



YouHEALTH

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Prepare young to face
health and natural
disasters



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YOUHEALTH

The YouHEALTH Project

Prepare young to face health and natural disasters

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WP2: “An Ecosystem Mapping Framework for Mental Health”:
Empowering Young Adults to Thrive during Public Health Crises and
Natural disasters.

Overall Report



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1. Introduction

In supporting the development and well-being of young people, particularly those facing socio-economic challenges, youth workers and social workers play a crucial role. The need for additional training for professionals working with young people has become increasingly apparent as the world becomes more complex and factors such as technological advances, cultural diversity and mental health issues affect young people's lives.

In times of public health crises and natural disasters, young adults face significant psychological, emotional and social challenges. A comprehensive understanding of the training needs, gaps and requirements of key audiences such as teachers, adult educators, youth workers and relevant service providers is essential to effectively support them. These professionals play a crucial role in equipping young adults with the tools and skills needed to build resilience and thrive when faced with adversity. Identifying specific areas of training – such as mental health support, crisis communication and resilience-building strategies – can help fill existing gaps and ensure that those working with young people are prepared to provide the necessary guidance and support during such crises.

Desk research and a focus group to gather insights from professionals working with disadvantaged young people were carried out to address this need. In addition, in order to gain a comprehensive understanding of the current landscape and necessary improvements, good practices were collected from the project partners, ZIB (Germany), Drustvo Mozaik (Slovenia), Tepebaşı Sosyal Yardımlaşma ve Dayanışma Vakfı and Mozaik İnsan Kaynakları Geliştirme Derneği (Türkiye), University of Innsbruck (Austria).

This report highlights the importance of improving communication, cultural competence, psychological insight and technological skills and examines the training needs of youth workers and social workers in project countries, Austria, Germany, Slovenia and Türkiye. By addressing these needs, professionals will be better equipped to support young people at a critical time in their development and to promote resilience and inclusion in a rapidly changing world.

2. Methodology

Two key components – theoretical research and guided interviews with youth workers from different sectors – underpin the methodology of this project. The primary objective was the identification of the available scientific knowledge, perspectives and empirical findings on youth work in the partner countries. Through focus groups with professionals actively working with young people, this theoretical foundation provid-



ed the basis for practical insights.

➤ Theoretical research:

Existing literature and scientific data on youth work in the partner countries were collected and analysed as a first step. This helped to understand the context, challenges and good practices already documented in working with young people in different regions.

➤ Guided focus groups:

Guided interviews with a diverse group of professionals working directly with young people were conducted as the second component. Participants were selected from a wide range of organisations. This ensured that a variety of perspectives were included. These included the following:

- Volunteers working in youth organisations,
- Those working in youth centres
- staff from counselling centres in the state and private sector, and
- Those working in out-of-home placement centres (where young people are placed externally).

The participants described themselves using titles such as educator, social worker, youth worker, youth counsellor or youth coach. The inclusion of youth centres working exclusively with young people at risk of exclusion is problematic. These professionals face significant challenges related to the cumulative problems of refugee and migrant youth, making their insights particularly valuable. Many youth workers reported feeling overwhelmed and unsupported by national and local policies, highlighting a significant gap in the current system.

The guided focus groups were structured around key themes relevant to the project. Emphasis was placed on creating a comfortable and open atmosphere. In this way, youth workers were able to freely discuss their views on a range of issues, for example:

- The current situation of marginalised and disadvantaged young people in project partner countries
- The impact of pessimistic public diagnoses of 'youth' and how these views are (or are not) in line with the real life experiences of young people.
- Skills relevant to youth work, particularly in times of crisis and disaster, that young people possess.
- The influence of social media on young people's perceptions of crises and disasters.
- The social challenges faced by refugee and displaced young people and the specific methods used by youth workers to address these.
- The relevance and effectiveness of current methods and approaches in youth work, the successes that have been achieved so far and how youth work could be



further developed in the future.

- The impact of the coronavirus crisis on young people's lives was an important part of the discussions. Almost all interviews touched on the profound impact of the pandemic, although from different perspectives.

A comprehensive understanding of the challenges, successes and areas for improvement in youth work was achieved through this two-pronged methodology, combining theoretical research with practical insights from practitioners. This approach ensured that the project's findings were both academic and practice-based.

3. Literature Review

Analysis of the current situation of young people and the needs of youth workers in relation to mental health and crisis situations in project partner countries

Mental health is vital for overall quality of life and productivity. According to the WHO, mental health enables individuals to cope with life's stressors, work effectively, and contribute to their communities. Maintaining mental health has broad societal benefits, contributing to economic stability and social justice. Conversely, mental illnesses place a financial strain on societies.

Socioeconomic factors play a critical role in shaping mental health, particularly for young people. Genetic, familial, and social factors, along with crises such as the COVID-19 pandemic, significantly influence mental health. The pandemic notably increased symptoms of depression among children and young people, with those from disadvantaged families being more affected. Moreover, there is a strong correlation between education, social support, and mental health. Higher educational attainment and stronger social support lead to better mental health outcomes, while individuals from lower social strata are more vulnerable to emotional problems. Women and men with strong social networks show significantly better mental well-being.





