Young Minds Matter:
Mental Health Support
for Youth and Children in Cyprus

Young Minds Matter:
Mental Health Support
for Youth and Children in Cyprus.

**Funded by
the European Union**

**REPUBLIC OF CYPRUS
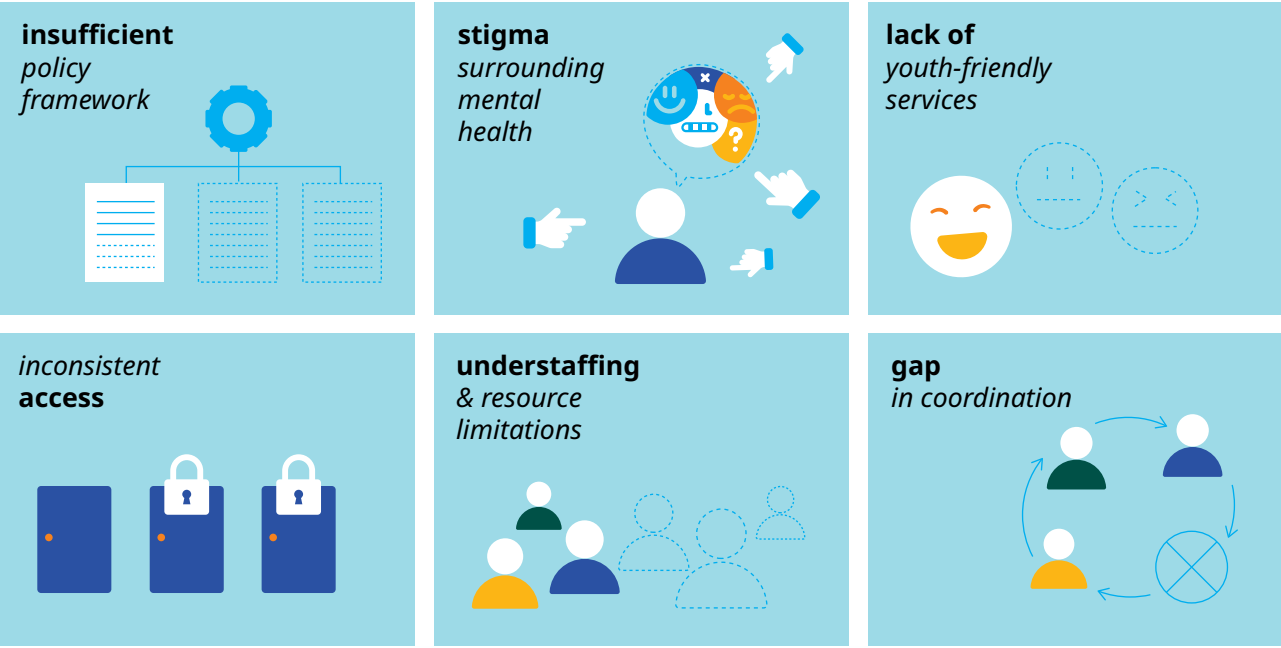MINISTRY OF HEALTH**

unicef
for every child

Executive Summary

The World Health Organisation (WHO) highlights the urgent need for investment in mental health services, especially for youth (WHO, 2021). Adolescent mental health has become a significant public health issue (Westberg et al., 2022), affecting their well-being and prospects. In recent years, particularly after the COVID-19 pandemic, increased attention has been paid to this issue in Europe, prompting awareness campaigns and policy initiatives. This report provides a comprehensive analysis of the youth mental health provision in Cyprus, identifying gaps in existing services and proposing actionable recommendations to enhance mental health outcomes. It aligns with UNICEF's mission to uphold every child's right to health and education by addressing youth mental health needs and the European Union's work on establishing a more comprehensive approach to promote mental health across countries (European Commission, 2023).

The findings are based on a thorough literature review, including government reports, academic studies, and qualitative insights from interviews and focus groups with key stakeholders, including youth. The research focused on mapping Cyprus's mental health promotion and prevention services and identifying critical gaps and challenges. The analysis reveals four areas needing improvement: availability, accessibility quality, and awareness of mental health services. The insights from **diverse youth-focused stakeholders—including youth, representatives of youth organisations, youth practitioners, parents, and mental health professionals**—provided a better understanding of the mental health landscape in Cyprus, revealing key gaps, challenges, and opportunities. These insights underscore the need for targeted enhancements to better support the mental health needs of young people in Cyprus by encouraging their engagement and promoting their voices. The study's recommendations aim to

`Critical gaps & challenges`
`in Cyprus's mental health promotion.`

insufficient *policy framework*	**stigma** *surrounding mental health*	**lack of** *youth-friendly services*
inconsistent **access**	**understaffing** *& resource limitations*	**gap** *in coordination*

(Figure 1)

address these barriers, ensuring that future mental health policies are effective, youth-centred, and accessible while informing the upcoming National Mental Health Strategy.

Below is a synopsis of the key challenges and respective recommendations, as documented **by youth, youth representative organisations, and other stakeholders.**

• Participants pointed out barriers to the *insufficient policy framework* for youth mental health, underscoring the urgent need for comprehensive policy development, improved service provision, and increased youth involvement in mental health initiatives.

  ‣ **Establishing a comprehensive policy framework** is vital for ensuring youth receive the necessary support. Comprehensive research on youth mental health has been emphasised to ensure a **data-driven approach to developing effective policies and interventions**.

• **Youth representatives and key stakeholders emphasised the lack of youth-friendly services and** the need for greater youth engagement. Current environments often fail to resonate with youth, limiting outreach and participation.

  ‣ **Creating youth-friendly mental health services** is essential for improving accessibility and meeting youth's unique needs. **Engaging youth in the design of these programmes** will make them more relevant and effective. Cyprus must develop more youth-friendly structures that align with their preferences for interactive and comfortable spaces. Creating such environments— tailored to their needs and shaped by their input—would boost engagement and foster a sense of ownership among youth.

  ‣ It is crucial to also focus on the digital dimension of mental health, as society is becoming increasingly digitalised. As youth engage more with technology and online platforms, there is an opportunity to explore how digital tools can be leveraged to support and enhance mental health outcomes.

• Participants widely agreed on the *lack of awareness* regarding available mental health services, noting that many young people are unaware of the resources at their disposal or lack sufficient information to benefit from them. This gap is exacerbated by **the stigma surrounding mental health** and substance use, which was identified as a significant barrier preventing youth from seeking help. In Cyprus, cultural norms, limited outreach, and insufficient public communication hinder access to support. The stigma associated with mental health affects both the individuals seeking help and the institutions designed to support them. Societal taboos and misconceptions lead many young people to fear judgment, deterring them from accessing care.

  ‣ To bridge the awareness gap regarding mental health services, a multifaceted approach is suggested. Stakeholders emphasised the need for better strategies to inform youth about available resources and implement comprehensive awareness campaigns to reduce stigma. Targeted efforts are essential to **enhance the visibility and understanding of mental health services**, empowering youth to take proactive steps for their well-being. **Combating this stigma** requires normalising discussions about mental health and creating safe, non-judgmental environments.

• **Inconsistent access** to essential resources and programmes further undermines effectiveness. Participants in the research highlighted challenges in ensuring that mental health services are

accessible to all, including physical and digital barriers, particularly for vulnerable populations. **Difficulties in reaching and engaging vulnerable youth,** especially in rural or underprivileged areas, include logistical barriers and the need to build trust. Parents and youth representatives highlighted the lack of mental health education in schools, the need for tailored programmes, financial constraints, and gaps in specialised services as critical areas for improvement. Service quality concerns include inconsistencies in standards, programme duration, and staff professionalism.

  ‣ The focus should **shift from reactive treatments to proactive and preventive approaches** with **targeted initiatives for vulnerable groups**. Programmes must be tailored to meet the specific needs of these groups. These insights emphasise the urgent need to redesign, fund, and implement youth online and offline programmes or mental health services using the advances of technology to address the complex needs of vulnerable populations effectively.

  ‣ Services to **support unaccompanied and accompanied refugee children should be provided** to meet their specific needs based on a tailor-made supporting system.

• Another significant challenge is the **gap in coordination**, which limits the effectiveness of mental health services. Poor coordination among various services leads to fragmented efforts, delays in delivery, and inconsistent outcomes, undermining the mental health support system in Cyprus.

  ‣ Stakeholders stressed the necessity of a **systemic and multi-disciplinary approach** that brings together education, welfare, addiction treatment, and other support services. Cyprus's fragmented mental health services necessitate deeper collaboration among ministries, schools, health services, local governments, and NGOs. Improving youth mental health services requires overcoming administrative delays, fostering collaboration, and embedding mental health initiatives within mainstream systems, particularly education. Without these changes, support efforts will remain disjointed, limiting their impact.

• **Understaffing and resource limitations** are significant barriers to providing comprehensive mental health services for youth. These issues, coupled with *inadequate training*, hinder programme expansion and effectiveness.

  ‣ **Strategic investments in staffing, training, and infrastructure** are crucial to enhancing mental health service capacity, ensuring timely support to youth nationwide. **Continuous education and skill development** for professionals in mental health and educational settings are crucial, as is enhancing community and family engagement to promote youth well-being.

The Project

During the COVID-19 pandemic, studies observed a significant rise in depression, anxiety, and stress among youth in Europe and globally. Protecting and promoting youth's mental well-being is one of the European Youth Goals within the EU Youth Strategy and a priority for international organisations, such as the European Commission and UNICEF. This project is implemented by the Ministry of Health (MoH) in Cyprus in collaboration with UNICEF through the Technical Support Instrument (TSI) of the European Commission (DG REFORM). CARDET coordinates the project's research activities with the support of the Cyprus Youth Council.

The project focuses on promoting community-based and youth-friendly mental health prevention and promotion services to ensure the mental health of youth aged 15–35, hereafter named youth. In particular, the project has three main objectives:

1. **Contribute to strengthening youth-friendly mental health services**: Enhance mental health promotion and prevention services for youth aged 15-24.
2. **Facilitate youth engagement and participation**: Ensure that youth have the opportunity to voice their needs and actively participate in the design and implementation of mental health services at the municipal level.
3. **Develop strategic recommendations**: Provide recommendations to improve mental health support systems and policies, aligning with both national and European priorities.

Emphasis is given to enhancing the understanding of youth needs by actively involving young people and relevant authorities to establish mental health prevention and promotion services in Cyprus, utilising tailored actions that align with national priorities. Youth voices and project insights will provide recommendations, international best practices, and national needs and priorities, guiding the upcoming National Strategy for Mental Health in Cyprus. A youth engagement framework for enhancing mental health prevention and service provision will be developed.
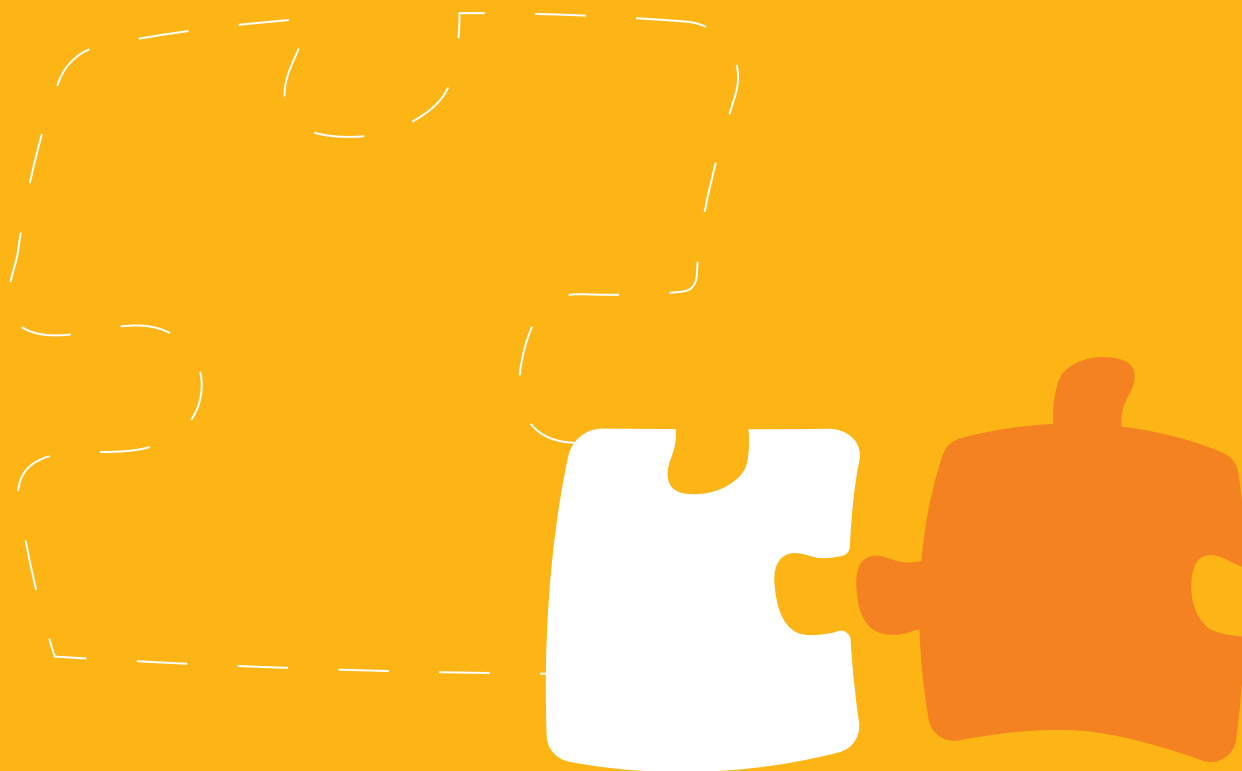
Acronyms

CCR	Commissioner for Children's Rights
NAAC	Cyprus National Addictions Authority
KOKEN	Cyprus Youth Clubs Organisation
CYC	Cyprus Youth Council
EPS	Educational Psychology Service
FGD	Focus Group Discussion
GHS	General Healthcare System
HoYR	House of Youth Representatives
MoH	Ministry of Health
MoESY	Ministry of Education, Sports and Youth
SWS	Social Welfare Services
SHSO	State Health Services Organisation
WHO	World Health Organisation
ONEK	Youth Board of Cyprus

Table of Contents

01.
Introduction

The mental health of youth has become a significant public health concern (Westberg et al., 2022), given its critical impact on overall well-being and future outcomes.

WHO defines mental health as:
"a state of mental well-being that enables people to cope with the stresses of life, realise their abilities, learn well and work well, and contribute to their community. It is an integral component of health and well-being that underpins our individual and collective abilities to make decisions, build relationships, and shape the world we live in"
(WHO, 2014).

According to the EU Charter of Fundamental Rights, everyone can access preventive health care and benefit from medical treatment under the conditions established by national laws and practices. According to the European Pillar of Social Rights, everyone has the right to timely access affordable, preventive, and curative health care of good quality (European Commission, 2023).

In recent years, especially after the COVID-19 pandemic, adolescent mental health has been increasingly gaining attention in the European spectrum in growing awareness and development policies. The onset of the COVID-19 pandemic has exacerbated mental health issues, with youth reporting a disproportionate rise in mental health challenges (Hafstad & Augusti, 2021). Mental disorders that arise during youth often persist into adulthood, resulting in chronic mental health problems and reduced overall functioning (Caspi et al., 2020). As per the reports of the European Commission before the pandemic, 1 in 6 youth (approximately 84 million) in Europe has suffered from mental health issues, with the rates rising over the past years and especially after the COVID-19 pandemic (OECD/European Union, 2022, European Commission, 2023).

