

IF YES

2a) Please specify the title of the policy. [open-ended]

2b) What is the topical focus of the policy? (please choose all that apply):

- ▶ Economic factors and young people's mental health
- ▶ Climate change anxiety and young people's mental health
- ▶ Digital media use (including social media) and young people's mental health
- ▶ Covid-19 and young people's mental health
- ▶ Social segregation (migration, immigration) and young people's mental health
- ▶ Precarity (including housing crisis) and young people's mental health
- ▶ Global conflicts (insecurity) and young people's mental health
- ▶ The policy does not have a topical focus (it addresses young people's mental health overall)
- ▶ Other: \_\_\_\_ [open-ended]\_\_\_\_\_

2c) Please provide a brief description of the main elements of the policy (e.g. measures included, mechanisms for implementation, etc).

2d) What institution is responsible for the policy and the funding provided? Please mention if there is a different institution ensuring the funding. [open-ended]

2e) Please provide a link to further information, if available. [open-ended]

2f) Please provide any personal reflection on the respective policy (e.g. shortcomings or strengths of their provisions). [open-ended]

Would you like to include details about another policy/strategy? (repeat twice)

- ▶ Yes (show the same questions above)
- ▶ No (jump to the next question)

## Practice

**In this section, you can provide up to 3 examples of practices (services). Please include details for each of them, following the structure provided below.**

3. Are you familiar with the services that support young people's mental health and well-being at the national/local/organisational level?

- ▶ YES
- ▶ NO [if no route to 4]

3a) What organisation is the main provider (name)? [open-ended]

3b) Is the main provider [choose one]

- ▶ National government (e.g. a ministry or government department or agency)
- ▶ Local government
- ▶ Non-governmental organisation (NGO or civil society)

3c) Where is the service offered? [choose one]:

- ▶ Schools
- ▶ Youth centres



- ▶ Other [open-ended – specify]

3d) What age group is the service targeting? (choose all that apply)

- ▶ Children (under 18)
- ▶ Young people 18-25
- ▶ Young people over 25
- ▶ The service does not target a specific age
- ▶ Other [open-ended, specify age]

3e) The service is offered [choose one]

- ▶ Online
- ▶ Offline
- ▶ Hybrid

3f) Please provide a brief description of the service and a link to it, if available.  
[open-ended]

Would you like to include details about another practice? (repeat twice)

- ▶ Yes (show the same questions above)
- ▶ No (jump to the next question)

4. Are you familiar with (digital) tools that have been used to identify, assess or monitor young people's well-being or mental health (might be used in youth/educational settings or in conjunction with services included above)?

In this section, you can provide examples of practices (tools and online platforms). Please include short details about all of those you are aware of.

- ▶ YES (*Please provide for each tool 1) a brief description if available; 2) link for more information*)
- ▶ NO (skip)

5. Is your organisation a provider of any of the services mentioned above?

- ▶ YES (*Please mention any challenges or new opportunities you might have encountered. Please include any personal reflections*)
- ▶ NO (skip)

### **Readiness and competences of youth workers/youth sector professionals working with youth mental health and well-being**

6. Are you aware of any specific competence frameworks designed for youth workers/youth sector professionals working with mental health?

- ▶ YES (*Please include 1) a short description; 2) link for more information*)
- ▶ NO (skip)

7. Are you aware of any specific capacity-building opportunities (e.g. initial education, training, seminars)?

- ▶ YES (*Please include 1) a short description; 2) link for more information*)
- ▶ NO (skip)

8. To your knowledge, are there specific initiatives looking to upskill competences of professionals in order to deal with new challenges (e.g. created by digital media, political crisis – war, refugees)?
  - ▶ YES (*Please include 1) a short description; 2) link for more information*)
  - ▶ NO (skip)
9. Is your organisation a provider of such capacity-building opportunities?
  - ▶ YES (*Please include 1) a short description; 2) link for more information*)
  - ▶ NO (skip)
10. From your perspective, what are the types of competences youth workers and professionals would need more support with? [open-ended]

### **Research and literature**

11. Are there any recent studies, research, publications or other web-based resources that you would recommend to be used in the literature review? [open-ended]

Young people in Europe face many pressures that have an impact on their mental health and well-being. Some of these factors include socio-economic status, job precarity or lack of financial stability, ongoing geopolitical conflicts, climate change, as well as digital transformation and increased social media use. In this context, the study provides insights into three main dimensions: policies, services and the competences of professionals supporting young people. It presents evidence from 24 countries, as well as work done by major European and international organisations.

Based on a combination of desk research and data collected through an online survey, this study draws attention to the impact of global polycrises on young people's mental health and well-being. It presents a general overview of European, international and national policies and legal frameworks designed to advance young people's mental health and well-being. It also gives a glimpse into an ever-changing landscape of different services and tools available to young people, offering an inventory of existing practices. It analyses the main providers of mental health services, the main age groups for which services are designed and the formats in which they are delivered (online, on premises or hybrid). Finally, it explores the competences of those working in the field, including youth workers, school counsellors and other professionals, and available tools, competence frameworks and capacity-building opportunities.

The authors conclude with a set of recommendations around policies, services, competences and research in the area of youth mental health and well-being, acknowledging the noteworthy efforts and emerging challenges.

The Member States of the European Union have decided to link together their know-how, resources and destinies. Together, they have built a zone of stability, democracy and sustainable development whilst maintaining cultural diversity, tolerance and individual freedoms. The European Union is committed to sharing its achievements and its values with countries and peoples beyond its borders.

<http://europa.eu>

The Council of Europe is the continent's leading human rights organisation. It comprises 46 member states, including all members of the European Union. All Council of Europe member states have signed up to the European Convention on Human Rights, a treaty designed to protect human rights, democracy and the rule of law. The European Court of Human Rights oversees the implementation of the Convention in the member states.

[www.coe.int](http://www.coe.int)



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