The profound impact of the crisis on the mental health and well-being of young people in **Austria** is highlighted by studies conducted during and after the COVID-19 pandemic. Symptoms such as depression, anxiety about the future and suicidal thoughts have increased significantly among children and adolescents since the start of the pandemic, according to a study by the Danube University Krems and the Medical University of Vienna in 2021. A similar study by the Youth Trend Monitor in 2022, which surveyed 2,500 young people aged 14 to 24, confirmed a general deterioration in their mental health. They reported feelings of hopelessness, depression, anger, stress and anxiety about the future.

In spite of these challenges, some studies, such as the 2021 research by Simon Schnetzer, point to positive trends. More than two-thirds of young Austrians found support from family and friends, showing resilience in dealing with the crisis. Furthermore, the “coronavirus generation” experienced personal stress but was not completely lost, as is often portrayed in public discourse, according to the 2022 study by the Institute for Youth Research in Vienna.

Austria has a well-developed health care system. However, there are inequalities in mental health services for young people, especially among vulnerable groups such as those from low-income backgrounds and migrants. In Austria, a combination of public health insurance and private services provides access to mental health services for young people. However, there is a shortage of adolescent-specific mental health professionals, particularly child and adolescent psychiatrists, resulting in long waiting times for services.

Mental health statistics for young people: According to Austrian health authorities, there are approximately 1.03 million people between the ages of 14 and 24 living in Austria. They represent a key population group in need of mental health services. Approximately 592,000 young adults aged 25-29 also face mental health challenges. Unemployment, income insecurity and undeclared work contribute to these problems.¹

Empowering young adults to thrive during public health crises and natural disasters is essential. In particular, understanding the training needs and gaps faced by those supporting them is essential. To achieve this, it is crucial to assess the needs of teachers, adult educators, youth workers and relevant service providers. In order to address the psychological, emotional and practical challenges faced by young people in crisis, these professionals need specific training. Lessons learned from these assessments can inform the development of comprehensive training programmes that enable youth workers and educators to better support young adults in overcoming challenges and building resilience to crisis.

¹ [Bundesministerium für Soziales, Gesundheit, Pflege und Konsumentenschutzhttps://www.sozialministerium.at/dam/mental..](https://www.sozialministerium.at/dam/mental..)

In Slovenia, there is no specific national definition of young people with a disadvantaged background or young people with fewer opportunities, although the latter are mentioned in Slovenian legal and policy documents. The Resolution on the National Youth Programme 2013–2022 mentions young people with fewer opportunities mainly regarding their social exclusion or need for social inclusion.² The Office of the Republic of Slovenia for Youth (Urad Republike Slovenije za mladino) promotes the inclusion of young people with fewer opportunities. These are usually defined as young people with special needs and socio-economically disadvantaged young people (including refugees).³ With regard to the socio-economic disadvantage of young people, Tadeja Mesojedec and others identify the following two groups as particularly vulnerable: Working young people whose low personal income makes them more vulnerable to poverty than other groups in society – the so-called working poor; and young people who are neither in employment nor in education or training – the so-called NEET.⁴ There is also a shortage of mental health professionals in the country, which makes it difficult for young people to receive help in a timely manner.⁵ Slovenia has recognised the growing mental health crisis among its youth.⁶ It has begun to integrate mental health education into schools. However, to ensure equitable access across different socio-economic groups, the lack of resources remains a significant barrier.⁷

Moreover, the proposal for a new resolution on the National Youth Programme 2024–2032 in the light of the consequences of the COVID-19 pandemic points out that the consequences of the coronavirus crisis are not so much an increase in general youth unemployment, but rather an increase in the difficulties faced by vulnerable, long-term inactive young people, including mental health problems.⁸

Disadvantaged young people in **Türkiye** often face multiple challenges. These include economic deprivation, family problems, unequal educational opportunities and social exclusion. These young people mostly come from low-income families. They do not have access to adequate educational opportunities and face social barriers such as gender inequality and ethnic discrimination. In the area of education,

² »Resolucija o Nacionalnem programu za mladino 2013–2022 (ReNPM13–22),« in: Uradni list RS, št. 90/13, published 30 October 2013, <https://pisrs.si/pregledPredpisa?id=RESO93>.

³ Youth Wiki, »Slovenia,« accessed 21 June 2024, <https://national-policies.eacea.ec.europa.eu/youthwiki/chapters/slovenia/overview>

⁴ Tadeja Mesojedec et al., *Mladi in socialna vključenost* (Ljubljana: Mladinski svet Slovenije, 2014), 9.

⁵ World Health Organization, *Looking back, looking forward: Rapid assessment of the mental health system in Slovenia: Report of a virtual mission by the WHO Regional Office for Europe* (September 2020), <https://www.zadusevnozdravje.si/wp-content/uploads/2021/04/WHO-mission-report-on-mental-health-in-Slovenia-2020-1.pdf>.

⁶ Program Mira, »Duševno zdravje v neenakopravnem svetu«, accessed 10 October 2024, <https://www.zadusevnozdravje.si/aktualno/dogodki/2021/10/dusevno-zdravje-v-neenakopravnem-svetu/>.

⁷ Program Mira, »Duševno zdravje v neenakopravnem svetu«, accessed 10 October 2024, <https://www.zadusevnozdravje.si/aktualno/dogodki/2021/10/dusevno-zdravje-v-neenakopravnem-svetu/>.