Youth are widely recognised as a vulnerable population concerning mental health. Research estimates that up to 50% of mental disorders manifest before the age of 14 (Scheiner et al., 2022), while consistent epidemiological evidence indicates that approximately 75% of all major mental health disorders begin before the age of
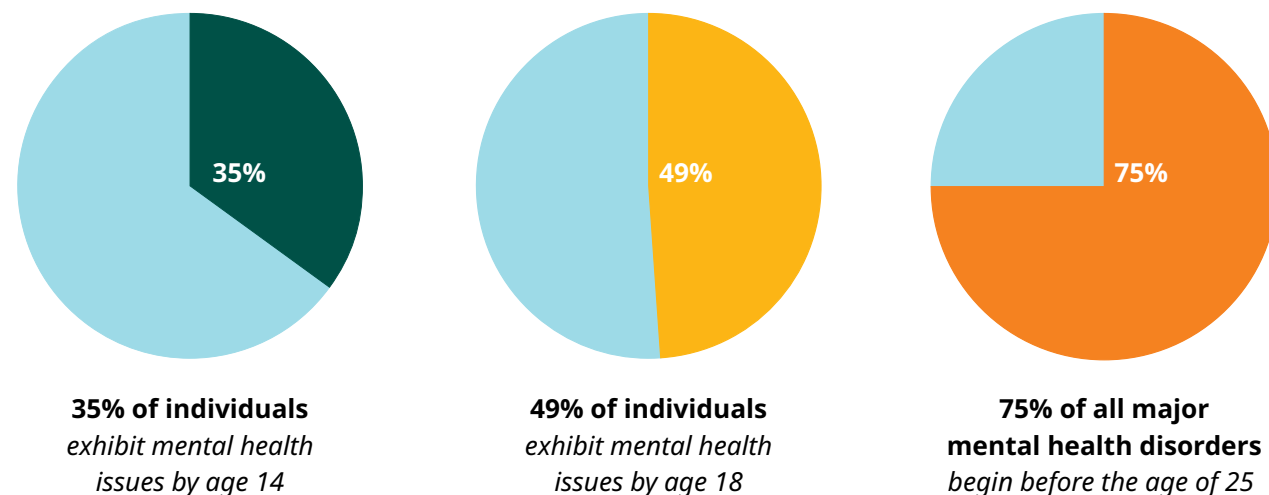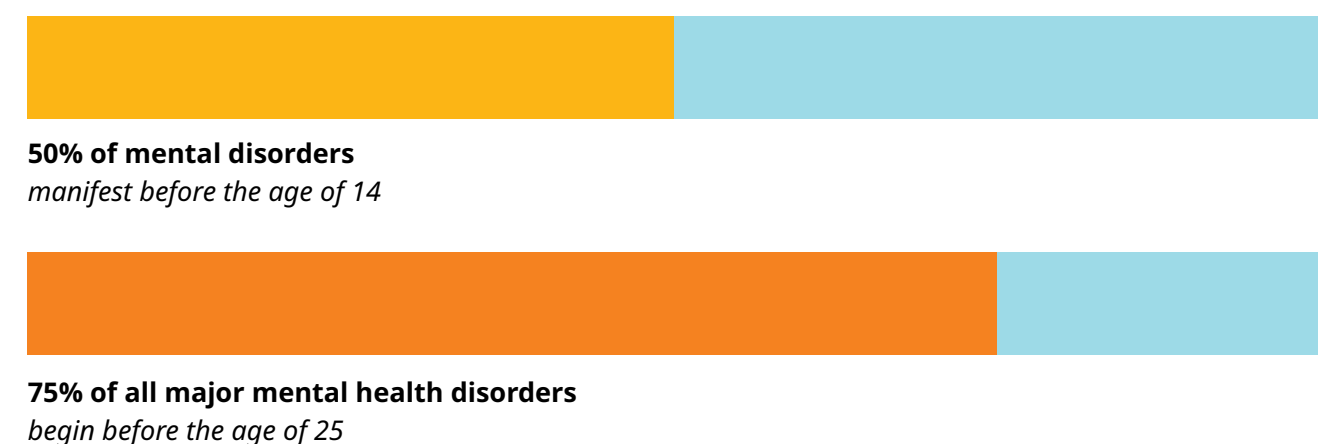
25 (e.g., Solmi et al., 2022; Uhlhaas et al., 2020; Fusar-Poli, 2021). A recent study further revealed that around 35% of individuals exhibit mental health issues by age 14 and nearly 49% by age 18. Globally, 1 in 7 adolescents is affected by mental health challenges (Vos et al., 2020).
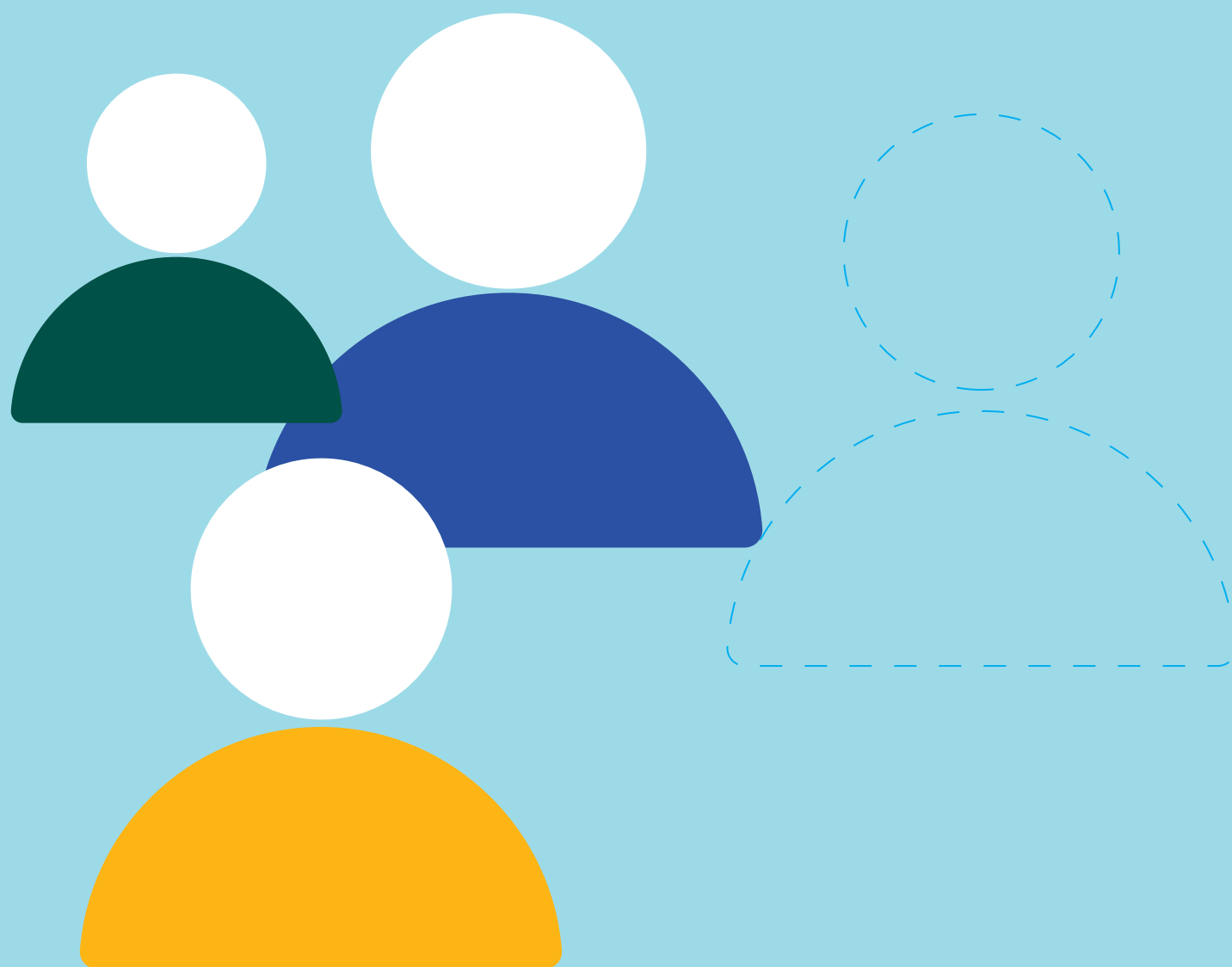
Furthermore, poor mental health in young populations heightens the risk of engaging in harmful behaviours, such as self-harm, substance use, and violence, which can have lasting effects (Skeen et al., 2019). Mental health difficulties impair immediate physical and psychological well-being and have long-term consequences that extend into adulthood (Bor et al., 2014; Potrebny et al., 2016; WHO, 2014). Additionally, mental health disorders make a substantial contribution to global morbidity and mortality among youth (UNICEF, 2021). Suicide ranks as the third leading cause of death in youth (Servili, 2012), while neuropsychiatric disorders, such as depression, schizophrenia, and alcohol abuse, are the primary drivers of disability in this demographic across all regions (Gore, 2011; WHO, 2004).

In this context, promoting mental health in

youth is essential for individual development and improving health and social outcomes across their lifespan (WHO, 2014). Health equity is a commitment to reduce or eliminate avoidable or unfair outcomes, disparities, and marginalisation faced by some groups or populations. This underscores the growing need for mental health services catering to the general youth population and specific subpopulations that may face unique challenges (WHO, 2021).

35% of individuals
exhibit mental health issues by age 14

49% of individuals
exhibit mental health issues by age 18

75% of all major mental health disorders
begin before the age of 25

(Graph 1: e.g., Solmi et al., 2022; Uhlhaas et al., 2020; Fusar-Poli, 2021)

50% of mental disorders
manifest before the age of 14

75% of all major mental health disorders
begin before the age of 25

(Graph 2: Scheiner et al., 2022 / e.g., Solmi et al., 2022; Uhlhaas et al., 2020; Fusar-Poli, 2021)

02.
Scope of Study

The national study provides in-depth insights **from youth, youth representatives, youth practitioners, and key stakeholders** of the mental health sector about the status of the systems, services and mechanisms available to youth for addressing mental health needs in Cyprus.

The research includes:
a. the voices of youth about their mental well-being, the available services, and the role they can play in promoting their mental health, building on the findings and gaps of the current system;
b. a review of the relevant legal and policy provisions;
c. mapping of the existing promotion and prevention services at national and municipal levels;
d. mapping of promising preventive practises to reach youth with fewer opportunities;
e. the training needs of practitioners delivering mental health services in Cyprus;
f. a review of current professional training programmes of youth workers and mental health professionals working with this age group.

The study integrates quantitative data that builds upon the findings of earlier reports and surveys, providing a solid foundation for its analysis. By doing so, it affirms existing data and enhances the understanding of youth mental health issues in Cyprus through updated metrics.

In contrast to previous reports, this study adopts a more holistic approach to examining the state of mental health support for youth and children in Cyprus. This comprehensive analysis considers the perspectives of various stakeholders, including youth, mental health professionals, educators, and parents. Additionally, the study investigates the ecosystem of promoting and preventing mental health among youth, assessing how various elements—such as policies, community resources, school programmes, and family support—influence mental health outcomes. Preliminary recommendations for developing mental health prevention and promotion services in Cyprus are provided after analysing the current services that are already in place.

03.
Methodology

A qualitative research design was employed to address the study's purpose, with desk and field research. The data collection phase took place from June to November 2024. The desk and field research drew on data from various sources, as described below. The Cyprus Bioethics Committee secured permission for the research.

3.1
Desk Research
The desk research provided a comprehensive analysis of the current state of youth mental health in Cyprus. Data were collected from government reports, reports from youth organisations, academic studies, surveys, project deliverables, and official statistics. The analysis involved a detailed review of current legislation, policies, and initiatives related to mental health, alongside the mental health status of Cypriot youth, as documented in national and European reports.

3.2
Field research
The field research employed two primary qualitative data collection methods: interviews and focus groups. It focused on mapping the mental health promotion and prevention services available in Cyprus at national and municipal levels and identifying key gaps and challenges within the current system, highlighting areas where further improvement is needed to address existing mental health needs. A purposive sampling method was used to select participants, ensuring relevant experience and knowledge in youth mental health. Participants represented diverse perspectives, including mental health stakeholders, policymakers, service providers, community representatives, and youth of different ages and vulnerable groups, allowing for a range of valuable insights and thereby capturing a comprehensive understanding of the issues under investigation. Before participating, all individuals were provided with information detailing the study's objectives, procedures, and rights as participants. Written consent was obtained from each participant, with the consent form clearly explaining the voluntary nature of the study, including their right to withdraw at any point without consequence. The consent form also outlined procedures for recording the interviews and focus groups, assuring participants that their responses would be used solely for research purposes and reported in a way that preserved their anonymity. All identifying information was removed during transcription and analysis to protect participants'

A qualitative research design was employed, with desk and field research.

METHODOLOGY

Desk Research

Field Research

interviews   focus groups
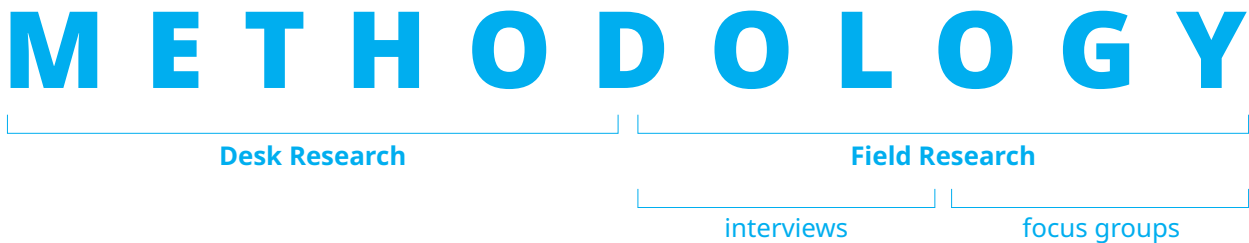
(Figure 2)

The 4 topics of the Focus Groups

| 1 | the available mental health services and mechanisms | 2 | the needs of youth and particularly vulnerable groups |
| 3 | the role of youth, practitioners, parents, and stakeholders in promoting youth mental health through active participation | 4 | the existing promising programmes, gaps, challenges, and opportunities |

(Figure 3)

confidentiality. Each participant was assigned a unique identifier code, and any details that could reveal their identity were omitted or generalised. The recordings and transcripts were securely stored, with access restricted to the research team to ensure data confidentiality.

3.2.1
Interviews
A total of **13 semi-structured interviews** were conducted with youth, youth representative organisations, youth practitioners, and key stakeholders selected for their expertise and role in youth mental health.

The interviews aimed to:
a. gain a better understanding of the existing mental health promotion and prevention services at national and municipal levels and
b. gather youth and key stakeholders' views about the existing promising programmes, gaps, challenges, and opportunities for improving the available services or designing new ones to enhance further the promotion and provision of mental health in Cyprus.

The interviews included participants from diverse organisations, each contributing unique perspectives on youth mental health in Cyprus. The sample consists of youth (e.g. unaccompanied minors residing in shelters, but also youth living with their families), representatives from youth organisations, representatives from governmental and non-governmental organisations (stakeholders) that provide mental health prevention or promotion services to youth in Cyprus, as well as representatives from public authorities (policymakers). A detailed description of the representative organisations is provided in Appendix I. Each interview, lasting approximately one hour, was carried out in a face-to-face setting, except 2, which were conducted online due to the availability and preference of the participants. Twelve of the interviews were audio-recorded with participants' consent and subsequently transcribed to ensure the accuracy of data collection and analysis.

3.2.2
Focus groups
In addition to the interviews, six focus group discussions (FGDs) were conducted using purposive sampling to capture the voices of youth, practitioners, parents, and stakeholders about mental health status in Cyprus. In addition to several predefined topics, FGDs followed a semi-structured approach, encouraging and facilitating discussions among the participants. In particular, participants provided their insights and opinions about (a) the available mental health services and mechanisms, (b) the needs of youth and particularly vulnerable groups, (c) the role of youth, practitioners, parents, and stakeholders in promoting youth mental health through active participation and (d) the existing promising programmes, gaps, challenges, and opportunities for improving the available services or designing new ones through the youth's and other participants' perceptions. The selection of participants in each FGD

was based on predefined criteria to reach all targeted categories of participants, as described below. Each FGD was customised according to participants' profiles. Three of the six FGDs were conducted with youth since their voices are critical to be captured and embraced in the current study's findings. The first FGD involved five young people aged 18 to 24, while the second involved three 15 to 19-year-old participants. The third FGD was conducted with three youths with vulnerable backgrounds, while a separate interview took place with two youths of younger ages (< 24 years old) with vulnerable backgrounds. The fourth FGD involved five practitioners, including psychologists, mental health experts and healthcare professionals (i.e., health visitors), who work across schools, maternity centres, and public health institutions. These participants provided insights into children and adolescents' mental and physical health needs. Each participant has many years of experience in their respective fields, specialising in child psychology, public health, and school-based health services.

Seven parents participated in the fifth FGD, each bringing diverse perspectives on the mental health pressures their children face.

Their experiences reflected a broad cross-section of social and academic challenges impacting youth today. The FGD aimed to gather insights from parents regarding the challenges their children face in the modern social and educational environment, mainly focusing on pressures that affect their mental health related to academic performance, peer competition and social media. The last FGD involved five key stakeholders from the Ministry of Health (MoH) leading in mental health issues. The FGDs were conducted face-to-face and online for convenience reasons. The discussions were recorded and transcribed after receiving written consent forms from all participants, following the same confidentiality policy described for the interviews.

04.
Analysis and Key Findings
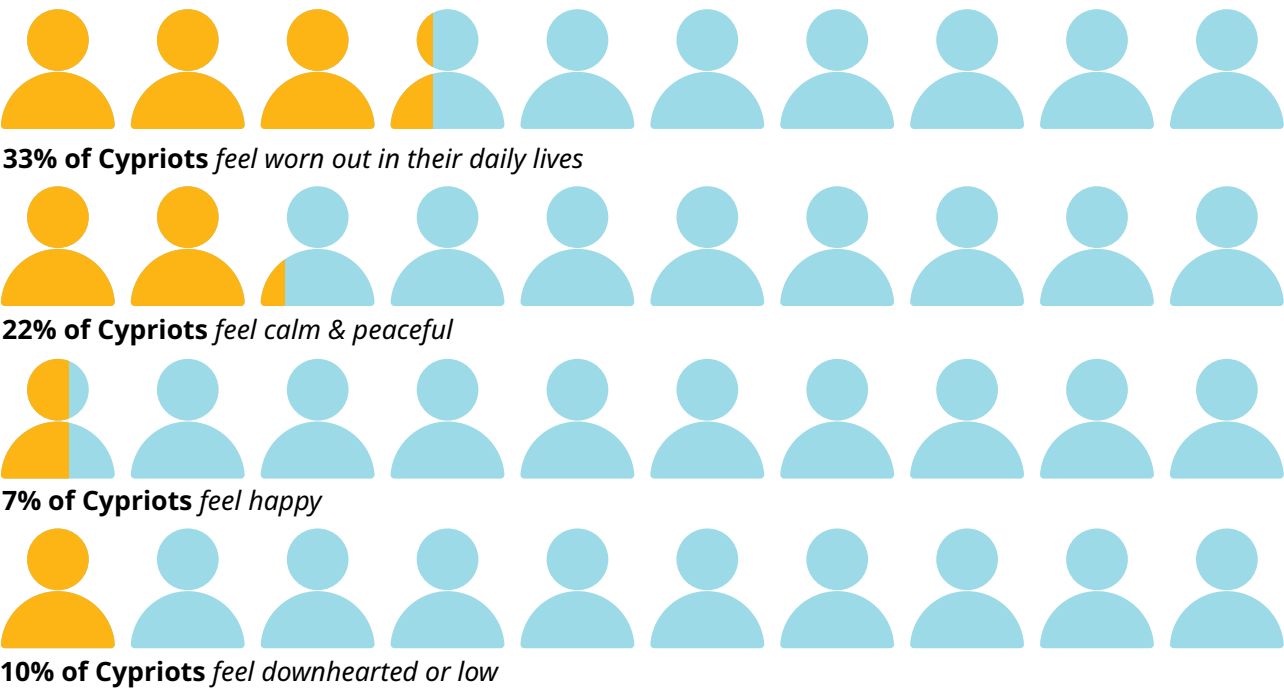
4.1
Desk Research

This section summarises the desk research results, providing information about existing legislation, policies, and initiatives related to mental health, alongside mapping mental health promotion and prevention services and providers at national and municipal levels. Additionally, findings about the mental health status of Cypriot youth, as documented in national and European reports, are outlined. Lastly, references to gaps and challenges within the current system are provided, highlighting areas where further improvement and resources are needed to address existing mental health needs.

4.1.1
Mental Health Policies/ Legislations in Cyprus

The policy topic of health and well-being bridges together the efforts of several governmental agencies and organisations, such as the MoH, the Youth Board of Cyprus (ONEK) and the Ministry of Education, Sport and Youth (YouthWiki, 2024). After the Covid-19 pandemic, mental health and wellbeing among youth became a growing concern in Cyprus. The issue of mental health is higher on the political agenda, as reflected in the initiatives and policies of the Ministry of Health, which is currently developing a Strategy for Mental Health with a special focus on youth.

There are currently no top-level legal and/or policy frameworks establishing mechanisms of early detection and signposting of youth facing health risks. Early detection mechanisms are widespread to various stakeholders at the national level. They are described in the Strategy on the Rights of the Child in Health (2017-2025) (Εθνική Στρατηγική για τα Δικαιώματα του Παιδιού στην Υγεία) (YouthWiki, 2021).

The mental health of children and adolescents has long been a key focus of the Mental Health Services, now known as the Mental Health Directorate. Specialised treatment programmes for this age group were introduced in 1990 within the MoH's Mental Health Department (Paradeisioti, 2023). Following the implementation of the General Healthcare System (GHS), the Mental Health Directorate came under the jurisdiction of the State Health Services Organisation (SHSO), now Cyprus's largest healthcare provider. The SHSO's mission is to modernise and restructure health services by becoming financially and administratively autonomous. Mental Health Services transitioned to operating under the SHSO in 2019 (Paradeisioti, 2023). Various ministries and agencies implement Youth policies in Cyprus cross-sectorally, addressing multiple aspects of youth's lives. ONEK is the competent body for youth issues, responsible for informing young people and raising awareness on various topics, including mental health. Established under the Youth Board Law of 1994, ONEK plays a pivotal role in shaping youth-related policies by submitting proposals and recommendations to the Council of Ministers. A key milestone in youth policy was the adoption of the first National Youth Strategy on May 18, 2017, which emphasises the active participation of youth, targeting those aged 14-35, with reproductive health initiatives focused on individuals aged 15-29. A core pillar of the strategy is promoting the health and well-being of youth, encompassing both physical and mental health. Its objectives include ensuring seamless, equal access to youth-friendly health services and fostering health promotion and disease prevention. The second iteration of the National Youth Strategy, aimed at 2030, is in progress and is expected to be finalised by the end of 2024 (YouthWiki, 2024).
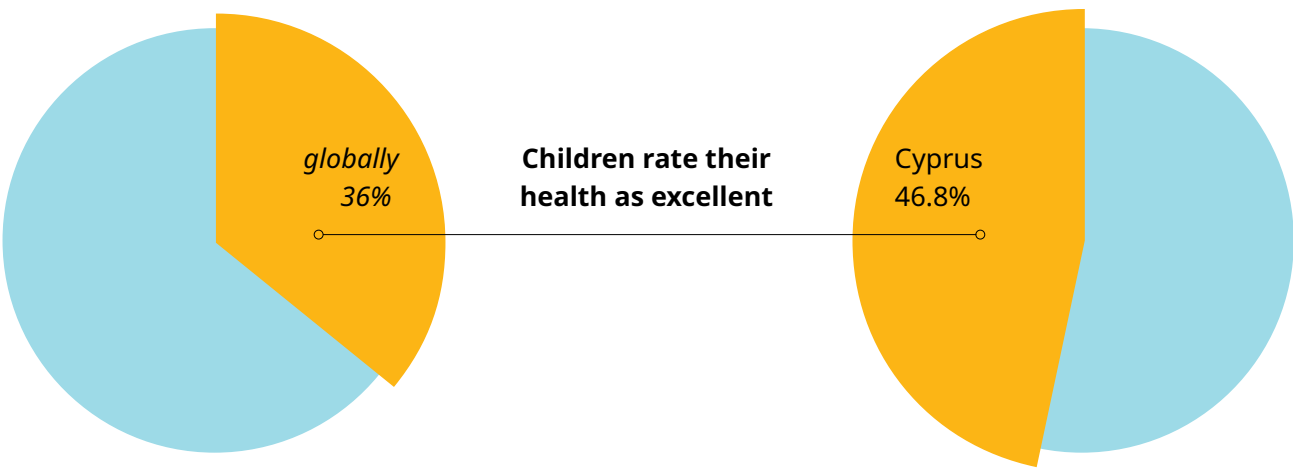
33% of Cypriots *feel worn out in their daily lives*

22% of Cypriots *feel calm & peaceful*

7% of Cypriots *feel happy*

10% of Cypriots *feel downhearted or low*
(Graph 3: European Commission 2023).