⁸ Urad Republike Slovenije za mladino, *Predlog Resolucije o Nacionalnem programu za mladino za obdobje 2024–2032*, 33.



disadvantaged young people are often educated in low quality schools, which has a negative impact on their academic performance.

The study investigated the psychological wellbeing and changes in mental health of young people living in Turkey. Using an anonymous online survey, 1240 people aged 15–25 from these two countries were recruited.

The outbreak of COVID-19 and the pandemic response have had a strong impact on the well-being and mental health of individuals. The rapid transmission and death caused by COVID-19, the limited knowledge of the threat, the lack of effective treatments and the strict quarantine restrictions, such as suspension from school and physical social networks, have led to multiple mental health problems such as fear, anxiety, depression and sleep problems across the population. The psychological responses of children and adolescents during a pandemic are quite similar to those of adults, but the age, level of understanding and innate coping skills of young people play a crucial role, leading to poorer outcomes on subscales of anxiety, depression, self-control and general health.⁹

The main causes of educational inequality are inadequate teacher training, poor school infrastructure and lack of resources. In addition, economic pressures and family financial difficulties cause many young people to drop out of school and turn to child labour. As regards employment, disadvantaged young people are disproportionately affected by unemployment. These young people find it difficult to find work due to a lack of education and adequate professional skills. In Turkey, mental health services are less accessible. This is particularly true for young people from low-income families and rural areas. There is also a significant stigma attached to mental health. This discourages many from seeking help. Young people often do not receive the care they need because the mental health system is under-resourced. The Turkish government has begun implementing programmes to raise awareness of mental health and reduce stigma. However, gaps remain, particularly in addressing the needs of vulnerable groups such as refugees and internally displaced persons (IDPs), who often face additional challenges such as trauma and language barriers. In addition, many disadvantaged young people are forced to work in informal and precarious jobs. As a result, they are deprived of their social security rights.

Germany has a well-developed mental health infrastructure. However, inequalities in access exist, particularly among migrants and refugees. Young people from migrant backgrounds are often prevented from accessing mental health services by language barriers, cultural differences and stigma. In addition, young people from low-income families experience long waiting times for treatment due to a shortage of adolescent mental health specialists. Germany has increasingly adopted digital

⁹ <https://www.mdpi.com/1660-4601/17/23/9111>.



mental health interventions, such as internet-delivered cognitive behavioural therapy (I-CBT), which has shown promise in reaching young people, particularly those from diverse backgrounds who may not seek out face-to-face therapy. The country addresses mental health challenges, particularly for disadvantaged youth, through various national policies. These include the Federal Child and Youth Plan, the Educational and Participation Package, and youth welfare and employment initiatives. These programs aim to enhance social inclusion, reduce inequalities, and improve mental well-being among young people facing socio economic challenges. Additionally, mental health initiatives focus on raising awareness and improving access to mental health services for young people. Youth organizations in Germany play a key role in supporting the social and mental inclusion of young people, particularly those facing socioeconomic disadvantages. These organizations target various vulnerable groups and implement activities that address the challenges these youth face, aiming to promote mental well-being, social integration, and equal opportunities.

All of these initiatives have become essential, especially after the period of Covid 19. Several German studies found similar results to Austria regarding the impact of the pandemic on young people’s general mental health: during the COVID-19 pandemic, children and adolescents showed a steady increase in emotional problems, a decrease in quality of life, and reported more frequent symptoms of depression and anxiety.¹⁰

Young people who face these challenges often struggle with low self-esteem, a lack of motivation and a sense of hopelessness, which can hinder their ability to reach their full potential. To demonstrate the seriousness of the situation, the initiative would highlight real-life stories and data.

Target groups

Economically Disadvantaged Youth	These are young individuals from low-income families who lack access to education, extracurricular activities, and recreational resources.
Youth with Disabilities	Youth with physical, mental, or learning disabilities who require tailored support and inclusive environments.
Migrants and Refugees	Young migrants and refugees who need help with integration, language skills, and adjusting to cultural norms.
Youth from Minority Ethnic Groups	These young people often face discrimination and barriers to social inclusion.
At-Risk Youth	Individuals at risk due to homelessness, substance abuse, or involvement with the juvenile justice system.

¹⁰ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10103038/#>



Main Challenges Faced by Professionals:

Professionals working with disadvantaged youth encounter numerous obstacles, including

- **Limited resources:** Insufficient funding and access to materials.
- **High workload:** Professionals often face burnout due to the high demand for their services.
- **Cultural and language barriers:** Challenges arise when working with migrant populations.
- **Mental health crises:** Increased mental health issues in youth, exacerbated by family and social dynamics.
- **Educational disparities:** Varied learning levels, particularly post-lockdown, require tailored educational strategies.
- **Bureaucratic hurdles:** Navigating complex processes to access necessary services.
- **Infrastructure:** Inadequate physical spaces, such as poorly ventilated and small rooms, make it difficult to adhere to health protocols and serve larger groups.

Needs of Youth Workers

Specialized training	Education on how to support mental health issues, especially post-pandemic
Improved infrastructure	Facilities that meet safety and health requirements, such as proper ventilation and adequate space.
Support systems	More mental health services and resources to help manage the diverse challenges of working with disadvantaged youth.



Current Tools and Methods of youth organisations and other actors to support the social and mental inclusion of young people (with fewer opportunities)

- **Mental Health Services:**

Offering specialized mental health clinics for young people. Psychotherapeutic practices provide individual and group therapy.

- **Crisis Intervention:**

Hotline and Services offer immediate mental health support.

- **Support Groups:**

Self-help groups for depression and community-based youth groups provide peer support.

- **School-Based Support:**

Social workers and anti-bullying programs are present in schools to address mental health challenges.

- **Recreational Activities:**

Youth clubs, sports associations, art, and music therapy serve as community-building activities that support emotional well-being.

Suggested Tools and Services

Counseling Centers	Youth counseling centers provide guidance, educational support, and mental health counseling
Online Resources	Platforms offering counseling services via email or forums for peer interaction
Non-Governmental Organizations (NGOs):	Organizations offering hotlines and support services for youth and families.
The National Youth Council	which acts as an umbrella organisation for youth organisations operating at national level.
Municipal Youth Councils	as a unifying and representative body of local youth organisations or local units of larger youth organisations, are established in each municipality.

Support and Integration Needs of Youth Workers:

In supporting the mental, social and emotional development of young people, youth workers play a crucial role. They need comprehensive support and integration into wider social and educational systems in order to be effective.



Training Focus Areas:

Communication Skills:

Enhancing the ability to effectively communicate with young people

Cultural Competency:

Understanding cultural and social factors that influence youth behavior

Psychological Insights:

Learning about developmental psychology to better understand emotional and cognitive development stages

Implications for Project Development

- **Training Program Design:** A comprehensive training program should be developed, addressing communication skills, cultural sensitivity, technology, and psychological insights to meet the participants' needs.
- **Inclusive Approach:** The training should consider the diverse backgrounds of participants and incorporate culturally sensitive materials.
- **Ongoing Support:** Follow-up sessions and continuous support should be provided to help integrate new skills into practice.
- **Feedback Mechanisms:** A system for collecting feedback from participants should be established to ensure the training program evolves and remains relevant.

Recommendations for Further Research

1. **To bring together the best available evidence on the state of and trends in the mental health of young people, in particular those who are most at risk.**

The consolidation of comprehensive and up-to-date data on young people's mental health. This would involve identifying patterns, trends and inequalities in mental health by reviewing existing research, reports and statistics. This may include meta-analysing existing studies,

consulting mental health professionals and engaging with young people through surveys or interviews to gain a clearer picture of their mental health.

2. **Understand the reality of young people experiencing poor mental health and social exclusion and how this holds them back.**

Social exclusion is both a cause and a consequence of poor mental health. Young people with mental health problems often face stigma, isolation and a lack of support networks, which can exacerbate their condition. The aim of the initiative is to



understand how mental health problems, in combination with social exclusion, limit young people’s access to education, employment and community involvement. The focus will be on the role of factors such as stigma, discrimination and social isolation in their exclusion.

3. **Develop a common understanding of the challenges faced by young people who experience poor mental health and social exclusion, as well as higher levels of unemployment, undeclared work and income insecurity.**

Young people with mental health problems are often more likely to be unemployed, to work in low-paid jobs, or to be in precarious work situations (temporary or part-time jobs with few benefits). Mental health problems can be exacerbated by economic insecurity. When young people are unable to secure decent work or a stable income, they experience increased stress, anxiety and depression. This further reduces their ability to participate in the labour market or education.

A common understanding and strategies to address the interlinked issues of mental health, social exclusion and economic vulnerability can be developed by bringing together multiple stakeholders – governments, mental health organisations, employers and young people themselves.

4. Good practices

The project partners collected 2 good practices, one of which is presented in detail below.

Austria

Title	Theme-centred educational work within the framework of open youth work of the Association of Vienna Youth Centres
Year	2023
Funding Organisation	Association of Viennese Youth Centres in Vienna
Analysis of best practice	This project integrates cultural, generational and gender aspects into educational youth work, focusing on the experiences and needs of young people. The thematic educational work focuses on equipping young people with critical social skills and knowledge to cope with crises. By incorporating biographical, cultural and gender experiences into the curriculum, the project ensures the inclusion of diverse perspectives and the unique needs of each young person.



<p>Key activities</p>	<p>Organising educational programmes on current crises, risks and disasters affecting young people. Using non-formal education settings to promote informal learning environments. Engaging young people in discussions on coping strategies related to mental health, crisis management and everyday challenges. Collaborative learning processes adapted to young people's everyday realities, ensuring relevance and accessibility.</p>
<p>Key achievements:</p>	<p>Recognising and incorporating young people's experiences, perspectives and skills into practical youth work. Developing a life-world approach to youth work that addresses the real challenges young people face. Encouraging active participation in educational programmes that build resilience and social skills. References:</p>
<p>References</p>	<p>Krisch, Richard: Sociospatial Youth Work. Social Pedagogy and Youth Work in Transition, published by the Association of Youth Centres of the City of Vienna (1999). Participation: Theory and Practice of Political Education in Youth Work (2008).</p>