Currently, there are no specific strategies or policy measures in Cyprus that directly address youth mental health, including suicide prevention, either as a standalone policy or integrated into other national frameworks. However, the "Psychiatric Care Law" (The Psychiatric Nursing Act) of 1997, amended in 2003 and 2007, marks a significant legislative development in mental health care. This law establishes provisions for the creation and operation of Psychiatric Centres for individuals with mental illnesses, safeguards their rights, and outlines the responsibilities of their relatives. The approval of this law by the House of Representatives was a significant step in psychiatric reform, particularly

advancing patient rights protection, supporting deinstitutionalisation efforts, and promoting community-based psychiatric care in Cyprus. In addition, a National Mental Health Strategy is currently being developed in Cyprus, with an initial three-year timeframe from 2025 to 2028 (Youth Wiki, 2024). The strategy will focus on setting actionable, measurable, and budgeted goals, structured around several key pillars, with working groups involving a more interdisciplinary and inter-ministerial collaboration and youth playing an active role, including representatives from the House of Youth Representatives (HoYR). The strategy will also include an action plan developed with input from WHO. The National Strategy for Mental

86% *high levels of anxiety & uncertain about the future*

75% *feel pressure & stress*

60% *indicated a need to visit a mental health professional*

43% *followed through*

(Graph 4: ONEK's survey, conducted by IMR/University of Nicosia, involved 500 participants).

Children rate their health as excellent
globally 36%
Cyprus 46.8%

(Graph 5 : World Health Organisation (WHO) Health Behaviour in School-aged Children (HBSC 2021/2022) study in Cyprus)

Health aims to promote actions that prevent mental disorders and raise public awareness about mental health issues. Additionally, it will focus on establishing new facilities for the therapeutic management of individuals with mental illnesses. To achieve this goal, the MoH prioritised the development of a National Strategy for Mental Health and requested a collaboration with WHO (Youth Wiki, 2024). The need for technical assistance primarily focuses on providing expertise for the development of the national strategy as well as adopting best practises implemented in other countries.

4.1.2
### *Cypriot Youth's Mental Health Status as Captured by National and European Reports*

There is a notable lack of longitudinal data on youth mental health across countries. However, in recent years, efforts have been increased to gather relevant data to promote and ensure positive mental health. Despite the increased focus on youth mental health by organisations in Cyprus over the last few years—particularly following the COVID-19 pandemic—available data from previous years remain limited. This lack of data challenges understanding long-term trends and assessing the full impact of recent mental health initiatives on youth. This research took into consideration previous quantitative studies on identified key indicators of youth mental health in Cyprus, such as rates of anxiety, depression, and access to mental health resources. Building

on these findings, the study then conducted an in-depth qualitative analysis, exploring the perspectives of multiple stakeholders, including healthcare providers, educators, community leaders, and youth. This approach aimed to capture a comprehensive view of the available mental health promotion and prevention services and the specific needs and challenges within the existing system. Through this multi-stakeholder analysis, the research uncovered gaps in support. It highlighted areas for improvement, ultimately providing solid and evidence-based recommendations to enhance the effectiveness and accessibility of youth mental health services in Cyprus.

Several previous quantitative surveys have been conducted in Cyprus; their main findings are summarised below. One significant initiative is the Health Behaviour in School-aged Children (HBSC) survey, conducted by WHO every four years. In Cyprus, the survey is implemented by the Centre for Educational Research and Evaluation under the oversight of the Ministries of Health and Education, Sports and Youth. The 2021/2022 HBSC survey in Cyprus revealed that one in three children experience recurring mental health challenges more than once a week. While 36% of children globally rate their health as excellent, the figure in Cyprus is higher at 46.8%. Life satisfaction in Cyprus is also slightly above the international average, with a score of 8.0 compared to the global average of 7.5 on a 10-point scale. Mental health and

2020-2021
*7789 students referred
to psychologists*

Nicosia 37%
Limassol 27.5%
Larnaca 19%
Paphos 11%
Famagusta 5.5%
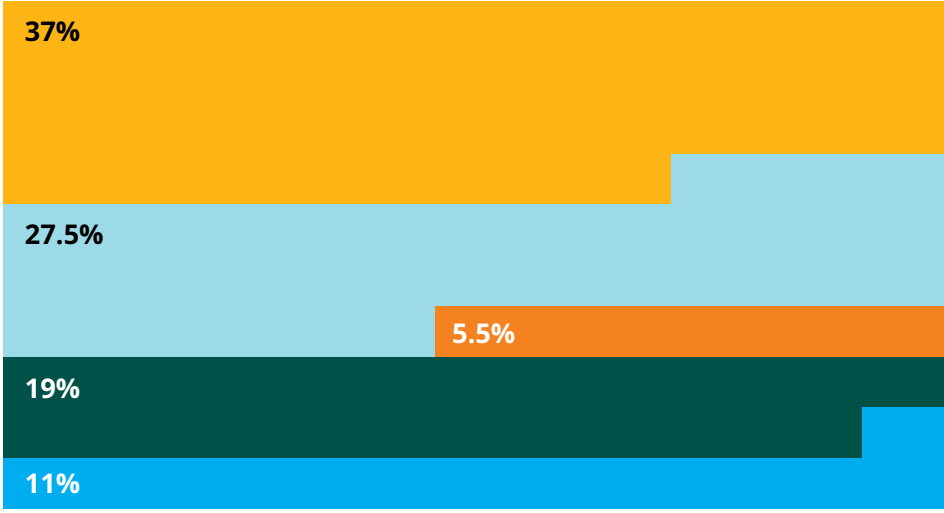
(Graph 6: Ministry of Education, Sport and Youth, 2021).

well-being in Cyprus also scored higher than the global average, with over half of children reporting positive feelings most of the time. Despite these positive figures, mental health issues like nervousness, anger, sleep difficulties, and insomnia are more prevalent than physical health problems, particularly among girls and older children. While socioeconomic background did not show significant differences in mental health outcomes, older children, girls, and those from lower socioeconomic backgrounds tended to experience more negative mental health effects as they aged. [1]

The 2021 study commissioned by ONEK on youth aged 18-35 revealed findings similar to those of the HBSC survey. Despite facing significant challenges, mainly due to the pandemic, participants demonstrated high levels of resilience. In this context, resilience refers to their ability to recover from difficulties and adapt to changing circumstances. The report suggests that while stress levels among youth are elevated, the coping mechanisms and support systems in place are somewhat effective. A key insight from the study is the critical role of relationships in mental health. Family, friends, and community networks were highlighted as essential support structures that strengthen resilience and improve mental health outcomes. This underscores the need to

bolster these relationships further to enhance youth's mental well-being.

In addition, the 2023 Flash Eurobarometer 530 on mental health revealed that around one-third (33%) of Cypriots reported feeling tired or worn out in their daily lives over the last four weeks. Cyprus ranked high among countries regarding people feeling tense, with 20% of respondents reporting this emotion. However, only 22% felt calm and peaceful, and 7% reported feeling happy. Additionally, 10% of respondents felt downhearted or low, indicating that a significant portion of the population faces emotional difficulties. These findings highlight the pressing need to address mental health and well-being in Cyprus (European Commission, 2023).

ONEK's survey, conducted by IMR/University of Nicosia, involved 500 participants in face-to-face interviews with a structured questionnaire. The findings revealed that a significant 86% of youth reported high levels of anxiety and uncertainty about the future, with 75% feeling pressure and stress. Notably, around 60% indicated a need to visit a mental health professional, though only 43% followed through. Mild symptoms of depression were prevalent in 62% of participants, and one in four exhibited significant or severe depression. Anxiety was also common, with

1 World Health Organisation (WHO) Health Behaviour in School-aged Children (HBSC 2021/2022) study in Cyprus. https://www.who.int/europe/initiatives/health-behaviour-in-school-aged-children-(hbsc)-study

33% experiencing mild, 27% moderate, and 21% severe anxiety. The COVID-19 pandemic exacerbated these issues, with 78% believing that societal mental health had deteriorated and 46% reporting a personal decline.

The study highlighted gaps in awareness and accessibility of mental health services and mixed satisfaction with the services available. These findings emphasise the need for targeted interventions, especially considering gender differences in anxiety levels, to meet better the mental health needs of Cypriot youth (IMR & Youth Board of Cyprus, 2021). The 2018 report from ONEK revealed a consistent demand for psychosocial support services, with 3,264 youth seeking assistance, like the previous year. Notably, the helpline "Line 1410", which operated before Covid-19 as an online counselling service, experienced a significant 40% increase in calls. Offered online or through phone calls, the service provided mental health support and guidance (i.e., information about available services, facilitation of communication with specialists or mental health professionals, etc) to youth in need, but it stopped after the pandemic. The most reported issues included negative emotions, such as anger, disappointment, and anxiety, as well as depressive symptoms. Mental health concerns, personal development struggles, and addiction-related challenges were also prominent. Given that these statistics predate the COVID-19 pandemic, it would be valuable to examine these parameters in the present context to assess any shifts in youth mental health needs and service demand.

Similarly, a survey conducted by the Cyprus Youth Clubs Organisation (KOKEN) and Neapolis University of Cyprus examined the mental health effects of the first wave of COVID-19 (Corona Virus Disease-19) in Cyprus.

The results suggest that:
a. females experience higher levels of anxiety, stress, fear, worry, and despair than males and are more likely to undertake protective measures,
b. older individuals and those who live in urban

areas perceive more excellent social support and interest in the emotional experience of significant others,
c. emotional distress and support and interest in self and others are associated with all other variables, indicating the importance of these constructs to the experience of a pandemic, and
d. there was a decrease in participants' concern after the end of the first wave of the pandemic.

Mental health professionals could find this information useful when developing and implementing prevention programmes that offer psychological support during this stressful period (Mousoulidou et al., 2021). In the public sphere, youth's mental health is of primary importance, especially among stakeholders influencing youth policies. In an attempt to identify the current emotional state of youth in Cyprus, in January 2022, ONEK published the results of a quantitative survey that involved 500 youth aged 18-35. The survey aimed to investigate the degree of knowledge and satisfaction of youth from the existing structures/support services of the state, the effects of the pandemic, and the needs of youth to offer them more targeted support for mental health issues. The survey results can be an excellent tool for improving the State's services and policies on youth's emotional and mental health (YouthWiki, 2024).

It is worth mentioning some data from the 2020-2021 report of the Ministry of Education, Sport and Youth, the Department of Educational Psychology, operating under the Ministry currently assigns one Educational Psychologist to approximately 2,500 students. The report noted a slight referral increase, with 7789 students referred to psychologists, marking an uptick from the previous year. The majority of these referrals came from Nicosia (37%), followed by Limassol (27.5%), Larnaca (19%), Paphos (11%), and Famagusta (5.5%). Notably, 61.2% of referrals were re-evaluations, but 38.8% were new cases. Alarmingly, 28% of referrals were linked to emotional difficulties, including

anxiety, depression, low self-esteem, anger, and aggression. Primary education students accounted for 48.4% of referrals, while 24.1% came from secondary education (Ministry of Education, Sport and Youth, 2021). This highlights a concerning prevalence of mental health issues in young students.[2]

Lastly, the registration and participation of users on social network sites are currently among the main activities of internet users, particularly younger generations. Around 88% of European Internet users (aged 18-24) use social media. A survey by Alexander College Research Centre on the likelihood of youth getting addicted to social media and the Internet has investigated the engagement of youth (N=1059) in Cyprus with Social Networking Sites (SNSs) and the Internet. The sample consisted of high school students (N=465) and university students (N=594), both female (N=622) and male (N=437), in four schools and five universities (Higher Educational Institutions) (Christodoulides et al., 2021). According to the findings, 8.3% of the sample face symptoms of addiction to SNSs and may be classified into the addicted category. Although small, variations have been identified within this category between high school students (9.2%) and university students (7.6%). Interesting variations are also found across genders, as the percentage of individuals that may be diagnosed with addiction to SNSs is twice as high in females (11.1%) than males (4.3%). A critical element seems to be that most youth (55%) are categorised as moderately addicted to SNSs, one step before severe SNSs addiction. A worrisome finding for Cyprus is that approximately one-quarter (24%) of participants have problematic Internet use. Overall, 26% of females and 21% of males in the sample are at risk for problematic internet use. The findings for the Cypriot youth sample corroborate international findings as to the suggestion that problematic use of the Internet and SNSs is a real and serious problem that endangers health. The researchers highlighted the need to increase awareness among high school students and university

students, parents and stakeholder authorities vis-à-vis the impact of SNSs and Internet use and pursue more effective and targeted prevention, as is the case in other countries (Christodoulides et al., 2021).

4.1.3
Existing training programmes for mental health professionals and youth workers
In Europe, the EU-PROMENS multidisciplinary capacity-building programme provides training and exchange opportunities for health professionals. The ImpleMENTAL joint action focuses on mental health reforms and suicide prevention across the EU. These efforts are supported by international organisations, such as WHO and the Organisation for Economic Co-operation and Development, to transfer and implement best practises in mental health care. However, in Cyprus, the professional development opportunities for mental health professionals and youth workers are limited. Only two organisations—the Educational Sector of the Nursing Administration and the Professional Development Department of the Ministry of Health (MoH)—offer training for mental health professionals. However, these professional development opportunities are not systematically integrated into the broader healthcare framework. Instead, they are typically provided only upon specific inquiry, limiting their accessibility and reach within the mental health professional community.

A critical component of supporting youth is the professional development of the workforce involved with them. Youth workers have a non-clearly defined role and status within the Cypriot context. Although their role is not yet established in Cyprus, ongoing efforts exist to create and solidify this position. Organisations involved with youth urge for the development of a dedicated diploma/course aimed at training and certifying individuals to become professional youth workers. Currently, there

are no national policies, measures or guidelines regulating the status of youth workers. However, there is an ongoing process for developing the occupational standards of youth workers under the project "Establishment of mechanisms for the validation of non-formal and informal learning-pilot implementation" led by the Ministry of Education, Sport and Youth. No formal education paths leading to a qualification as a youth worker exist. However, continuous professional development opportunities for youth workers - whether volunteers or professionals - are available through EU programmes, such as "Erasmus+ Youth" and "European Solidarity Corps." Additionally, training opportunities for professional development are funded through the "Youth Initiatives."

ONEK provides training for skills development, such as digital and communication skills, and offers opportunities for youth workers to engage in cooperation and international networking activities. Youth workers can receive funding for training activities, seminars or conferences abroad. Moreover, CYC has a pool of trainers from CYC member organisations who are experts in the field of non-formal education. The trainers develop training programmes focused on various competencies related to youth development. They organise and facilitate youth events, seminars, and conferences for learning and engagement. They also offer consultancy services, providing expertise on non-formal education issues per their specific competencies. The Youth Information Minding Youth's Mental Health project (YiMinds), which was implemented across 25 European countries, including Cyprus, found that the absence of guidelines for youth information workers (YIW) led to ineffective cooperation and communication with experts and organisations (European Youth Information and Counselling Agency, 2023). The findings of this study were interesting as YIW's were asked about resources, knowledge and skills they consider necessary to improve their actions. They outlined several key areas. The first is training in mental health symptoms and skills

development, such as empathy, active listening, and crisis management. They also stressed the difficulty of accessing up-to-date information on local services, hotlines, and online resources. In addition, proficiency in digital and social media skills is vital to engaging with youth at platforms where they are primarily active. The need for access to practical resources was also expressed, including guides, videos, podcasts, and tools to conduct workshops that explain and promote mental health in educational and community programmes. Youth workers need professional support mechanisms, specialist exchange opportunities, conference participation, and networking with other professionals. The outcome of this project was a guide, a vital resource targeted at YIW's with resources and strategies addressing the needs of YIW's (European Youth Information and Counselling Agency, 2023).

4.2
Stakeholders' Views on the Current State of Mental Health System
This section outlines the existing mental health promotion and prevention services and programmes for Cyprus youth, based on primary and secondary data, as captured during the stakeholders' interviews and focus group discussions. The stakeholders' insights revealed that both governmental and non-governmental organisations provide available services and programmes, operating under the public authorities or private initiatives, respectively.

4.2.1
Mapping of the Existing Mental Health Promotion and Prevention Services available at National and Municipal levels
Governmental and Public Services
In 2019, Cyprus introduced the GHS (Petrou, 2021), significantly expanding access to mental health services. The Directorate of Mental Health Services now operates under the SHSO. It provides specialised mental health care for

minors (up to 17 years old) and their families, addressing a variety of psychosocial issues. Access to these services begins with a referral from a family's healthcare provider. After referral, an initial assessment is conducted to determine the specific needs of the individual. Depending on the severity of the case, a wide range of services may be offered, including diagnostic evaluations, therapeutic monitoring, parent counselling, home visits, and individual psychotherapy. Care can be delivered on an outpatient basis, but in more severe cases, inpatient care is provided at the Archbishop Makarios III Hospital (Paradeisioti, 2023). For a detailed description of the available services, see Appendix II.

In addition to the inpatient care services offered by Archbishop Makarios III Hospital, Cyprus provides various specialised prevention and treatment programmes to address addiction and other mental health challenges, such as "*Perseas*" and "*Prometheas*" Programmes. These programmes focus on providing counselling and treatment for substance addiction and addictive behaviours among adolescents and young adults aged 13-22. Early intervention is emphasised to prevent escalation into severe addictions. Services are free and accessible to all, including vulnerable groups such as asylum seekers and refugees. Similarly, the "Stochos" Harm Reduction and Drop-in Centre Programme is a joint initiative by the Directorate of Nursing Services and the Cyprus National Addictions Authority. This programme focuses on harm reduction for individuals struggling with substance use. It offers a range of services, including immediate access to care, daycare support, counselling, and syringe exchange. The programme includes an automated Harm Reduction Box Provision machine, mobile care units, and "street work" interventions. It operates a helpline (1402) to provide information, guidance, and referrals to specialised services.