Slovenia

<p>Title</p>	<p>PARK Project</p>
<p>Year</p>	<p>2022-2023</p>
<p>Sponsoring Organisation</p>	<p>Jarše Youth Home Production School (Produkcijška šola Mladinskega doma Jarše)</p>
<p>Target group</p>	<p>Young people with fewer opportunities, mental health problems and those not in education or employment (NEET).</p>
<p>Analysis of best practice</p>	<p>The PARK project is an example of an initiative that combines physical activity, social integration and skill building in a therapeutic and educational environment. There was a particular focus on outdoor activities, which research shows can significantly improve mental health by reducing stress, anxiety and depression. In addition, the project targeted the social and emotional development of participants by promoting teamwork and community involvement. Cultural and intergenerational aspects were incorporated into the project by allowing young people to shape and design the park themselves, fostering a sense of ownership and cultural expression. Gender issues were addressed by ensuring equal participation in all activities, creating a safe, inclusive space for both young men and women.</p>



<p>Key activities</p>	<ul style="list-style-type: none"> • Workshops: • Organisational and planning skills. • Computer skills. • Team building through social games. • Hands-on workshops on tool safety and woodworking. • Visits to local gardens to learn about community space management. • Creation of the park: • Young people designed and created physical structures such as raised beds and a stage for the park. • These activities provided practical experience and skills in construction, gardening and teamwork. • Social integration <p>Young people planned and organised the opening ceremony of the park, inviting local stakeholders, which helped them to build confidence and connect with the community.</p>
<p>Key achievements</p>	<p>Creation of a social space: The park became a quality social space where young people could meet, socialise and engage in healthy outdoor activities.</p> <p>Mental health benefits: The project strengthened protective factors such as resilience, self-esteem and social connections, which are essential for mental wellbeing.</p> <p>Skills development: Participants gained valuable skills in planning, construction, teamwork and organisation that can be transferred to future education or employment opportunities.</p> <p>Community engagement: By showcasing their success to the local community, the young people gained recognition and a sense of achievement, further boosting their self-confidence.</p>

Türkiye

<p>Title</p>	<p>Psychosocial Support Program</p>
<p>Year</p>	<p>2019 – Ongoing</p>
<p>Sponsoring Organisation</p>	<p>Ministry of Education</p>
<p>Target Group</p>	<p>Communities affected by disasters or emergencies, including young people, educators and community members.</p>
<p>Best practice analysis</p>	<p>This programme emphasises psychological first aid, community mobilisation and psycho-education, particularly in times of crisis such as natural disasters or emergencies. Cultural sensitivity and inclusion are key aspects as the programme is implemented in different communities with different needs. It also takes into account generational differences, providing tailored support to both young people and adults, and ensuring comprehensive outreach in emergency situations.</p> <p>The programme includes support for staff, recognising the challenges faced by frontline workers such as educators and social workers.</p> <p>Gender issues are addressed by ensuring that interventions are inclusive and responsive to the specific mental health needs of men, women and children affected by crises.</p>



<p>Key activities</p>	<ul style="list-style-type: none"> • Psychological first aid: Providing immediate support to people who have experienced trauma during a disaster or emergency, with the aim of reducing psychological distress and preventing long-term mental health problems. • Needs assessment and resource mobilisation: Identifying the specific needs of affected communities and mobilising local resources for psychosocial interventions. • Community mobilisation: Involving local communities in the recovery process to strengthen collective resilience and support structures. • Psycho-education: Educating individuals and communities about mental health, stress management and coping strategies during emergencies. • Employee support: Providing psychosocial support to employees, such as teachers, working with affected communities, recognising their key role in recovery efforts. • Social improvement: Strengthening social ties and support networks within communities to facilitate post-disaster recovery and resilience.
<p>Key achievements</p>	<ul style="list-style-type: none"> • Prevention of mental disorders: The programme aims to prevent the onset of mental disorders through timely interventions during the disaster/emergency process. • Empowerment and capacity building: Participants are empowered to realise their capacities and develop skills to cope with future crises, thereby building long-term resilience. • Sustained support: By providing ongoing psychosocial services, the programme ensures that those affected by disasters can gradually return to normal life or adapt to a new reality.

Germany

<p>Title</p>	<p>Freizeitstätte Haus der Jugend</p>
<p>Year</p>	<p>2024</p>
<p>Funding Organisation</p>	<p>Hamburg Youth Welfare Office</p>
<p>Target group</p>	<p>Young people with mental health problems and their families</p>
<p>Best practice analysis</p>	<p>The programme at the Freizeitstätte Haus der Jugend focuses on integrating therapeutic support and recreational activities in a holistic approach to youth work. Recognising the importance of addressing mental health from multiple angles, this initiative provides young people with the tools to develop coping skills, manage stress and engage socially within a supportive community. It also includes family support, ensuring that mental health is seen as a family and community issue rather than an isolated individual problem.</p>



<p>Key activities</p>	<ul style="list-style-type: none"> • Therapeutic support: • Individual and group therapy: Delivered by trained psychologists and counsellors, these sessions help young people address their mental health issues in a safe and structured environment. • Recreational Activities: • Art therapy, music sessions, sports and outdoor activities: These activities promote self-expression, stress reduction and physical well-being while providing a non-judgmental space for young people to creatively explore their emotions. • Workshops and skills development: • Stress management and social skills development: Regular workshops equip participants with essential skills to manage stress, anxiety and social interactions, fostering resilience and adaptability.
<p>Key achievements</p>	<p>Improved mental health: Participants reported significant reductions in symptoms of depression and anxiety, as well as overall improvements in mental health and emotional well-being.</p> <p>Improved coping skills: Young people develop better coping strategies for managing stress, emotional regulation and life challenges, enabling them to deal more effectively with future difficulties.</p> <p>Social integration: Participants experience improved social skills and a stronger sense of belonging as they become more confident participants in group activities and community events.</p> <p>Family dynamics: Participants' families are better equipped to understand and support their children's mental health, leading to improved family relationships and a more cohesive home environment.</p>

5. Analysis of focus groups with youth workers and social workers

In Türkiye, focus groups were conducted by 2 Turkish partners.