In addition to general health services, Cyprus offers various school-based programmes that target students, parents, and teachers,

each focusing on mental health promotion and prevention. The Mental Health Services offer preventive programmes developed and tailored to target school bullying in collaboration with the Ministry of Education, Sport and Youth, involving around 50 schools. A national programme for early detection of mental health issues in mothers and infants has also been implemented in collaboration with health visitors. In addition, Educational Psychology Services (EPS), operating under the Ministry of Education, Sport and Youth (MoESY), targets mental health from preschool through secondary education. Programmes focus on preventing and managing stress, emotional and behavioural difficulties, and addressing school violence and bullying. They also aim to build resilience, foster self-confidence, and promote mental health awareness among students, parents, and teachers. Also, the preventive programme for mental health nursing, "*Exelixis*", is a public mental health programme under the MoH in partnership with the Ministry of Education and local governments. A key initiative of "Exelixis" is the "Ξέρω τι ζητάω" (I know what I am looking for) programme, in cooperation with the Youth Board, designed for adolescents (aged 12-14) and their parents. This life skills-based programme, adopted internationally, helps prevent substance addiction by teaching critical thinking, decision-making, and emotion management. For an explicit description of the Exelixis program, see Appendix II. Finally, ONEK, established as a semi-governmental entity under the Youth Board Law of 1994, is pivotal in empowering youth across Cyprus. While primarily an advisory body, the Board actively engages in various youth-oriented projects to foster personal development and societal involvement. Its mission is to enhance the well-being and progress of youth, encouraging their active participation in the social, economic, and cultural advancement of their communities and the country. In September 2024, the Youth Board will launch the "Στεκόμαστε μαζί" (We Stand Together) programme in partnership with the University of Cyprus. This initiative is focused on preventing school bullying within schools and community

settings. Additionally, the Board plans to relaunch the 1410 Support Line, a dedicated hotline providing counselling and support for youth. The Youth Board also provides funding opportunities for youth-led projects related to mental health prevention, promoting community engagement and leadership.

To further support youth, the Board has established seven multi-centres, or "Πολύκεντρα", which offer access to information, counselling, and a range of educational and recreational activities designed to engage youth. While these centres are highly effective in urban areas, the Board recognises the need for enhanced outreach in rural regions to ensure all youth have access to its services. ONEK also plays a pivotal role in developing youth skills through its various programmes, such as digital and communication skills. One notable initiative is the 'Youth Initiative Programme', which incentivises youth for mobility and active participation in Cyprus's cultural, sports, political and social events. Also, the programme 'Youth and the World' provides funding for youth and youth workers to participate in training, seminars, and conferences abroad, enhancing their personal and professional development.

Moreover, through its public health committee, the Cyprus Medical Students Association (CYMSA) has actively organised workshops to prevent mental health issues, raise awareness, and eliminate stigma. These workshops have covered a range of serious topics, including suicidal tendencies, panic attacks, burnout, and mental health first aid. The significant participation in these workshops highlights the keen interest of youth in mental health issues and demonstrates the effectiveness of such initiatives in providing valuable information and support. Additionally, CYMSA conducted a collaborative workshop with the Public Health Committee and the Committee on Sexual and Reproductive Health that specifically addressed men's health, including their mental

health. This area is often overlooked in public discourse. The focus on men's mental health is significant, as societal stereotypes and stigmas can hinder open discussions about emotional well-being among young men. By tackling these topics, CYMSA plays a crucial role in fostering an inclusive dialogue about mental health, encouraging youth to engage with these important issues, and promoting a culture of support and understanding.

Non-Governmental Initiatives/Services
Non-governmental and alternative initiatives in Cyprus are crucial in filling gaps within the existing mental health services. They offer accessible alternatives for youth and ensure that mental health remains a priority in policy discussions and practical interventions. Appendix II explicitly reviews each centre and its mental health provision services.

4.2.2
Mapping of Current Promising Practises
There are several preventive programmes in place aimed at addressing substance use among youth, with some focusing on high-risk groups. The Cyprus National Addictions Authority (NAAC) licenses these programmes.[3]

These programmes include community support services, psychoeducational workshops, summer camps, and interventions targeting vulnerable groups. Appendix III provides a review of the promising current practises and programmes, such as the "Exelixis" programme, "I Deserve a Chance", and the "Life Impact" programme. The day centre "Η Πάντων Χαρά" is another available service, operating under the monitoring of the Social Welfare Services. Although specific national programmes were not mentioned in youth focus group discussions, it was emphasised that Cyprus needs to develop and implement a national mental health strategy focusing on prevention and early information dissemination.

---

3 Preventive programmes licensed by the Cyprus National Addictions Authority https://www.naac.org.cy/el/adeiodotimena-proliptika-programmemata

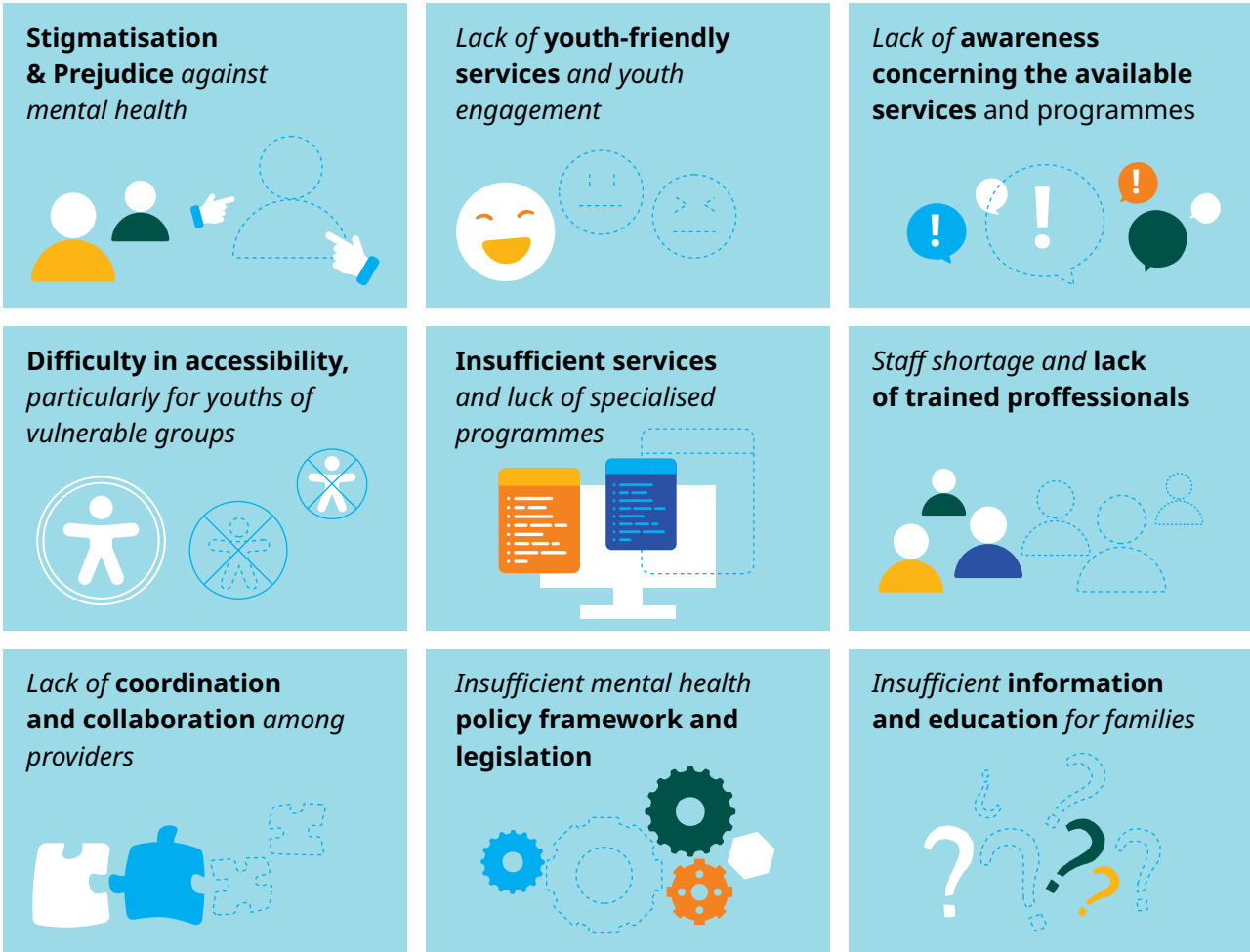Representatives of governmental organisations commented on the upcoming Mental Health Strategy,

"It was a request from us and many others to establish the first National Strategy. Through our participation in various programmes, we observed that some countries had already developed their National Strategies while others were revising them. Additionally, some countries had not yet created one. Therefore, we formally requested the Ministry of Health to establish a committee to draft the first National Strategy."

According to youth, while some sessions are held in schools, these are often viewed as ineffective, especially when not tailored to their needs. Youth mentioned that teachers often struggle to provide adequate support due to the lack of specialised training. At the same time, most school-based programmes are designed for a general audience and focus on broad issues, such as bullying, rather than on specific mental health disorders. Representatives of youth organisations also looked to examples from other countries, such as Estonia's coordinated approach to mental health through its Ministry of Mental Health and Ireland's Pieta initiative, which provides good practises in suicide prevention.

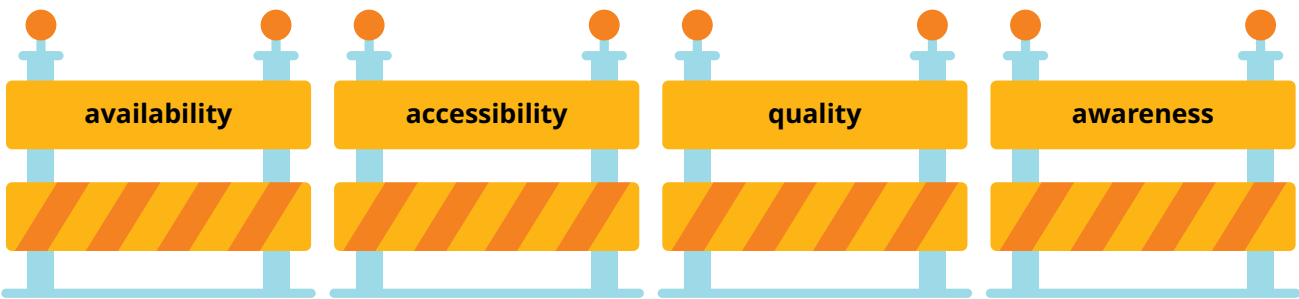Challenges and Barriers
of the current
Mental Health System

Stigmatisation & Prejudice *against mental health*	Lack of **youth-friendly services** *and youth engagement*	Lack of **awareness concerning the available services** and programmes
Difficulty in accessibility, *particularly for youths of vulnerable groups*	**Insufficient services** *and luck of specialised programmes*	*Staff shortage and* **lack of trained proffessionals**
Lack of **coordination and collaboration** *among providers*	*Insufficient mental health* **policy framework and legislation**	*Insufficient* **information and education** *for families*

(Figure 4)

4 major
barriers

| availability | accessibility | quality | awareness |

(Figure 5)

4.2.3
Challenges and Barriers of the Current System

The detailed analysis from the insights of youth, youth representatives and stakeholders identified current key needs and challenges. This section also outlines the barriers and challenges captured during the focus group discussions with mental health practitioners, parents and youth. The participants shared similar perspectives, which are summarised below. The findings indicate that these challenges primarily revolve around four critical areas: *availability, accessibility, quality*, and *awareness*. Specifically, stakeholders pointed out difficulties in ensuring that services or products are easily reachable by all target groups. This may involve physical access, digital accessibility, or overcoming barriers for vulnerable groups. Other challenges identified relate to the lack of consistent or sufficient access to the required resources, services, or programmes. Participants reported concerns about gaps in supply or the inability to meet demand, which can hinder overall effectiveness. Moreover, the quality of services or programmes was also flagged as a critical issue. Stakeholders noted inconsistencies in standards, duration of programmes, and even the professionalism of the staff involved. Lastly, the lack of awareness was a recurrent theme, with stakeholders emphasising that many individuals are either unaware of the available services or have insufficient information to benefit from them entirely. This gap in communication or outreach limits the

potential impact and reach of the services or programmes. A more detailed presentation of each challenge is provided below, as commented by participating stakeholders.

Stigmatisation and prejudice
The issue of stigma surrounding mental health and substance use emerged as a significant barrier in the field, preventing youth from seeking help (Tzouvara et al., 2023). There is a noticeable lack of awareness campaigns and anti-stigma initiatives specifically focused on youth mental health, leaving youth without the support needed to address and openly discuss their mental health challenges. Despite the availability of services, societal prejudices and misconceptions continue to hinder access to mental health care services. The results of the survey conducted by KOKEN and Neapolis University of Cyprus suggested that females experience higher levels of anxiety, stress, fear, worry, and despair than males and are more likely to undertake protective measures. During the focus group discussion with the youth, it became clear that one of the key barriers is the "self-stigma", as named and negative beliefs and views associated with mental health. Representatives from non-governmental organisations emphasised that stigma remains pervasive, particularly among youth, many of whom are reluctant to seek help due to fears of judgment and social repercussions.

This is especially true in smaller communities, where the stigma is more deeply ingrained, as explained by governmental authorities'

representatives,
"One of the main barriers to accessing services is the stigma, particularly in smaller towns and villages... there is a stigma associated with seeking mental health support. It has been stated that a lot of youth won't seek guidance or help in the villages/ communities close to where they live so as not to be stigmatised..."

Many participants, both from the public and private sectors, highlighted that the societal taboo surrounding mental health discussions discourages individuals from openly addressing their issues. The fear of being stigmatised leads many youths to avoid mental health services altogether, even when they are accessible. This reluctance to seek help is perpetuated by the negative perceptions associated with mental health issues, which continue to be prevalent despite growing awareness.

The stigma is not limited to mental health but also extends to substance use and addiction, as noted by representatives from governmental organisations. They pointed out that the stigma surrounding discussions of substance abuse affects the willingness of schools to make referrals and undermines the effectiveness of preventive measures. The fear of being labelled as an addict or being associated with drug use discourages both schools and families from openly engaging with substance abuse services. This avoidance further exacerbates the problem by limiting early intervention efforts. For example, representatives from community-based programmes discussed how stigma affects the centre's work, particularly about addiction.

"Youth often struggle to consistently attend services or generally are unwilling to engage in services due to the stigma surrounding addiction. The misconception that the centre shares information with legal authorities (like IKAN) also poses a barrier. Youth are often deterred from

seeking help due to the fear of being stigmatised and misconceptions about the nature of the rehabilitation centre."

Even though community-based programmes strive to maintain anonymity and create a non-hospital environment to reduce these fears, stigma remains a significant barrier to consistent participation. Educational institutions face similar challenges, with representatives of public authorities in the education sector highlighting the difficulty in obtaining parental consent for mental health interventions with minors. Parents often resist consent because they fear their children will be stigmatised if they are identified as receiving mental health services. This reluctance delays or prevents crucial early interventions for children and adolescents in need of support. Representatives from non-governmental programmes noted that while there has been some improvement in addressing stigma in the mental health sector over the past four years, it persists, particularly among the parents of youth. The stigma affects how parents perceive mental health issues in their children and often leads to resistance to seeking professional help.

This was confirmed during the focus group with parents, as they expressed similar challenges. While youth themselves are gradually becoming more open to discussing mental health, parental prejudice remains a significant barrier to accessing services. Stigmatisation and prejudice remain also significant barriers for youth seeking mental health support. Youth aged 24-35 highlighted that self-stigma plays a significant role in their reluctance to seek help, with many feeling ashamed or uncomfortable speaking up about their mental health issues. In addition, youth from vulnerable backgrounds, particularly those with immigrant experiences, expressed a profound reluctance to disclose their mental health problems due to fears of negative reactions from their peers and teachers. Many of these young individuals articulated feeling marginalised and unwelcome in specific school environments, where they were perceived
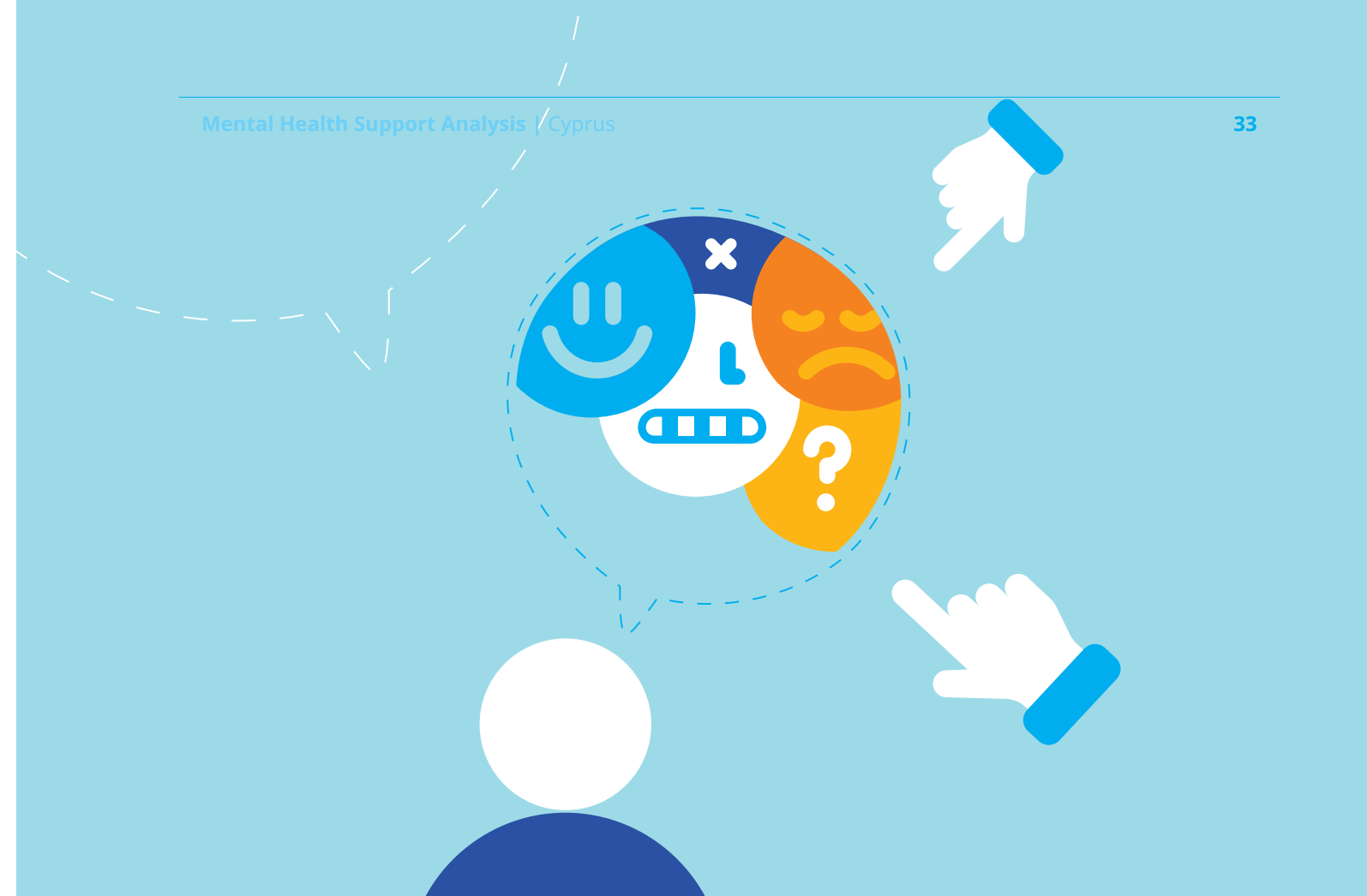
primarily as migrants rather than valued members of the community. They shared that this sense of alienation exacerbated their mental health challenges, as they believed that seeking help could lead to further misunderstanding. Older youth mentioned that stigma and a lack of information contribute to their reluctance to seek help for the mental health challenges they face. Many expressed uncertainty about whether the issues they are experiencing require assistance from a specialist, often believing that their struggles may be transient and manageable on their own. This mindset can lead to a harmful cycle of avoidance, as some youth fear that asking for help could expose them to stigma or negative judgment from peers and society.

In particular, youth of several ages (15-19 years old) referred to the lack of anonymous contact options for seeking mental health services:
"Youth may hesitate to reach out for help due to fears of judgment or exposure, which can prevent them from accessing the support they need. Addressing these challenges is essential for creating a more

supportive mental health environment for youth in Cyprus."

Similarly, mental health practitioners noted that,
"Adolescents often face challenges due to the need for parental consent, making it difficult for them to seek confidential help, especially for sensitive issues."

Parents also expressed concerns about the stigma attached to mental health services in schools, as many children fear they would be labelled or ostracised by their peers if they sought help. This combined stigma from both within and external environments creates a challenging atmosphere for youth needing support.

Lack of youth-friendly services and youth engagement
During the youth focus groups and the interviews with youth representatives and key stakeholders, it was pointed out that there is a lack of youth-friendly services and programmes, highlighting the importance of more youth engagement. Despite efforts to provide mental

health and prevention services, the absence of environments that genuinely appeal to youth hinders outreach and engagement. Youth are less likely to participate in programmes or visit centres not designed based on their preferences and needs. One of the key challenges in addressing youth mental health in Cyprus is the lack of peer support networks and youth-led mental health initiatives. This absence limits opportunities for youth to connect with others who share similar experiences, reducing their access to empathetic support and community-driven solutions.

All participants agreed with the lack of youth-friendly services. Many pointed out the fundamental flaw in the current system: most centres, even those providing some treatment or prevention services, are not seen as appealing or welcoming to youth. The representatives of non-governmental services emphasised that youth need spaces where they feel comfortable, ones that they can consider their own, and that

operate at times that suit their schedules—beyond the typical working hours of 7:30 AM to 3:00 PM.

According to a representative,
"Simply offering workshops or structured programmes is insufficient to draw them in. Youth need places that foster a sense of belonging and offer a variety of activities beyond just mental health support, including opportunities for social interaction, peer exchange, and broader experiences, such as international exposure, where they can see what their peers in other countries are doing".

Allowing youth to play an active role in organising and managing these spaces with professional oversight was a suggestion for a more effective, youth-oriented approach. Similarly, representatives from governmental and public authorities reinforced the idea that

traditional, lecture-based approaches do not resonate with youth.

Their feedback was clear:
"Youth do not want us to be in the mentor's style, the theoretician... Instead, they respond better to interactive, small-group activities where they feel like equals in the conversation. Experiential workshops—where they can actively participate and connect with topics in a hands-on way—are far more effective than passive listening environments. These workshops should be tailored to their interests and needs, conducted in small, engaging settings that encourage open dialogue and foster a deeper connection to the material being discussed."

Similarly, youth aged 18-24 agree on the lack of youth-friendly mental health services across Cyprus. Many reported that existing facilities, particularly inpatient care facilities, are not tailored to meet their needs. These services often lack the flexibility, accessibility, and approachability required to engage youth effectively, leading to disconnection and reluctance to seek help.

For instance, one of the youth participants mentioned that:
"...inpatient facilities are often perceived as clinical or intimidating environments, which can deter youth from utilising them unless they face serious crises".

One of the significant challenges in the current mental health landscape is the lack of awareness among young people regarding the existence and accessibility of digital mental health tools. These tools (apps, online platforms, and virtual therapy options) have the potential to provide immediate, discreet, and user-friendly support for mental health concerns. However, in Cyprus, many young individuals are either unaware of these resources or do not consider them viable options for seeking help. This gap in awareness

limits the utilisation of innovative solutions that could complement traditional mental health services, particularly for those who may face barriers to accessing in-person care.

Mental health practitioners repeated these concerns, underscoring that youth involvement in designing and implementing mental health services is minimal. This disconnection means that services are often not aligned with the youth's real needs or preferences. Practitioners noted the lack of tailored mental health education in schools, which further limits the effectiveness of preventative measures. They argue that involving youth in developing mental health programmes would ensure that services are more engaging, relevant, and accessible.

According to a parent,
"This approach could help bridge the gap between mental health services and youth, fostering a more proactive culture where youth feel comfortable seeking support before issues escalate."

Both youth and practitioners agree that improving mental health support in Cyprus requires making services more youth-friendly, with youth actively involved in their design and delivery.

Lack of awareness concerning the available services and programmes
Most youth and stakeholders repeatedly mentioned the lack of awareness of existing services and programmes. According to participants, this creates significant barriers to accessing support, with poor communication playing a key role. According to the participants of youth-led organisations, many youths are unaware of the mental health services that exist. Culturally, they often do not proactively seek out information about mental health care or prevention on their own, instead relying on their parents to navigate these issues. This practice, combined with a general tendency to only look for help when a problem becomes urgent, results in a reactive approach to mental health rather
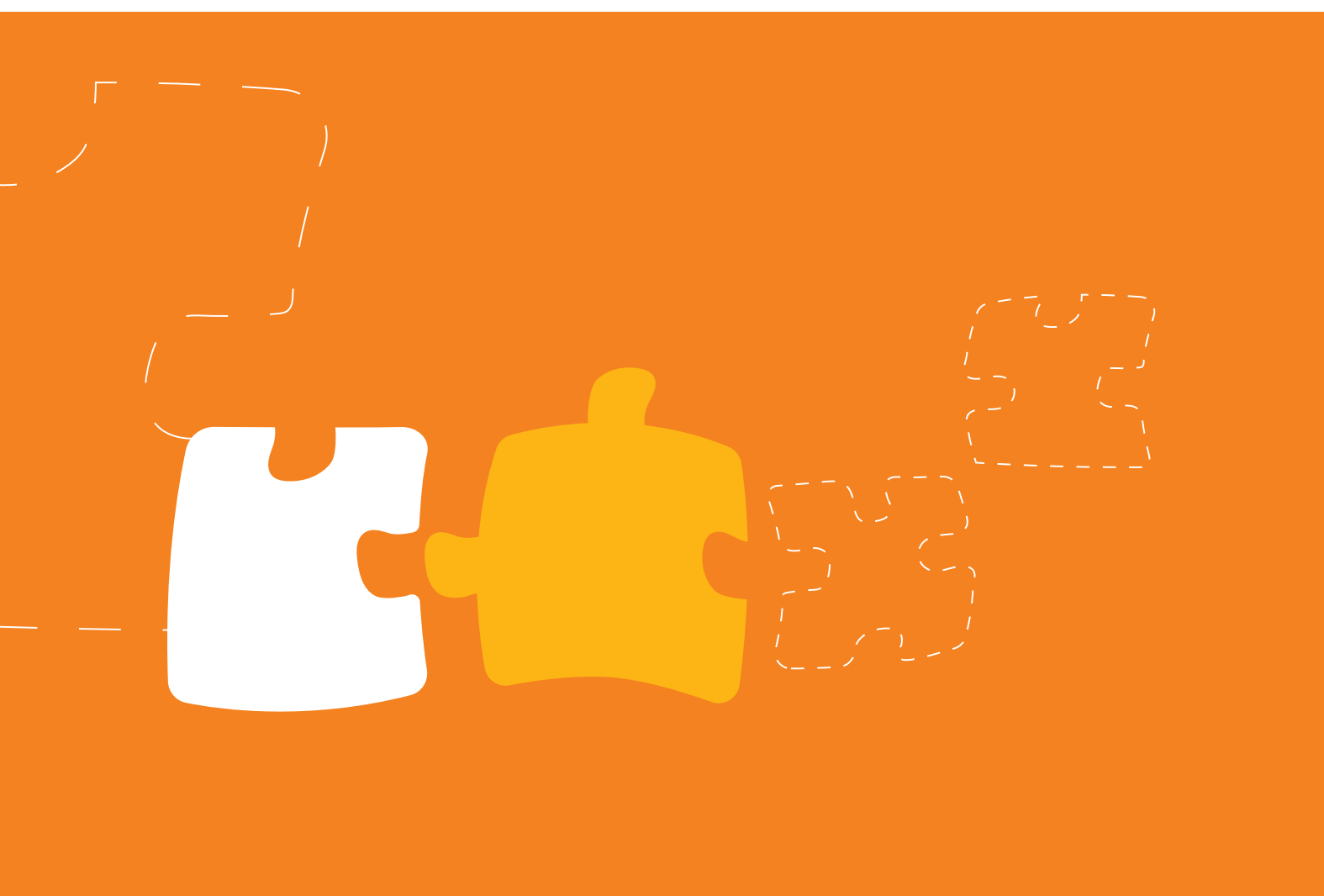
than a preventive one. Some emphasised that this lack of awareness about the services available to youth can hinder early intervention and support. Similarly, representatives from youth-led organisations underscored the issue, noting that many youths do not know where to turn for help. Even when services are available, they are not well-promoted, leaving youth unaware of the resources they can access. This lack of knowledge extends beyond the services themselves. Many youths are unfamiliar with how to manage their mental health issues and do not know where to seek reliable information or support. This further compounds the difficulty of accessing mental health care, especially in a context where the topic of mental health is still not widely discussed or integrated into everyday conversations.

Similar insights were derived from focus group discussions with youth, who pointed out that some programmes and services are technically offered in schools and universities. However, there is a general lack of information about their availability. Many feel these services were understaffed and lacked the specialisation necessary to address their needs effectively. At the local level, youth reported limited awareness of systematic programmes. They noted that only a few short experiential seminars are conducted by municipalities or NGOs, which often do not provide sufficient support. Similarly, it was noted that while there are individual initiatives by various NGOs and organisations focused on mental health, these efforts are not widely known or coordinated. They expressed awareness of the mental health services offered by the University of Cyprus, where students can fill out a form to undergo an assessment and, if necessary, be seen by a specialist; however, they mentioned that there is often a waiting list for these services. Students recalled that a telephone helpline was once available for youth seeking support. However, they were unsure about its status and that of the emergency hotline for addiction services. Similarly, youth aged 15 to 19 referred to the lack of mental health education programmes in schools and universities, which does not allow a deeper understanding of mental health issues

and can perpetuate stigma and prevent them from seeking help. Moreover, youth aged 18 to 24 highlighted the significant challenge of accessing accurate information about mental health issues.

They noted that,
"...finding reliable resources often requires extensive searching and research on their part, particularly online. This process can be time-consuming and frustrating, as many young individuals struggle to navigate the vast information available. Moreover, the prevalence of misinformation and disinformation on the internet poses additional risks."

Youth expressed concerns that they might inadvertently rely on unreliable sources, leading to misconceptions about mental health and potentially harmful decisions regarding their well-being.

Most participants indicated a lack of clarity regarding referral mechanisms and coordination procedures. They primarily knew of the school counsellors as a point of contact for mental health services, with some mentioning university services but noting the often lengthy waiting lists. This underscores a critical issue: the lack of accessible information and awareness about where to seek help. Students also expressed the view that mental health services and programmes may not be easily accessible, and their effectiveness often depends on the specific characteristics of each case.

For instance, in cases involving children, the lack of parental consent can pose a significant barrier to accessing necessary support.

Some participants noted that,
"...both parents may refuse consent, either due to stigma or denial regarding their child's mental health issues. This denial can hinder the child's ability to receive the help they need, as parents might

be aware of the problem yet still resist acknowledging it or seeking treatment".

Difficulty in accessibility, particularly for youth of vulnerable groups
Several recurring challenges in reaching and engaging vulnerable youth populations were identified. One of the most prominent issues mentioned was the difficulty in reaching vulnerable groups, especially those in rural or underprivileged areas. Representatives from community-based services emphasised that the efforts to provide financial assistance for transportation have not fully addressed the issue of accessibility, which remains a persistent challenge for youth living in remote areas. Similarly, representatives of the government echoed these concerns, noting that vulnerable groups face barriers to accessing mental health services, including those with complex social backgrounds.

Some of them pointed out that:
"School attendance is particularly problematic for youth who have experienced trauma or instability in their personal lives. Many have already dropped out of school, which makes it even harder to reach them consistently."

This was further highlighted by representatives from non-governmental organisations, who explained that reaching youth with migrant backgrounds or those living in disadvantaged areas is particularly challenging, as they often face multiple layers of exclusion from services due to economic, language or regional reasons. Ensuring consistent attendance in therapy sessions has proven difficult, particularly for youth in rural regions or vulnerable youth who struggle to maintain regular participation and engagement in programmes designed for at-risk youth.

In addition, unaccompanied children, who are among the most vulnerable populations in Cyprus, face significant challenges in accessing essential services. According to the stakeholders, transportation issues are a significant barrier,

particularly for those children housed in state shelters. They often lack organised transport to reach critical resources, such as education, recreational activities, and psychosocial or legal support services. Additionally, language barriers further exacerbate accessibility difficulties. While some NGOs provide interpretation and translation services, stakeholders mention these efforts as inconsistent and insufficient, leaving children unable to fully utilise education, legal aid, and healthcare services. Consequently, these compounding challenges create an environment where unaccompanied children are systematically excluded from the support systems they urgently need.

Overall, representatives from community-based services discussed how the absence of a legal framework can make it challenging to keep youth engaged and offer them the opportunity to attend therapy sessions. Even when logistical challenges like transportation are addressed, there is often a lack of motivation or incentive for youth to participate regularly. Building trust with vulnerable youth emerged as another significant challenge. Representatives from the private sector described the difficulties faced even within structured environments like schools. Although they may have physical access to these environments, gaining acceptance and building trust with the students is often difficult. This issue is even more pronounced for those outside the school system, such as youth who have dropped out or been expelled. They explained that it is crucial to first break through the distrust of these groups and help them understand that the programme is not designed to judge them or impose authority but rather to empower them. Establishing this trust is a delicate process, especially with youth who have complex social backgrounds (children of migrant families, those with unemployed parents, or those whose families rely on social welfare benefits). These youth often face multiple barriers, making the relationships necessary for meaningful engagement harder.

Such representatives mentioned:
"...we also have a preparatory

apprenticeship programme, which targets the population expelled from schools. The needs and challenges are very different for those children, and the challenge is to get them in a space where they will not see you as a teacher but as a representative of society... you are there to make their voice heard. So, the challenge is to penetrate this population and recognise their real needs so that they can feel that they are involved in this... The big challenge is identifying the population, keeping them, and giving them something attractive. Going to a school where the structure is organised is not a big issue. The issue is to be able to reach those 15 who are no longer in school or meet them outside of school to diagnose what the real needs are."

The youth discussions also revealed significant barriers to mental health service accessibility for vulnerable youth, particularly those aged 24-35. Many youths expressed frustration over the low accessibility of services and insufficient information about the available programmes.

They mentioned that,
It depends on the families (e.g. especially for children and minors; parental consent is needed if they are referred somewhere). Therefore, if parents are not positive, children and minors cannot access it."

"Many times, the only support is the emergency room of a hospital - but youth often do not know that they can go there."

"There is no accredited online platform where youth can find valid information and support."

"It takes a lot of research by youth themselves to find information about mental health issues or services available online. This entails risks, such as online

misinformation and disinformation."

"...there is no accessibility since, firstly, there is no information about the services provided, nor about mental health issues in general. How can I address them if I do not know they exist?"

Similarly, mental health practitioners emphasised that issues like parental consent, fear of stigma, and confidentiality concerns further hinder access to timely care for adolescents. The situation is especially critical in rural areas, where geographical disparities result in fewer resources and mental health facilities. In addition, youth from vulnerable backgrounds highlighted that language barriers significantly restrict their access to current mental health services, as many do not speak Greek or English. This limitation prevents them from fully understanding available resources and effectively communicating their needs. This results in isolation, inability to seek support and exacerbated mental health issues. Vulnerable youth living in shelters mentioned that they often lack someone to talk to as they struggle to trust those around them. Many expressed feelings of isolation, worsened by the absence of parents or relatives with whom they could share their fears and problems. This lack of trusted support makes it challenging for them to process their emotions and seek help for their mental health concerns.

Another challenge noted by students is the high financial cost of accessing mental health services without a referral through the General Health System. This financial barrier can discourage youth, especially those with low socioeconomic backgrounds, from pursuing necessary mental health support, leading to untreated issues that could worsen over time.

Insufficient services and lack of specialised programmes
The findings from youth and stakeholder interviews and focus groups underscored various challenges regarding the effectiveness of

current youth programmes. Several stakeholders emphasised the importance of assessing programmes, even though it is hard to measure effectiveness. For example, representatives from non-governmental organisations pointed out that, while their interventions are evaluated through standardised tools, such as "Ξέρω τι ζητάω", these assessments focus more on the youth's satisfaction with the programme rather than the actual effectiveness of the interventions. Although the youth generally express satisfaction, this does not provide a complete picture of whether the programmes achieve their intended outcomes, especially for vulnerable populations. Other representatives highlighted gaps in immediate mental health support services. There is no 24-hour helpline to provide guidance or urgent assistance.
Another critical concern raised by multiple stakeholders from youth-led organisations is the insufficient integration of mental health education within the school system. While some preventive programmes exist, their implementation is inconsistent, often failing to reach all students comprehensively. The lack of systematic health education, particularly in mental health, results in missed opportunities

for early awareness and intervention.

Representatives from non-governmental organisations pointed out that:
"Preventive measures such as workshops and seminars are sporadic and lack the depth needed for long-term impact. The absence of a structured mental health curriculum does not allow students to gain knowledge or learn about tools needed to understand and manage their mental health from a young age".

The importance of tailoring programmes to the diverse needs of youth was another significant insight. Representatives from the private sector emphasised that youth are not a homogenous group; their challenges vary significantly depending on age, socio-economic background, and region. For instance, while some youth have access to a wide range of opportunities and resources, others do not, as they live in areas where services are limited or inaccessible. The representatives criticised the design of many youth programmes, noting that they are often developed with a one-size-fits-all approach,

which fails to address the specific needs of different subgroups.

As they put it,
"The biggest mistake made so far is that the design of programmes is done along general axes. This generalised approach tends to favour those who need the least support while missing the most vulnerable, including youth from migrant backgrounds or those with language barriers, such as Arabic speakers, who struggle to express emotions in Greek".

Moreover, the mental health needs of refugee children, especially unaccompanied minors, are insufficiently addressed, leaving a critical gap in their overall care. Many of these children have endured severe trauma, including experiences of violence and displacement, yet access to psychosocial support services remains limited and inconsistent. To effectively address these needs, psychosocial support must be integrated into educational and recreational programmes, creating a more holistic and accessible approach according to the stakeholders. Prioritising initiatives, such as group therapy sessions, peer support networks, and individual counselling, can provide these children with emotional stability and resilience. Such integrated support systems are essential for fostering healing and enabling these vulnerable children to rebuild their lives. Stakeholders highlighted that access to tailored language programmes is crucial for the integration and personal development of unaccompanied children. However, it remains one of the most glaring gaps in their support system. The lack of consistent, intensive, and inclusive language programmes significantly impedes their educational progress, isolating them from their peers and opportunities to thrive. According to the stakeholders, this gap extends beyond academic achievement and profoundly impacts their mental health and sense of belonging. For children residing in shelters, the prolonged periods of idleness exacerbate feelings of hopelessness and stagnation, reinforcing the perception that they

have no future in Cyprus. This combination of educational neglect and social isolation underscores the urgent need for targeted interventions to support these vulnerable youth.

Additionally, recreational opportunities were characterised as vital for the mental health and social integration of unaccompanied children. However, they remain critically underdeveloped, as mentioned by stakeholders working with this group of youth. Despite a clear interest in activities such as sports, arts, and other creative outlets, children in shelters face limited or no access to these programmes. Structured opportunities like sports teams, gym memberships, or art workshops are nearly non-existent, leaving these children further isolated from their peers and the broader community. This lack of recreational outlets significantly exacerbates feelings of trauma, stress, and isolation, compounding their already vulnerable mental health. Stakeholders suggested that establishing structured recreational programmes could provide much-needed stability, routine, and opportunities for emotional healing, fostering resilience and a sense of belonging.
Stakeholders also stated the lack of structured transitional programmes for unaccompanied children nearing adulthood in support systems, leaving these youths unprepared for the challenges of independent living. According to the stakeholders, many young adults are ill-equipped to navigate autonomy without access to comprehensive programmes that build life skills, provide vocational training, and facilitate social integration. This shortfall not only impacts their ability to secure stable livelihoods but also takes a toll on their mental health, as the uncertainty and lack of preparedness breed anxiety and feelings of inadequacy. Addressing this issue requires the development of targeted transitional programmes that empower these young adults with the skills, confidence, and resources needed to lead independent and fulfilling lives.