➤ **Tepebaşı Sosyal Yardımlaşma ve Dayanışma Vakfı**

A total of 11 interviews and open discussions were conducted with professionals working with young people, providing insights into their experiences and challenges. Participants included teachers, trainers, social workers and youth workers from different institutions. These institutions were the Ministry of Youth and Sports, the Ministry of Family and Social Affairs,

Milli Eğitim Bakanlığı (Ministry of National Education), Tepebaşı Public Education Centre, Tepebaşı Family Support Centre and the Ministry of Education.



➤ **Mozaik İnsan Kaynakları Geliştirme Derneği**

In Salıpazarı Gençlik Merkezi, a total of 13 youth workers, 4 men and 9 women, participated in recent activities. As dedicated youth workers, these participants work with young people to provide mentorship, organise programmes and create a supportive environment for their development. Their work involves facilitating various educational, social and recreational activities designed to empower young people and help them overcome the challenges they face. This gender-diverse group of professionals is instrumental in promoting inclusive and equitable youth development within the community.

In Germany, ZIB implemented the focus group

The focus group for the project consisted of ten participants, providing a range of perspectives that contributed to the richness of the discussions. The group consisted of seven women and three men, ensuring that both male and female perspectives were well represented. In terms of age, the majority of participants were between 35 and 55 years old, with seven individuals falling within this age range. In addition, two participants were between 25 and 35 years old, while one was over 55 years old, allowing for an exploration of generational differences in experiences and opinions. Culturally, the group was diverse, with four participants identifying as German and six coming from foreign backgrounds. This mix of cultural perspectives played a crucial role in providing a more holistic understanding of the issues at hand, particularly in discussions related to identity, integration and intercultural challenges.

In Austria, the University of Innsbruck implemented the focus group

A total of 15 interviews and open discussions were conducted with individuals working in different areas of youth work. The majority of participants are involved in open youth work, which takes place in non-formal settings. These professionals come from a variety of backgrounds and organisations and provide valuable insights into their experiences and practices in working with young people. The interviews covered a wide range of topics, including strategies for engaging young people, addressing mental health issues and promoting social inclusion.

The following people and organisations took part in these interviews:

- Representatives from local youth centres,
- Social workers from community support programmes
- Trainers specialising in youth development
- Youth workers involved in outreach programmes
- Staff from national youth organisations,



In Slovenia, Drustvo Mozaik carried out focus group.

Seven participants took part in a focus group, six women (86%) and one man (14%). Their age ranged from 20 to over 61 years old. Their level of education varied, with one having primary education, one having high school education, four having a bachelor's degree and one having a master's degree. Four participants (57%) were social workers and three (43%) were youth workers, with experience ranging from 5 months to 23 years.

Most worked in non-governmental organisations (71%), the remaining two in public organisations. While one participant had no relevant training, the other six had received such training. The activities carried out in their organisations included individual and group work, learning support and psychosocial support, with some also involved in administrative tasks such as writing reports and leading groups.

Most respondents emphasised that multiple crises, risks and disasters have a significant impact on young people's life plans. Young refugees, in particular, face greater challenges due to their limited access to basic social resources and the compounded nature of their problems. These cumulative crises – from economic instability to social exclusion – exacerbate their vulnerability compared to local youth.

The results of the focus groups

Profile of the target group that they are working with

Youth workers who participated in the focus group described the young people they work with as primarily from socially disadvantaged groups. These young people often face a range of difficulties, including being victims of domestic violence and neglect within their families. Many also experience institutional neglect and various forms of discrimination. The target group is also characterised by functional and media illiteracy, which makes it difficult for them to participate fully in modern society. A focus group with youth workers and social workers revealed a unanimous consensus on the need for additional training to improve their effectiveness in working with young people. The participants, all of whom had experience of working with young people, emphasised that their call for more training was based on real-life challenges they had encountered. This collective insight underlines the importance of ongoing professional development to equip them with the tools and strategies necessary to better support and meet the needs of the young people in their care.

Moreover, respondents were keen to emphasise that the young people they work with are not passive victims. Despite the challenges, many young people actively develop strategies to navigate and cope with these crises. This resilience, they pointed out, contrasts sharply with the often negative public portrayal of young people, particularly refugees. The dominant pessimistic narratives that portray these young people



as helpless were criticised as being out of touch with their lived experiences. In fact, these narratives can be counterproductive, sometimes fostering resistance among young people who feel misrepresented and underestimated in their ability to adapt and respond proactively to adversity.

How did the disaster or emergency affect the daily lives, relationships, and general well-being of the young people you work with?

The disaster, such as the COVID-19 pandemic, had a significant impact on the daily lives, relationships, and general well-being of the young people I work with. One of the most noticeable effects was the strain it placed on their relationships with parents. Many young people expressed a strong desire to spend more time with their friends, which often led to tensions at home as they felt confined and isolated. This placed great pressure on parents, who needed to exercise considerable patience in navigating these new dynamics.