Resource constraints were another prominent issue raised by stakeholders, particularly those

of the public sector. It was pointed out that financial limitations significantly hinder the effectiveness of existing programmes. While numerous programmes are available, funding is insufficient to meet the growing needs of vulnerable groups. This financial instability creates uncertainty, as many programmes must be re-evaluated and re-funded every few years, leading to disruptions in service continuity.

Representatives from governmental services stressed that:
"Resource constraints are a major challenge for PERSEAS's ability to continue and expand its programmes. These constraints are not only due to the availability of resources but also exacerbated by budget cuts that affect personnel and the facilities they operate from".

The interviews also revealed gaps in specialised services, particularly for specific mental health issues, such as eating disorders. For example, some representatives pointed out that current facilities do not often cater to young adults with eating disorders, forcing them to seek private treatment or services abroad. This gap in care leaves vulnerable individuals without the necessary support during critical moments in their mental health journey. Other representatives highlighted the lack of community-based initiatives. The current initiatives are being implemented within schools (e.g., EXELIXIS, "Ξέρω τι ζητάω").
On the other hand, youth highlighted the notable lack of mental health programmes aimed at less severe disorders.

One youth articulated a concern, stating,
"Mental health services are targeted at people with serious mental health problems. They are not youth-friendly and do not focus on prevention or more 'light' cases that do not require hospitalisation."

This highlights a significant gap in services tailored to youth with milder issues, such as

anxiety or stress. Additionally, youth pointed out the lack of specialisation in certain areas, mainly eating disorders and effective interventions for psychosis. Mental health practitioners echoed these concerns when discussing existing programmes. They recognised that initiatives like "Ξέρω τι ζητάω," which focus on substance abuse prevention, as well as those provided by the public health sector (SHSO), are pretty theoretical. Resource constraints, bureaucratic delays, and geographic barriers undermine their practical effectiveness.

As mentioned by a mental health worker,
"For instance, underserved rural regions, such as X Village and Y Town, face significant challenges in accessing these programmes, leading to a concerning disparity in service distribution throughout the country. This uneven access further complicates the landscape of mental health support for youth, underscoring the need for a more inclusive and comprehensive approach".

Staff shortage and lack of trained professionals
Stakeholder interviews reveal challenges related to understaffing and resource limitations across various programmes and services that aim to support youth mental health in Cyprus. These challenges constrain the capacity to provide services and affect the ability to expand their reach and effectively address the needs of vulnerable populations. A key example comes from a governmental programme with just 10 professionals nationwide. While this small team has managed to maintain the quality of services provided, the limited staffing severely restricts the programme's ability to scale up and meet the growing needs of youth.

As the programme representative puts it,
"We are careful not to create needs because we currently do not have the capacity to meet them. The programme, which can currently support only 6 to

12 schools out of 180 during the school year, faces immense pressure to expand its workforce to address the larger youth population. The programme would need to grow significantly to around 50 to 100 workers to cover the entire country. While impactful, the current structure does not allow for large-scale intervention, which is urgently needed to address the mental health needs of youth nationwide".

Other governmental organisations echoed similar concerns regarding the lack of permanent psychologists in schools, describing it as a "huge gap" in the promotion of mental health. The absence of trained mental health professionals within educational settings limits the ability to provide early intervention and ongoing support to students. Additionally, the insufficient promotion of university counselling centres further exacerbates the issue, particularly among older youth, who are unaware that such services exist on their campuses. This lack of awareness, coupled with inadequate staffing, reduces the opportunities for young adults to seek help, especially at a critical time in their lives. Non-governmental representatives agree that resource constraints, including financial limitations and a shortage of trained professionals, are significant barriers to expanding their services. These constraints limit the centre's ability to reach more needy individuals despite the growing demand for mental health support. Similarly, Social Welfare Services (SWS) representatives expressed concerns about understaffing and difficulties in providing adequate care for children.

As explicitly stated,
"The lack of trained personnel affects the centre's ability to deliver comprehensive services, leaving gaps in care for vulnerable children and youth. The significant lack of proper facilities and staffing results in long waiting lists for psychological support".

Moreover, other key stakeholders emphasised the importance of assigning permanent psychologists to schools.

As stated,
"Without these essential professionals (educational psychologists) in the educational system, it is difficult to foster a culture of mental health awareness and support within schools and provide the students with the necessary resources to address their psychological well-being".

The insufficient number of trained professionals and the lack of proper facilities mean extended waiting periods before youth can access the help they need. This delay in support can be particularly detrimental to those dealing with pressing mental health issues, as early intervention is often crucial for effective prevention.

Lack of coordination and collaboration among providers
Most of the stakeholders referred to the poor coordination and communication between numerous services addressing youth mental health, the fragmented efforts, the delays in service delivery, and inconsistent outcomes, undermining the overall effectiveness of the mental health support system in Cyprus. Stakeholders referred to the important work implemented by several existing programmes (i.e., the programme "ΣΤΟΧΟΣ") but emphasised that preventive measures are neither systematic nor fully integrated into these existing services.

A representative stated that,
"There is a clear need for well-structured prevention programmes involving youth. Such programmes are currently missing from the existing framework. The absence of preventive services hinders early intervention in mental health issues."

Representatives of non-governmental organisations emphasised the gap in communication and coordination between key services, such as education and welfare, highlighting that this prevents creating a seamless support system for vulnerable youth. Representatives of governmental authorities echoed these concerns, pointing out that coordination among organisations dealing with youth mental health is insufficient and results in fragmented efforts. This fragmentation means that services often work in isolation, without a unified approach for comprehensive care. Others further elaborated on the issue, noting that the lack of effective collaboration between agencies at a national level results in inconsistent service delivery.

According to a representative of a non-governmental initiative:
"Effective collaboration between various agencies and a coordinated approach at the national level is often lacking. Therefore, the mental health system does not have a cohesive strategy for addressing youth mental health and building resilience on a larger scale".

This disjointed approach means gaps in care and support. While some services may function individually, they fail to work together towards a common goal.

From a policy perspective, the Commissioner for Children's Rights (CCR) also identified the need for better coordination within the mental health system, emphasising that collaboration must improve for more effective system functioning.
"Without a coordinated effort, stakeholders struggle to provide timely and comprehensive services to youth, leading to inefficiencies and prolonged waiting times for critical interventions."

Other stakeholders reinforced the importance of integrating these services into mainstream systems, such as education. The representative noted that current efforts are essentially "ad hoc" and often lack the consistency and planning to embed mental health support within the educational framework. Moreover,
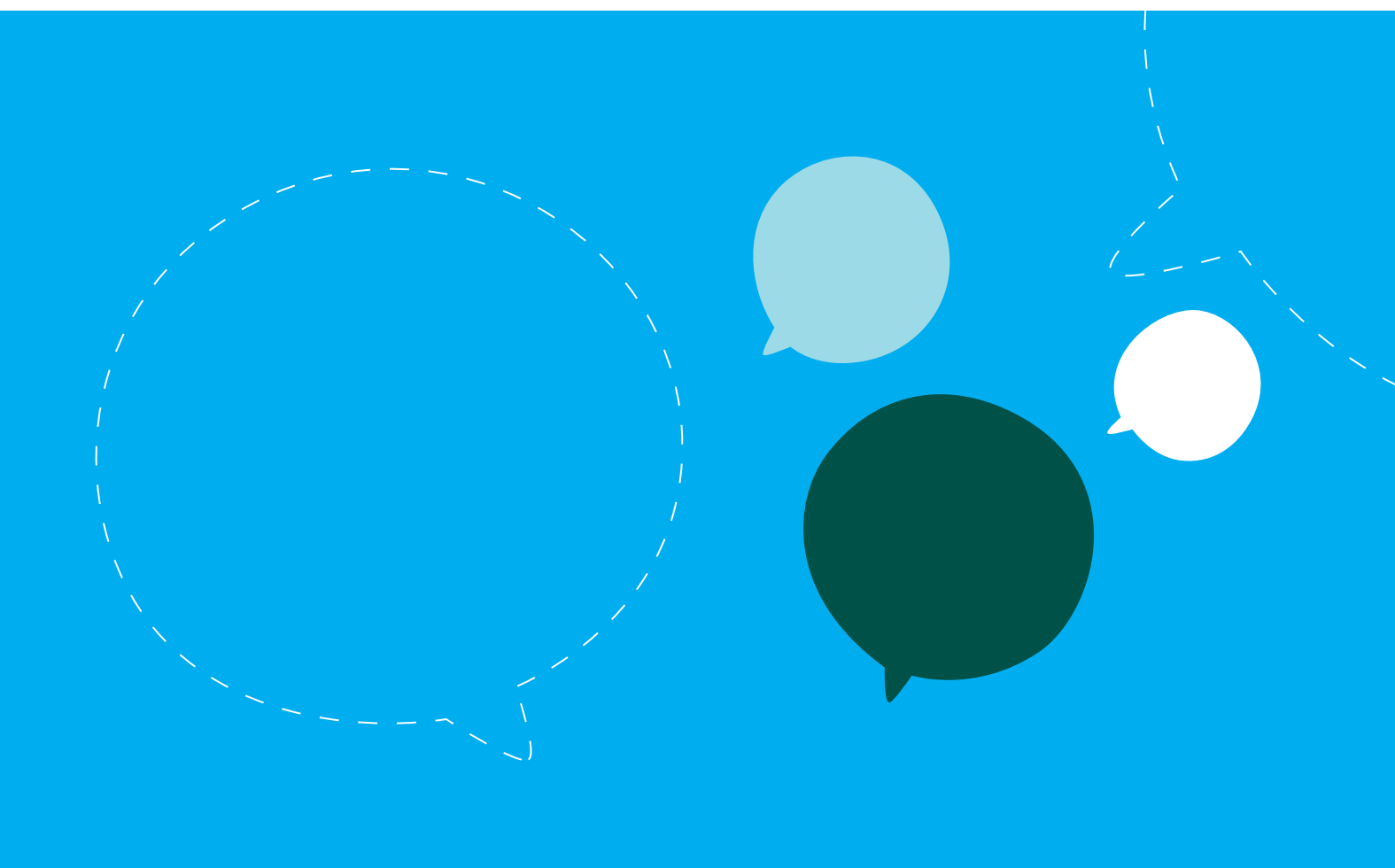
they highlighted the administrative hurdles that further complicate coordination efforts.

According to a representative, *"Some agencies show limited interest in collaborative efforts, which hinders the effectiveness of social services. Additionally, slow and cumbersome administrative processes delay the provision of services, compounding the problem. This lack of streamlined communication and coordination not only frustrates service providers but also directly affects the youth, who rely on these services for timely support."*

Similarly, another representative highlighted that, *"...Mental health is not just about the Ministry of Health narrowly or the GHS.*

It is about other Ministries as well. To give you an example, one of the pillars is housing, education, and vocational rehabilitation for people in need. So, the Deputy Ministry of Welfare, the Ministry of Labour, the Ministry of Education, and the Ministry of Justice must cooperate constructively and actively because other various issues may arise."

Many youths also reported being unaware of any established mechanisms for cooperation. Those with more knowledge noted that coordination between services is non-existent. For instance, according to a young participant, social and welfare services operate under separate ministries from mental health services, creating a disjointed system. Mental health practitioners confirmed these concerns, describing the mental health system as

fragmented with poor coordination and lengthy delays in care delivery.

A mental health practitioner mentioned that, *"This fragmentation is particularly detrimental for individuals with conditions like learning disabilities, as it hampers timely access to necessary support."*

Moreover, the lack of collaboration between schools, healthcare providers, and mental health professionals exacerbates these issues, leading to further delays in treatment and discontinuity in care. This underscores the urgent need for a more integrated approach to mental health services and cooperation across different sectors.

Insufficient mental health policy framework and legislation

Some participants referred to barriers relating to the policy framework and the current legislation in terms of mental health, particularly youth mental health. Representatives of governmental organisations underscored the challenges in translating policies into actionable programmes that adequately meet the needs of specific populations, particularly youth and high-risk families. While policies exist, turning them into effective interventions that address these groups' unique challenges remains complex and often requires more nuanced approaches. For example, the stakeholders highlighted that the current system does not sufficiently address the significant challenges refugee children face in accessing legal representation, obtaining legal information, and navigating the often-conflicting roles of other providers. These systemic gaps leave unaccompanied children particularly vulnerable during critical legal and procedural processes, including asylum applications and family reunifications. Without adequate legal support, these children struggle to understand their rights and advocate for their needs, leading to prolonged uncertainty and heightened stress. According to stakeholders working with unaccompanied youth, this lack of clarity and support adversely impacts their mental health, compounding their sense of instability

and fear. Addressing these issues requires streamlined, child-friendly legal services and a more precise delineation of responsibilities within the responsible providers to ensure these vulnerable children are adequately protected and supported.

Other stakeholders brought attention to a significant legislative gap in the protection and support of children's mental health. One of the most pressing issues highlighted was the requirement for parental consent for children to access mental health services, which can lead to neglect of their needs. They noted that this requirement often results in children being unable to seek timely help, as some parents refuse to grant consent for referrals to educational psychologists or mental health services. This concern is echoed by other representatives of public authorities, who have expressed frustration over their inability to seek mental health support independently when they recognise they need it. Access to services such as school psychologists, which may not require parental consent, is more accessible but still limited. They also advocate for legislative reforms that would recognise children's developmental capacity to make decisions about their mental health, allowing older children to seek support without parental consent while still considering their age and developmental stage. This legislative change would help ensure that children can access the support they need without being hindered by parental refusal.

Insufficient information and education for families

Family dynamics emerged as a critical barrier influencing the mental health and well-being of youth, with several stakeholders emphasising the challenges posed by poor communication, domestic violence, and parental disengagement. Representatives from public services highlighted that dysfunctional family environments, such as those affected by poor communication or violence, directly contribute to the mental health struggles faced by many youths. As noted by representatives, these family issues affect the children's immediate well-being and

complicate their reintegration into society as they transition to adulthood. On the other hand, non-governmental representatives stressed families' crucial role in prevention, especially during adolescence—a period of intense personal development. The programme found that many parents assume they know what is best for their children, often dismissing the value of educational programmes. However, representatives mentioned that involving parents in workshops alongside their children helped build trust and open communication, especially regarding substance abuse. When parents are aware of issues such as this, they are better equipped to guide their children and provide support.

Despite the benefits of involving families, several stakeholders noted the difficulty in engaging parents. Often, parents prioritise their children's needs but neglect their mental health, undermining the effectiveness of family-oriented programmes. The CCR emphasised the importance of early intervention that targets entire families, particularly those dealing with disabilities or adaptability challenges. Addressing these needs holistically can reduce future mental health costs while providing comprehensive support.

Other representatives also identified the challenge of educating parents on modern issues such as internet addiction.
"Engaging parents and ensuring their active participation in prevention and intervention programmes is challenging. Many parents lack the awareness and tools to effectively communicate with their children about contemporary challenges, underscoring the need for targeted educational interventions aimed at both parents and children to foster a supportive home environment".

Parents themselves raised similar concerns during the Focus Group discussions. Youth aged 15-19 years old highlighted the need for better communication with parents regarding

mental health issues. Many parents may not be informed about the signs of mental health struggles or the techniques they can use to help their children, which can hinder their ability to provide adequate support at home.

4.2.4
Training needs of practitioners delivering mental health services in Cyprus

According to the desk and field research, the training landscape in Cyprus for practitioners in mental health services reveals both opportunities and challenges shaped significantly by the structure of the higher education system. Currently, the country lacks public bachelor's or master's degree programmes dedicated to mental health, which limits affordability for many prospective students. As a result, those seeking specialised education must turn to private universities, which offer a variety of programmes in nursing and mental health disciplines.

- Frederick University is one of the key providers of nursing education. Its degree in nursing is designed to meet European standards and is recognised by the Cyprus Nursing and Midwifery Council as well as Greece's D.O.A.T.A.P. While the programme primarily focuses on general nursing, its robust accreditation and alignment with professional directives enable graduates to pursue further specialisation, including mental health.

- The University of Nicosia offers a broader spectrum of options for students interested in mental health. Its Bachelor of Nursing is a four-year programme taught in English and Greek, aimed at equipping students with foundational knowledge and practical skills. For those looking to advance their expertise, the university also provides a Master's in Mental Health Nursing. This postgraduate program, delivered in Greek over three semesters, emphasises evidence-based practises and prepares students for diverse roles in community and institutional settings.

- The Cyprus University of Technology (TEPAK) is critical in bridging gaps in advanced nursing education. In addition to its undergraduate nursing degree, TEPAK offers a Master's programme in Advanced Nursing and Health Care Practice with a specialisation in Psychiatric and Mental Health Nursing. This programme addresses the need for skilled practitioners capable of working with both adults and children in various environments, including community mental health centres and addiction units. It emphasises ethical practises and aligns with guidelines from the World Health Organisation and the European Union, ensuring that graduates are prepared to deliver quality care.

- The European University of Cyprus (EUC) also provides valuable pathways for those pursuing mental health specialities. At the undergraduate level, its nursing programme prepares students for general healthcare roles

while offering clinical training opportunities. EUC's Master's in Nursing allows for specialisation in mental health, enabling graduates to apply for inclusion in the Registry of Mental Health Nurses maintained by the Cyprus Nursing and Midwifery Council. Additionally, the university offers a Master's in Child and Adolescent Mental Health, a unique programme that emphasises early intervention, research, and the development of inclusive practises for young populations.

Despite these offerings, the absence of public programmes in mental health remains a significant barrier for many aspiring practitioners. While private universities provide high-quality education, the cost can be prohibitive for some, limiting access to training in this critical area. As the demand for mental health services continues to grow, establishing affordable public programmes could address this gap and ensure that Cyprus is better
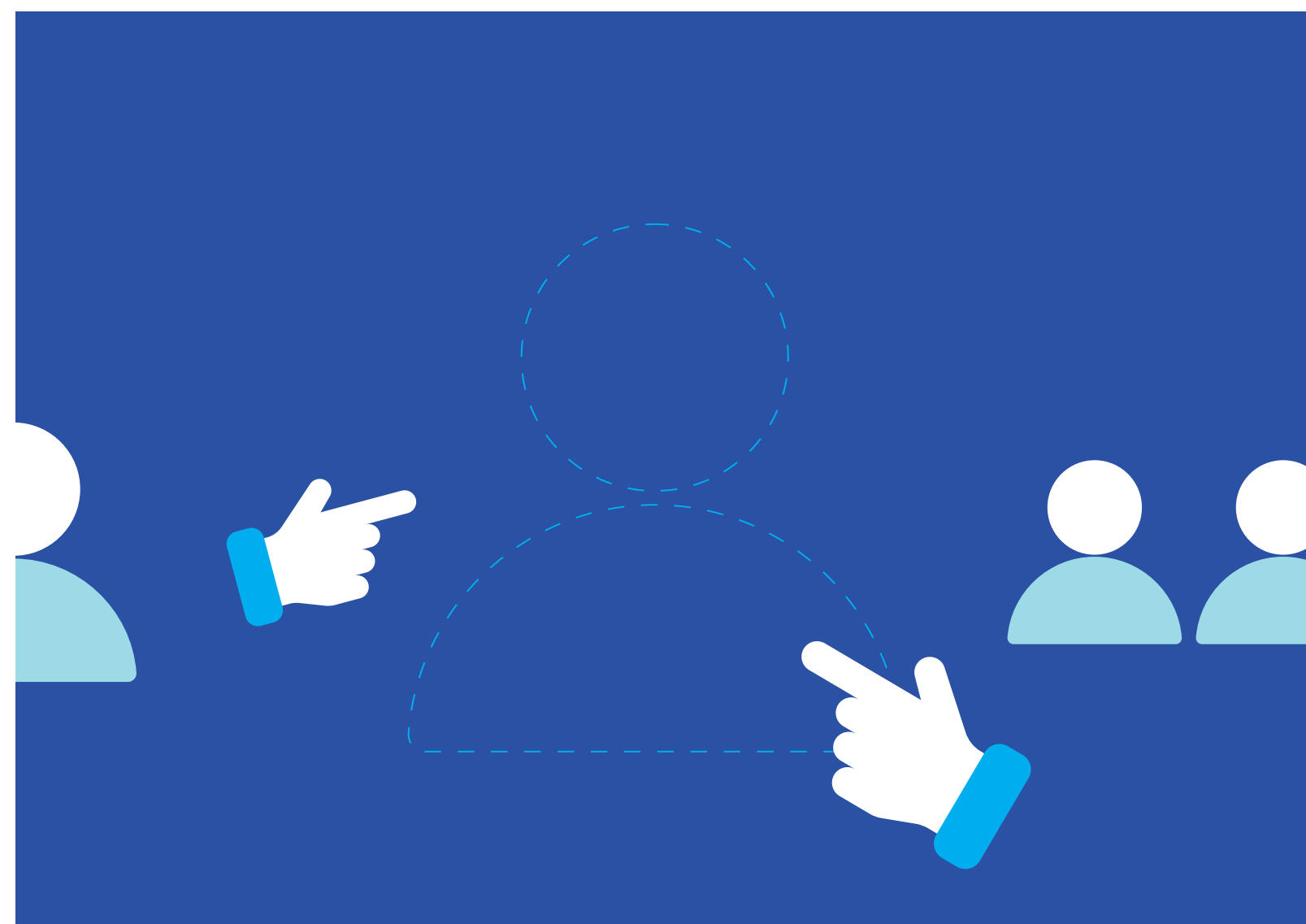
equipped to meet the needs of its population.

Beyond the initial professional development offered to specific groups such as nurses and psychologists, Cyprus lacks a comprehensive framework for both initial and continuous professional development for other critical practitioners in mental health services. Key professional groups, including youth workers, psychiatrists, counsellors, and teachers, face significant limitations in accessing tailored training opportunities that address their specific roles in mental health care. While private and state universities offer general master's degrees in counselling psychology, these programmes typically focus on broader psychological principles rather than specialised or practical applications in mental health contexts. Moreover, none of these programmes are explicitly designed to address youth mental health—a growing area of concern requiring focused attention and expertise. The absence of a recognised higher education programme centred on youth mental health represents a

critical gap in the system, especially given the unique challenges faced by young populations in contemporary society. Continuous Professional Development (CPD) for mental health practitioners is equally underdeveloped. Although ad hoc programmes occasionally address specific issues or provide short-term training, no systemic or ongoing CPD framework exists. This lack of structured development opportunities limits the ability of professionals to stay updated with evolving practices, emerging research, and the latest therapeutic interventions. The ad hoc nature of the current offerings often results in uneven access to CPD, with many professionals left without the necessary resources to enhance their skills effectively over time. Addressing this gap is crucial for advancing mental health services in Cyprus. Establishing a structured, ongoing professional development system and creating recognised educational programmes that focus on youth mental health could significantly improve the capacity of practitioners to meet the diverse needs of their communities.
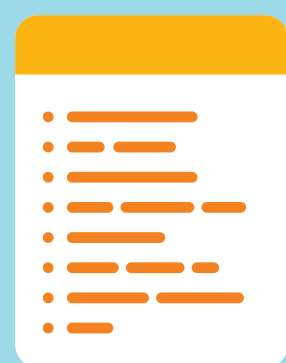
Moreover, in Cyprus, there is currently a lack of policies, measures, or guidelines that formally regulate the status of youth workers. However, efforts are underway through the project "Establishment of Mechanisms for the Validation of Non-formal and Informal Learning-pilot Implementation", led by the Ministry of Education, Sport, and Youth, to develop occupational standards for youth workers. Despite the absence of formal education pathways leading to a youth worker qualification, continuous professional development opportunities are available. These include participation in EU programmes such as "Erasmus+ Youth" and the "European Solidarity Corps, " offering training and professional growth opportunities. Additionally, Cyprus supports the development of youth workers through funded programmes like "Youth Initiatives", providing further training and learning experiences for both volunteers and professionals working in the youth sector. In particular, the representatives highlighted a gap in the training of youth workers, who are often not adequately prepared to handle mental health issues. This lack of training limits the effectiveness of youth workers in providing meaningful support to youth, further straining the already limited resources. Proper training in mental health is essential for youth workers to recognise early signs of distress and provide appropriate guidance or referrals to specialised services. It is important to highlight that youth workers should be trained to identify and address general psychosocial issues; however, when it comes to mental health concerns, these should be referred to professional specialists. This distinction ensures that youth receive appropriate, qualified support for more complex mental health needs while allowing youth workers to focus on their role within the broader support network. Another important need that was stated by stakeholders working with unaccompanied youth is the current guardianship system that is critically under-resourced, leaving it ill-equipped to address their complex needs effectively. Guardians and social workers, who play a pivotal role in safeguarding and supporting these vulnerable children, often lack the necessary training and resources to provide comprehensive care. Capacity building

through systematic and ongoing training in essential areas such as child protection, trauma-informed care, and case management is urgently needed. Enhancing these competencies would enable guardians and social workers to understand better and address the unique challenges faced by unaccompanied children, ensuring a more effective and supportive guardianship system.

Similarly, youth expressed that teachers, personal physicians, and paediatricians often lack the necessary training to identify and refer mental health issues, which limits early intervention. Furthermore, the absence of specialised youth workers in Cyprus further exacerbates this issue, as there are few professionals explicitly trained in mental health prevention for youth. Parents echoed these concerns, emphasising that schools offer only limited psychological support, with counsellors rarely available, and noted the lack of structured, continuous mental health services in educational settings.

They believe that,

"There is a particular gap in providing structured, ongoing mental health services. While some support is available through public health services, schools lack the necessary resources to provide continuous mental health care".

Mental health professionals further stressed that the complexity of youth issues today demands specialised training for those working closely with youth. They highlighted the need for tailored training programmes, such as Mental Health First Aid, for staff across various sectors, including health visitors, municipal workers, educators, peer educators, and youth workers. This lack of specialised training undermines the effectiveness of existing services, leaving many youths without the appropriate support. Both youth and parents emphasised the issue of understaffing in schools and universities regarding mental health professionals. Youth highlighted that schools and universities lack the presence of mental health professionals, making it difficult for students

to access timely support for issues like stress, anxiety, and bullying. Parents echoed these concerns, indicating a lack of school psychologists and other trained professionals who can provide regular mental health support.

They noted that,
"...while some mental health services are available through public health authorities, these are not well integrated into the school system, leading to gaps in addressing students' mental health needs effectively."

Both groups see this as a significant barrier to proper mental health care for youth. Youths aged 15-19 referred to the absence of school psychologists. The limited availability of mental health professionals in familiar environments can create barriers for students who need immediate support, leaving them without access to critical resources when they face mental health challenges. Also, older students mentioned that it is not always easy to find the right mental health professional as they must first feel comfortable with them.
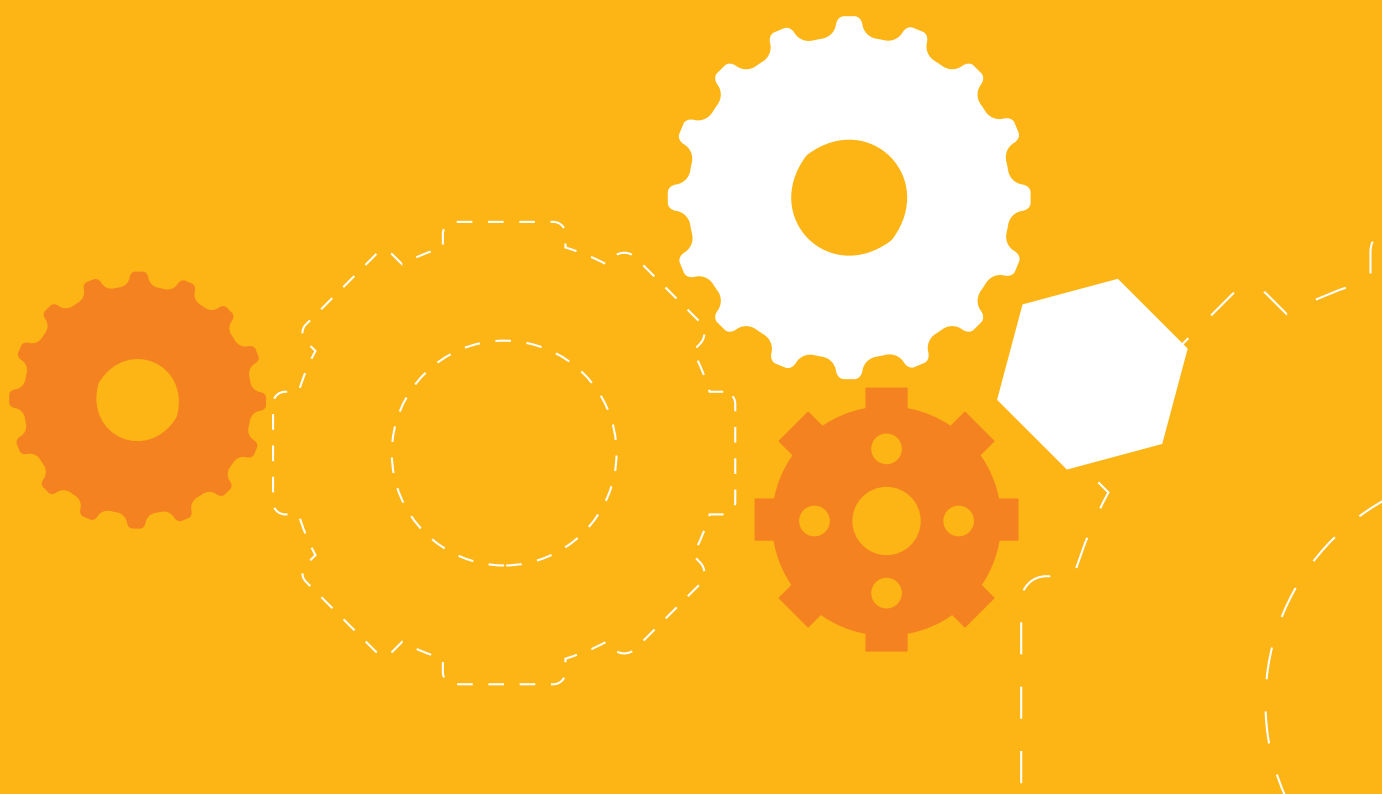
05.
Discussion & Policy Recommendations

The mental health of youth has emerged as a pressing public health concern (Westberg et al., 2020), given its profound impact on their well-being, development, and future outcomes. In recent years, particularly in the aftermath of the COVID-19 pandemic, adolescent mental health has garnered increasing attention across Europe, spurring the development of awareness campaigns and policy initiatives. This national study offers a detailed examination of Cyprus's mental health sector, drawing on key stakeholders' perspectives to shed light on the current state of systems, services, and mechanisms available to address youth mental health needs. The study's desk and field research identified several challenges and barriers.

The stigma attached to mental health in Cyprus remains one of the most significant barriers to seeking professional help for mental health issues. Stigma has been defined as a status of loss and discrimination of individuals with mental health problems due to negative prejudice from the general public (Mousoulidou et al., 2021). Cultural beliefs and societal attitudes contribute significantly to this issue, particularly among youth, who may internalise negative perceptions about mental health issues. The findings of previous studies have discussed the stigmatisation of specific groups of people (i.e.., HIV-diagnosed) or vulnerable populations at high risk and the impact of traditional beliefs of the society on those people's well-being and mental health (Kouta et al., 2013). Traditional beliefs about mental health, which often view such issues as a personal failing or a source of family shame, are prevalent in Greek-Cypriot society. These beliefs perpetuate stigma and discourage youth from seeking support (Tzouvara et al., 2023).
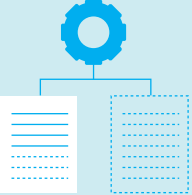
Social stigma and the requirement for parental consent further hinder access, especially for minors. Another barrier is the lack of awareness and recognition of these concerns. Many youths do not acknowledge their mental health struggles, often due to inadequate mental health education and the absence of literacy programmes in schools and communities (Alexi et al., 2018). This lack of awareness, with fears of judgment and concerns about confidentiality, leads to a reluctance to seek professional help. Instead, many youths prefer turning to their immediate social circles—family, friends, or even priests—rather than formal services. Additionally, social isolation and a lack of a supportive environment can further prevent open discussions about mental health. However, strong social support is known to act as a protective factor against negative feelings (Mousoulidou et al., 2021).
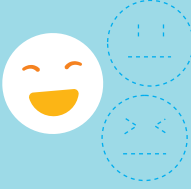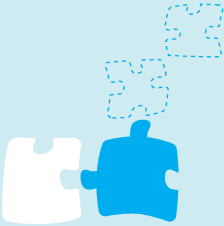
Moreover, the availability of mental health services regarding prevention is significantly limited by inadequate resources and a shortage of trained professionals specialising in youth mental health care. Also, the lack of specialised youth mental health services means that many youths do not receive appropriate or timely care, which can have long-term detrimental effects on their mental health and overall well-being. Furthermore, a critical component of supporting youth is the professional development of the workforce involved with them. The inadequate training of teachers and other professionals in recognising mental health issues, along with the absence of certified online platforms, leaves youth relying on unreliable information. Also, youth participation in evaluating current mental health services and engaging in developing new ones has become increasingly important. However, many youths in Cyprus feel these services are insufficiently publicised and under-resourced. Government facilities primarily focus on severe cases, leaving a gap in preventive and milder mental health services. While some municipalities and NGOs offer short-term seminars, systematic local programmes are
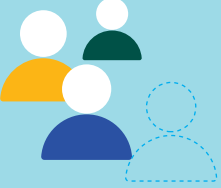
scarce. Major facilities, like Athalassa Psychiatric Hospital and Makarios Hospital's Child and Adolescent Unit, are concentrated in Nicosia, making access difficult for many. Youth also lack awareness of referral options beyond school counsellors and university services and often have long waiting lists.

The following policy recommendations result from comprehensive desk and field research during this study. Using a multisectoral approach, insights were gathered from various stakeholders—including youth, parents, mental health professionals, and practitioners. This multi-resource methodology has provided a nuanced understanding of the mental health landscape in Cyprus, highlighting the key gaps, challenges, and opportunities within existing programmes and services. These recommendations aim to tackle the specific needs and barriers identified, ensuring that future mental health policies are not only practical but also youth-centred and accessible to all while also informing the upcoming National Mental Health Strategy currently being developed in Cyprus.

Table. *Synopsis of the Recommendations Provided to Overcome the Challenges of the Existing Mental Health System*

Challenges & Barriers	Recommendations
Insufficient mental health policy framework and legislation	**Establish a Policy Framework and Legislation for Youth Mental Health.** Establishment of a comprehensive policy framework for youth mental health to ensure that young individuals receive the support they need without barriers. Safeguarding the rights of individuals with mental health issues, ensuring their struggles do not hinder their educational and career aspirations and investing in human resources and funding for mental health prevention and promotion services to create a robust support system for youth in Cyprus. **Systematic Data Collection About Youth's Mental Health.** Conduct systematic research on youth's mental health to design and implement data-driven policies.
Stigmatisation and prejudice against mental health	**Increase Youth Uptake of Services by Raising Awareness and Reducing Stigma.** Develop awareness campaigns to reduce the stigma surrounding mental health by or with youth themselves, including target groups who have tailored needs (e.g., male/female, youth with disabilities, refuge accompanied or unaccompanied youth, youth from low socioeconomic status or disadvantaged areas, etc). These campaigns should focus on educating the public to normalise help-seeking behaviour, address the vocabulary used around mental health, and encourage a shift in perceptions—target both youth and family awareness, as family beliefs significantly influence whether youth seek support.

Lack of awareness concerning the available services and programmes	Develop better communication and awareness-raising strategies to inform youth about available services and programmes. Engage directly with youth to enhance awareness of available services and programmes, particularly for subgroups often marginalised or hard to reach. Collaborate with youth organisations and peer networks to design outreach strategies and tailored communication channels that resonate with young people.
Lack of youth-friendly services and youth engagement	**Establish Youth-friendly Mental Health Services and Enhance Youth Participation.** Creating youth-friendly and quality offline and online mental health services to improve accessibility and address the unique needs of youth. Engaging youth in co-creating and designing mental health programmes is key to ensuring these services are relevant, welcoming, and practical. **Establish Youth-Friendly Mental Health Services with the Use of Technology.** Focusing on the digital dimension of mental health is crucial, particularly as society becomes increasingly digitalised. As youth engage more with technology and online platforms (e.g., e-mental-health platforms), there is an opportunity to explore how digital tools can be leveraged to support and enhance mental health outcomes while also examining ways to identify and mitigate the risks associated with online engagement and digital solutions (e.g., social media impact on wellbeing, safeguarding and quality concerns with mental health platforms, etc.).
Lack of coordination and collaboration among providers	**Establish a Multidisciplinary Approach to Promote Youth Mental Health.** Encourage in-depth discussions and planning among various agencies, including schools, health services, local governments, NGOs, and ministries. An interdisciplinary community-based approach needs to be taken to address the diverse needs of youth and develop comprehensive mental health strategies with the collaboration of various parties.

Insufficient services and lack of prevention and promotion programmes	**Strengthen Services and Programmes targeting Prevention.** Emphasis should be placed on shifting from reactive treatments to proactive and preventive approaches in mental health. A culture of prevention should be created, aiming to equip youth with the tools and resilience necessary to maintain mental well-being and reduce the risk of future mental health issues. Universal programmes designed to prevent the development of mental health conditions and promote the well-being of youth should be enhanced.
Difficulty in accessibility, particularly for youth of vulnerable groups	**Develop Customised Services and Programmes for Vulnerable Groups.** Support vulnerable groups (e.g., male/female, youth with disabilities, youth from low socioeconomic status or disadvantaged areas, minority groups, migrants, refugees, etc.) with targeted initiatives to assist those in greatest need. Improve the **services targeting supporting unaccompanied and accompanied refugee children.** Take into consideration the specific needs of unaccompanied and accompanied children and strengthen a tailor-made supporting system.
Staff shortage and lack of trained professionals	**Invest in Mental Health and School Professionals' Training.** Continuous education, skill development and ongoing clinical supervision for mental health service providers and professionals working in mental health and educational settings. This investment is essential to ensure that staff are equipped with up-to-date knowledge and competencies, ultimately enhancing service delivery and support for target populations.
Insufficient information and education for families	**Enhance Community and Family Engagement in Mental Health Initiatives.** Enhancing community and family engagement in mental health initiatives to promote well-being among youth. Establish more local community services and family-focused mental health and psychosocial support intervention approaches to address mental health needs more effectively.

A detailed presentation of each recommendation provided by stakeholders follows. The recommendations provided are each independently significant in fostering youth mental health, as they address distinct aspects of the challenges faced by youth today. However, their actual impact lies in their collective adoption. By implementing these recommendations in unison; a comprehensive and cohesive approach can be established, ensuring that the diverse and interconnected factors affecting youth mental well-being are effectively addressed. This holistic system will promote immediate mental health improvements and create a robust and sustainable framework to confront the youth's broader, long-term challenges, leading to more resilient and empowered individuals.