The situation underscored the need for psychological support, not only for the young people but also for their families, to help improve communication and manage the heightened emotional strain. In addition, the lack of social interaction affected the general well-being of these young people, leading to feelings of frustration, loneliness, and, in some cases, increased anxiety. The absence of regular routines, such as school and extracurricular activities, further disrupted their sense of normalcy, making the need for support even more critical in fostering emotional resilience and maintaining family harmony.

Did disadvantaged young people have access to mental health support or resources during the crisis? If so, how helpful were these services in your experience?

During the crisis, and particularly during the transition to virtual schooling, disadvantaged young people faced significant barriers to accessing mental health support. The sudden change in learning environment introduced new psychological stressors, such as isolation, lack of structure and difficulties in engaging with online learning, which were largely overlooked. Many disadvantaged young people, already struggling with fewer opportunities and resources, were particularly affected by the lack of face-to-face interactions and physical activities such as sports and school assemblies, which are essential for their mental well-being.

Their families' preoccupation with economic survival due to widespread job losses exacerbated the crisis for these young people. Many families were more focused on meeting basic needs, leaving little room to address their children's mental health needs. As a result, disadvantaged young people had limited access to mental health resources or support. The services that were available were often not tailored to their specific needs or were difficult to access due to the digital divide. In many cases, the mental health services that were available weren't fully effective because they



couldn't address the unique pressures these young people face, exacerbating their feelings of stress, anxiety and isolation.

Did you notice any changes in the mental health symptoms or coping mechanisms of disadvantaged young people after the disaster/emergency? If so, can you describe these changes?

According to participants, after the crisis, many disadvantaged young people increasingly turned to the internet, social media and virtual games to meet their social needs. These platforms became their primary means of connection, offering a sense of community and escape at a time of isolation. However, this shift has also brought challenges. Excessive reliance on virtual interactions led to reduced face-to-face contact with family and friends. This further distanced them from real-world support networks.

The internet provided a temporary coping mechanism. But it also highlighted the need to regulate its use. Over-reliance on digital communication can have long-term effects on mental health, such as exacerbating feelings of isolation and anxiety. As part of the recovery process, it's important to emphasise the importance of face-to-face contact and community involvement. Rather than normalising internet use as a primary mode of social interaction, encouraging young people to reconnect with family, friends and their local communities can promote healthier coping mechanisms and improve their overall wellbeing.

What strategies or interventions have you found to be most effective in helping disadvantaged young people cope with stress, anxiety, or other mental health problems during and after the crisis?

These young people often lack the social and educational opportunities needed to cope with everyday challenges and require additional support to overcome these barriers. Youth workers stressed the importance of tailored interventions that address both the emotional and practical needs of these vulnerable young people. During COVID-19, youth workers observed several psychological and emotional challenges among young people with fewer opportunities. Many of these young people experienced anxiety and confusion, largely due to their inability to control the rapidly evolving situation. This was exacerbated by inequalities in access to education, as the distance learning infrastructure did not adequately cater for those from disadvantaged backgrounds, leaving them further behind academically. As the pandemic entered its second wave, youth workers noticed a shift towards apathy and despair. The sense of disconnection from society deepened, further isolating these individuals. Prolonged social isolation, combined with uncertainty about the future, led to increased emotional distress.

In addition, youth workers observed that the media illiteracy of these young people



hindered their ability to critically evaluate the flood of information they received. This made it difficult for them to discern the accuracy and relevance of news, adding to their confusion and anxiety during the crisis. Some youth workers also reported that these young people were faced with challenges in terms of family dynamics, as the pressure of the pandemic led to stress within households. Many young people were in environments where there was an increase in domestic tensions, with consequences for their mental well-being. The pandemic also exacerbated existing inequalities. Disadvantaged young people had fewer social safety nets to fall back on, making it more difficult for them to access mental health resources and support.

When asked about the most effective strategies or interventions for helping disadvantaged young people cope with stress, anxiety, or other mental health problems during and after a crisis, youth workers emphasized several key approaches:

One of the most important strategies is establishing long-term, in-depth relationships with the young people they work with. Building trust over time enables young people to open up about their hardships, fears, and feelings. A mutual, individual conversation between a youth worker and a young person is crucial, allowing the youth to feel heard and understood in a safe environment. This personalized approach fosters trust, making it easier for the young person to share their experiences and emotions, and receive guidance tailored to their specific needs.

Participants also highlighted the importance of direct work with young people who have fewer opportunities. This includes offering continuous support and ensuring that these youths have access to resources that can help them manage their mental health challenges. Additionally, advocacy plays a vital role, as youth workers often act on behalf of disadvantaged young people when dealing with institutions. By advocating for their rights and needs, youth workers help remove barriers to accessing mental health services, education, or employment, ensuring these young people receive the necessary support to thrive.

These interventions—relationship-building, individual conversations, direct support, and advocacy—were cited as critical in helping disadvantaged youth manage the emotional and psychological impacts of crisis situations.

What barriers or challenges did disadvantaged young people face in seeking or receiving mental health support after the disaster/emergency

During the recent pandemic, young people, already grappling with the challenges of adolescence, exhibited noticeable behavioral shifts. Many became more rebellious, particularly toward their parents, as they struggled to cope with the uncertainty and restrictions. This rebellion often reflected a deeper need for socialization and connection, as young people were largely isolated from their usual social environments.



The situation highlighted the importance of parental attention and guidance. There was a growing need for parents to be more involved in their children's lives, not just in terms of supervision but in fostering healthy social connections. Given that young people tend to trust and confide in their friends more than their parents, ensuring that they were forming positive relationships became crucial. Parents were encouraged to support their children in maintaining connections with peers who would have a constructive influence, helping them navigate the emotional turbulence brought on by the crisis.

The pandemic underscored the delicate balance between independence and guidance that is critical during adolescence, especially during times of crisis.

How did families, peers, or community members contribute to the mental health recovery process of disadvantaged young people?

Families, peers and community members played a crucial role in the mental health recovery of disadvantaged young people by helping to restore normality to their lives. Returning to school was a key factor, providing structure, routine and opportunities for social interaction that had been lost during the lockdown. Engaging in physical activity and sport also helped to relieve stress and rebuild peer relationships, contributing positively to both physical and mental wellbeing.

Re-establishing social contacts and events allowed young people to reconnect with friends and community members, which was essential in combating feelings of isolation. In addition, effective communication within families, where parents and carers could openly discuss the emotional impact of prolonged lockdown, further facilitated recovery. These conversations helped young people to process their experiences and gradually regain a sense of stability.

Overall, these collective efforts - restoring routines, encouraging physical activity and promoting open communication - were crucial in supporting the mental health recovery of disadvantaged young people.

Have disadvantaged young people participated in mental health awareness or resilience-building programs following the disaster/emergency? If so, what were their experiences?

Following the disaster or emergency, direct participation of disadvantaged young people in mental health awareness or resilience-building programs was generally limited. However, there was a widespread consensus among youth workers and community members that schools and communities should have organized such programs. These initiatives would have been instrumental in helping young people transition back to normalcy and equipping them with the tools to manage future crises.



The lack of structured programs left a gap in mental health support, particularly for disadvantaged youths, who faced greater challenges in coping with the aftermath of the crisis. Had there been resilience-building efforts in place, young people could have benefited from guidance on stress management, emotional regulation, and community reintegration. The consensus highlights the need for proactive mental health and resilience programs to not only address the immediate psychological impact but also to prepare youth for future challenges.

What recommendations do you have for improving mental health support specifically for disadvantaged young people in future disaster/emergency situations?

- To address the mental health needs of students in crisis, schools need to be better equipped. This includes having professional psychological support available on site, with counsellors trained to deal with trauma, anxiety and behavioural changes.
- Implementation of structured mental health awareness and resilience-building programmes that specifically target disadvantaged youth. Stress management, coping strategies and emotional regulation should be emphasised in these programmes. In particular, young people from low-income or marginalised communities, who often face additional barriers to accessing mental health care, should be targeted in outreach efforts.
- The need for professional intervention is highlighted by the increasing rebelliousness and behavioural changes among young people, especially in times of crisis. Youth workers and psychologists should work closely with families to address strained parent-child relationships. They should also provide guidance on managing emotional outbursts and rebellious behaviour.
- In times of crisis, many parents of disadvantaged young people struggle to provide adequate mental health support. Providing parents with the tools to effectively communicate with and support their children during stressful times can be achieved by offering workshops or resources for parents. Preventing the worsening of mental health problems in young people can be achieved by strengthening family dynamics.
- Mental health support should also come from community-based initiatives. These should encourage peer interaction and social engagement. In providing safe spaces for young people to reconnect, express themselves and build emotional resilience during and after crises, local authorities and community organisations can play a crucial role.

By addressing these areas, we can ensure that disadvantaged young people receive timely and adequate mental health support, helping them to cope with the immediate effects of disasters while also preparing them for future challenges.



What role do you think schools, community organizations, and government agencies should play in supporting the mental health of disadvantaged young people during and after crises?

Governments, on the other hand, are essential for resources, funding and policy. Their involvement ensures that mental health initiatives are sustainable and reach the most vulnerable populations. Participants agreed that in order to address both immediate mental health needs and long-term resilience, a strong partnership between these agencies would lead to more holistic support for young people. Focus group participants emphasised the crucial role of collaboration between schools, community organisations and government agencies in the mental health support of disadvantaged young people during and after crises. They expressed enthusiasm for collaborative efforts to address these issues. They noted that organising workshops and community activities can significantly engage young people and provide a much-needed support system for their mental health.

Youth workers emphasised the need for a holistic approach to address these issues. This includes long-term relationship building, tailored mental health interventions and advocacy for these marginalised young people. The importance of structured programmes in schools, community organisations and government agencies is highlighted, particularly in the provision of mental health services, resilience-building workshops and support for family dynamics.

6. Conclusion

This report focuses on disparities and gaps in available support in Austria, Germany, Slovenia and Turkey, and effectively addresses the mental health challenges faced by young people, particularly vulnerable populations in the project partner countries. We have reviewed existing research, conducted surveys and held focus groups to capture lived experiences. Within the Youthhealth project, we will implement the following steps to ensure that our initiative meets its objectives.






YouHEALTH

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WP2: “An Ecosystem Mapping Framework for Mental Health”:
Empowering Young Adults to Thrive during Public Health Crises and
Natural disasters.

Overall Report



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