Establish a Policy Framework and Legislation for Youth Mental Health

> The establishment of a comprehensive policy framework for youth mental health is essential to ensure that young individuals receive the support they need without barriers. A critical component of this framework involves safeguarding the rights of individuals with mental health issues, ensuring their struggles do not hinder their educational and career aspirations. Stakeholders underlined the significance of empowering children to understand and claim their rights, advocating for their involvement in decision-making processes that affect their mental health services. Listening to youth's views and suggestions can lead to decisions that meet their needs. They proposed legislative changes that aim to allow children access to mental health services at lower ages.

- **Development of the National Strategy on Mental Health**
  Mental health services representatives called for a comprehensive National Strategy on Mental Health, supported by the MoH and WHO. From 2025 to 2028, this strategy will establish actionable, measurable goals involving interdisciplinary teams and youth participation across four pillars. The strategy's development will incorporate insights from the WHO to ensure best practises are followed. The focus is on creating specific, measurable actions that address housing, education, and employment for individuals with mental health challenges. Advocacy for increased funding from both government and private sectors was a recurring theme. According to all stakeholders, the national strategy must undertake that the responsibility for mental health cannot rest solely with the MoH or SHSO; it requires active participation from multiple ministries, including those focused on housing, education, and social welfare. Stakeholders suggested developing a national framework integrating mental health services across schools and community health centres, thereby improving access. This framework should also strengthen confidentiality and data protection protocols, ensuring that youth feel safe accessing services, particularly regarding sensitive issues. Allowing adolescents greater autonomy in seeking mental health support without mandatory parental involvement is crucial for fostering trust and reducing stigma. Additionally, incorporating mental health education into school curricula was proposed to promote awareness and encourage early intervention. This approach aligns with global best practises that advocate for a holistic and inclusive mental health care system for youth. A national framework explicitly focused on youth mental health within the health system should be based on a comprehensive approach involving multiple ministries, including those responsible for social policy, education, and others relevant to youth development and well-being. Ideally, this

framework would be underpinned by the ongoing national mental health strategy incorporating interministerial collaboration to ensure that mental health considerations are woven into all policy and service delivery aspects affecting children, adolescents, and their caregivers.

- **Invest in human resources and allocate sufficient funding for youth mental health**
Representatives from governmental and non-governmental organisations called for provisions allowing for increased investments to ensure adequate facilities and personnel to deliver effective mental health programmes and services. The investments should also be targeted at high-risk populations such as youth of vulnerable groups. Investing in human resources and funding for mental health services was also mentioned as important to creating a robust support system for youth in Cyprus. Public stakeholders highlighted the urgent need for better-equipped state hospitals that provide child-friendly environments, along with specialised complaint mechanisms to address the concerns of young patients. Mental health practitioners underscored the importance of improving accessibility, particularly in rural areas. Others pointed out the necessity of financial assistance programmes for transportation and the potential for mobile units or satellite offices to ensure that mental health services reach underserved communities. Parents expressed strong support for increasing mental health resources within schools. They called for more trained mental health professionals to address issues such as stress, bullying, and academic pressure. Proposals included enhancing the availability of school psychologists, not only during school hours but also through sessions offered in collaboration with community health services. Youth participants echoed these sentiments, emphasising that current resources and mechanisms for promoting and preventing mental health issues are insufficient. They called for a significant increase in funding from the state to support mental health initiatives and urged that outdated structures be reformed to meet the needs of youth better. To effectively support the mental health of youth, schools should prioritise hiring additional psychologists and counsellors. This will ensure students have easy and timely access to mental health support when needed. Overall, a coordinated investment in human resources and funding is essential to strengthen the mental health framework for youth in Cyprus.

- **Participation of youth organisations and representatives in decision-making**
The call for adapting successful international practises to enhance the youth's role in decision-making should be recognised, ensuring that any proposed strategies or policies are feasible within the local legal framework and cultural landscape and linked to the needs of the youth. Cyprus can enhance its mental health services for youth and better meet the needs of its most vulnerable populations. In particular, the youth emphasised the importance of incorporating the actual needs of youth in Cyprus into the planning and design of strategies to strengthen the voices of vulnerable individuals in accessing mental health and prevention services. Participants underscored that any initiatives or programmes developed should be informed by

direct input from the youth, ensuring that their experiences, challenges, and preferences are accurately reflected in the services offered. To achieve this, they suggested establishing ongoing consultation and engagement mechanisms with youth, such as focus groups, surveys, or community forums, to gather insights on their specific needs and concerns. By actively involving youth in decision-making, the government and relevant organisations can create more effective, targeted services that resonate with the youth population. Additionally, participants highlighted the importance of creating e-mental-health platforms that empower vulnerable youth to share their stories and advocate for their mental health needs. This could include youth-led initiatives or partnerships with local organisations focusing on mental health advocacy. By elevating youth voices, strategies can be developed that address their unique challenges and foster a sense of ownership and agency among the youth in shaping their mental health services.

Systematic Data Collection About Youth's Mental Health

> The need for comprehensive research on mental health, particularly among youth in Cyprus, has been a recurring theme among some organisations. Stakeholders emphasised the importance of ongoing studies to understand mental health and resilience in youth better. They highlighted that the pandemic has exacerbated mental health issues, leading to increased stress, depression, and feelings of isolation among youth. However, there is a significant gap in specific research data on these challenges, making it difficult to design effective, targeted programmes.

- **Incorporate youth-led participatory research methodologies for systematically monitoring youth mental health.**
Representatives of governmental authorities called for detailed research to gather information on the mental health challenges faced by youth in Cyprus, which is essential for informing policy and programme design. To ensure that the research process reflects youth experiences and perspectives, a participatory approach is crucial, as it would be beneficial to incorporate youth-led participatory research methodologies. These methodologies empower young people to actively participate in the research process, from identifying key research questions to collecting data and analysing findings. This approach gives youth a voice in understanding and addressing their mental health challenges and ensures that the resulting insights are grounded in their lived experiences. Youth-led participatory research methodologies can take several forms. For example, peer interviews, focus groups, and participatory workshops can be employed to collect qualitative data directly from young people.

- **Strengthen evaluations of existing mental health services**
Representatives of non-governmental organisations stressed the importance of strengthening evaluations of existing mental health initiatives. They proposed implementing long-term follow-up studies to assess the effectiveness of prevention programmes and adapt strategies based on empirical data to improve outcomes. Collectively, these calls for more robust research underscore the necessity of a data-driven approach to developing

effective mental health policies and interventions for youth in Cyprus.

Increase Youth Uptake of Services by Raising Awareness and Reducing Stigma

> Various stakeholders emphasised the need for comprehensive awareness campaigns to reduce the stigma surrounding mental health. To ensure these campaigns resonate with young people and caregivers, they must be developed by or with the youth. By involving youth in designing and delivering mental health awareness campaigns, these initiatives will be more authentic, relatable, and engaging for their peers.

• **Awareness campaigns to reduce the stigma surrounding mental health**

  ‣ Youth-led campaigns to effectively address the unique concerns, language, and cultural contexts that matter to young people, fostering a sense of ownership and empowerment.

  ‣ It is equally important that campaigns targeting caregivers be developed with input from the caregivers. Caregivers, whether parents, guardians, or other family members, play a crucial role in the mental well-being of young people, and their understanding of mental health can have a direct impact on how children and adolescents approach their mental health challenges. Involving caregivers in developing these campaigns ensures they are informed, equipped, and empowered to support their children effectively.

  ‣ Public awareness campaigns featuring well-known figures or role models who openly discuss their mental health struggles. Sharing success stories from those who have sought help could further encourage youth to access these services. Students suggested that awareness campaigns and informational materials should feature positive role models or celebrities openly discussing mental health issues. By leveraging the influence of these figures, campaigns can help to destigmatise mental health challenges and encourage youth to seek help. When youth see relatable individuals discussing their experiences, it can create a sense of connection and validation, reinforcing the message that it is okay to talk about mental health.

  ‣ Representatives of community-based programmes and youth of various ages called for the strategic use of social media platforms like TikTok and YouTube to engage young audiences and provide mental health information in relatable formats. A trusted, holistic online platform accredited by experts, combined with school workshops and traditional media campaigns (TV, posters, and community events), was also recommended to ensure reliable, accessible, and effective outreach to youth.

These campaigns should focus on educating the public to normalise help-seeking behaviour, address the vocabulary used around mental health, and encourage a shift in perceptions. These initiatives must target both youth and their families, as family beliefs significantly influence whether youth seek support.

• **Enhanced confidentiality measures for seeking mental help**
  Mental health practitioners and representatives from the public authorities proposed the development of community mental health centres that are youth-friendly and accessible to vulnerable groups, including migrants, unaccompanied minors, and children with disabilities. These centres should prioritise confidentiality and a multidisciplinary approach, creating an environment where youth feel safe to seek help without the fear of stigma. Participants emphasised the importance of reaching young individuals over 18 who may not be within a school framework, ensuring they can access support services. Parents advocated for the introduction of systems that allow students to access mental health services anonymously, thus protecting them from fear of stigmatisation. Enhanced confidentiality measures would ensure that youth can seek help discreetly, without fear of judgment from peers or their communities. Mental health practitioners further emphasised the need for strong confidentiality protocols and data protection plans, ensuring that youth's personal information is handled securely and sensitively.

• **Mental health communication and promotional events**
  Participants across various sectors stressed the importance of developing better strategies to inform youth about available resources. Other representatives suggested specific initiatives to reduce the stigma associated with substance use and addiction, including community events and educational programmes that promote empathy and understanding. They prioritised combating mental health stigma by developing awareness programmes to educate the public, change perceptions, and foster a more accepting society. These efforts would create an environment where youth feel safe to openly discuss their mental health and access support services without fear of judgment. Representatives from private initiatives emphasised the need to engage parents in these efforts, recommending online programmes to promote parental self-care and mental health and utilising schools, media, and community events for awareness-raising activities.

Establish Youth-friendly Mental Health Services and Enhance Youth Participation

> Creating youth-friendly mental health services is crucial to improving accessibility and addressing the unique needs of youth.

• **Engaging youth in co-creating and designing mental health programmes is key to ensuring these services are relevant, welcoming, and effective.**
  Participatory workshops (i.e., world café, photo-elicitation, design-thinking) and focus groups are valuable tools for engaging youth in the programme design process. These spaces should be safe, open, and non-judgmental, allowing youth to express their ideas, concerns, and experiences related to mental health. Group discussions can be facilitated around key topics such as mental health services, how they can be more accessible, and what outreach methods would work best. Also, youth are more likely to relate to and trust their peers when it comes to mental health. Peer-led initiatives, where youth are trained to provide support, share resources,

and lead discussions about mental health, are an effective way to engage them. All participants, stakeholders, youth, and parents highlighted the importance of establishing youth-friendly structures, such as walk-in mental health centres that remain open beyond regular hours, providing engaging activities and international exchange opportunities. These centres should not only be comfortable and accessible but also co-created with youth, involving them directly in the decision-making process to reflect their needs, preferences, and interests. Similarly, youth aged 18-24 years old recommended the establishment of walk-in mental health centres where young individuals can receive immediate information, primary treatment, and screening for mental health issues. These centres should have qualified professionals, including psychologists, psychiatrists, occupational therapists, and nutritionists, readily available to provide support in a welcoming and cheerful environment.

• **Engagement should not be limited to the design phase.**
According to the stakeholders, youth must be involved in the continuous feedback and evaluation of mental health programmes to ensure they remain relevant and effective. This can be done through regular surveys, follow-up focus groups, or online feedback mechanisms.

• **Tailoring programmes to specific youth groups, including those from disadvantaged backgrounds or immigrant communities, ensures inclusivity and equity.**
Stakeholders suggested specialised mechanisms for youth to lodge complaints and provide suggestions, ensuring their voices are heard and supported. This can include accessible systems such as complaint boxes, hotlines, and direct communication channels with authorities like the Cyprus Youth Council. Representatives from non-governmental organisations emphasised the need for close collaboration between schools and youth to address logistical challenges and to create flexible mental health programmes that adapt to different school environments. Practitioners agreed on the importance of involving youth directly through advisory panels, surveys, or youth-led campaigns to ensure that services are accessible and relevant to their needs.

• **Active participation in the design and delivery of services will empower youth, create a sense of belonging, and foster greater trust in the mental health support system.**
To conceptualise children's rights to be heard and have their views considered, a more holistic approach should be adopted by encouraging active participation of youth in decision-making processes, engaging them in co-creating frameworks and strategies, developing flexible frameworks that cater to the diverse needs of youth, upholding principles of transparency and empowerment, establishing mechanisms for continuous improvement through monitoring and feedback and maintaining a commitment to learning and adapting practises for sustainable youth engagement in mental health initiatives (Lundy, 2007). It is, therefore, crucial for relevant stakeholders, including youth themselves, to collaborate to

support youth engagement in mental health initiatives through various key actions. According to the participants, there is a pressing need for youth-friendly services that are available beyond regular hours and offer engaging activities. Most importantly, involving youth in co-creating these services is essential to ensure they meet their needs and foster a sense of ownership and belonging. Youth centres, which once played a crucial role in providing engagement and support for youth, have seen a significant decline in activity and effectiveness. To revitalise these centres, substantial upgrades are necessary, including improved infrastructure, renewed programmes, and a wider variety of activities. Collaborating with organisations like KOKEN could provide the resources needed for these enhancements. Mental health practitioners have also stressed the importance of integrating services among schools, health centres, and mental health professionals to ensure seamless support for youth. Youth centres were once very active in Cyprus, providing vital spaces for youth engagement and support. In recent years, there has been a significant decrease in youth centre attraction and activity levels either because of funding or lack of space. Their effectiveness and engagement with youth have noticeably diminished. To restore their former prominence and better serve the needs of youth, youth centres need significant upgrades. This could include improving infrastructure, renewing programmes and increasing the variety of activities offered. Re-establishing youth centres in a more structured and collaborative manner could provide one of the many initiatives that could be implemented, particularly if interventions are tailored to the specific needs of diverse youth groups, including those from socio-economically disadvantaged backgrounds and immigrant youth.

• **Youth-led interventions that harness youth's energy, creativity, and insights centred around community-based services.**
Therefore, youth-led activities such as sports, arts, and other recreational outlets should be developed. Youth-led programmes empower youth to actively design and implement mental health initiatives that resonate with their experiences and interests, fostering a sense of ownership and relevance. Establishing youth centres or community spaces where these activities can take place allows youth to engage in positive, health-promoting outlets that reduce stress, build confidence, and encourage social connections. Activities like sports and the arts are both creative outlets and powerful vehicles for emotional expression, self-discipline, and teamwork, which are critical in supporting mental well-being. By enabling youth to lead these initiatives, the programmes are more likely to be engaging, accessible, and reflective of youth's actual needs and preferences. Such an approach enhances youth participation and strengthens the preventive focus of mental health services by building a strong community network, promoting peer support, and reinforcing positive coping mechanisms from an early age. It is recommended that youth-friendly walk-in centres that operate for extended hours be established to provide accessible mental health support for youth. These centres should create a welcoming and safe environment where youth feel comfortable seeking help without needing appointments or referrals. By offering flexible hours,

including evenings and weekends, these centres can better accommodate the varied schedules of youth, ensuring that support is available when they need it most. The centres should be staffed with trained mental health professionals equipped to address various issues, from general mental health concerns to crisis intervention.

- **Establish peer-to-peer support services.**
Only a few participants in the study referred to the importance of peer support in addressing mental health challenges, a need most strongly voiced by parents and young people themselves. However, these strategies are gaining significant momentum, particularly in mental health promotion and prevention. Peer support interventions, which foster community-based emotional and practical support, have been successfully implemented in various countries, demonstrating their effectiveness in enhancing resilience and reducing stigma. While this approach is recognised as a valuable component of mental health care in other countries, where peer support systems have been successfully integrated into broader mental health frameworks, it remains underexplored and underutilised in Cyprus. Raising awareness about the benefits of peer support and promoting its adoption as part of mental health strategies could provide significant emotional and practical benefits, fostering a sense of community and shared understanding among those facing similar challenges. Similarly, digital mental health solutions, ranging from mobile apps to online counselling platforms, are becoming increasingly prevalent across the EU and in a broader global context. These innovations offer accessible, scalable, and cost-effective options for addressing mental health challenges, particularly for younger populations. Raising awareness about these emerging trends and their potential benefits is critical to bridging this gap in understanding. By learning from international best practises and promoting peer support and digital tools as viable components of mental health care, Cyprus can advance its mental health framework and ensure that these approaches are better recognised and utilised by practitioners and the public. Ultimately, youth engagement should be systematic, with mental health education integrated into school curricula, workplace training, and community settings. Active participation in the design and delivery of services will empower youth, creating a sense of belonging and fostering greater trust in the mental health support system.

Incorporating peer support workers can enhance relatability and trust, encouraging youth to engage with the services offered. These services leverage the unique value of peer interactions, fostering a safe space for youth to discuss challenges, share experiences, and build resilience with those who may have similar struggles. In Cyprus, implementing a peer-to-peer framework within a multidisciplinary approach would significantly enhance accessibility and support for young people, addressing gaps in traditional mental health services that may feel distant or intimidating to younger populations. Tools like UNICEF's "I Support My Friends" programme are designed to help young people provide emotional support to their peers and foster a culture of mental health awareness and resilience within their

communities. These tools focus on building peer networks that can guide young people in managing their mental health, helping them cope with stress, and recognising when professional help may be needed. Such tools should be integrated into youth mental health interventions, and concrete recommendations should be made for using such tools effectively. Research highlights that peer support can enhance self-esteem, provide emotional support, and reduce feelings of isolation among young people. Establishing these services as part of a broader, multidisciplinary approach—integrating mental health professionals, educational institutions, community organisations, and youth-led initiatives—would create a comprehensive support network. This model could offer a tailored, responsive approach to mental health that is both preventive and proactive, addressing issues early and encouraging open conversations about mental well-being among Cyprus's youth. Developing this peer-to-peer focus within the mental health framework complements professional interventions. It promotes youth empowerment, resilience, and a supportive community culture, aligning with Cyprus's broader health and social development goals. For example, in several countries, suicide prevention has served as a crucial entry point to engage with young people, mainly using peer support initiatives. These programmes leverage the power of peer relationships, allowing young individuals to connect with others who may have shared similar experiences or struggles. Peer support in the context of suicide prevention offers a non-judgmental, relatable form of assistance, helping to break down the stigma surrounding mental health and encouraging open discussions. By training young people to support one another, these initiatives provide immediate emotional assistance and promote a culture of mutual care and understanding. This approach has proven successful in various countries, as it creates a safe and supportive environment where young people feel empowered to seek help, share their challenges, and contribute to the mental well-being of their peers. Incorporating such programmes into the mental health framework in Cyprus could be a powerful tool in reaching and supporting at-risk youth.

- **Develop aesthetically pleasing, safe, and designed facilities with a youth-friendly approach.**
Students emphasised the need for new facilities that are aesthetically pleasing, safe, and designed with a youth-friendly approach. These spaces should be inviting and comfortable, providing an environment where youth feel welcome to visit. Notably, such facilities should be staffed by qualified youth information professionals and mental health specialists who understand the unique needs of youth. By creating supportive and engaging spaces, we can foster a culture of openness and accessibility around mental health, making it easier for youth to seek the assistance they need.

Establish Youth-friendly Mental Health Services with the Use of Technology

> Focusing on the digital dimension of mental health is crucial, particularly as society becomes increasingly digitalised. As youth engage more with technology and online platforms, there is an opportunity to explore how digital tools can be leveraged to support and enhance mental health outcomes.

- **Combination of digital and face-to-face solutions.**
  This includes investigating the effectiveness of mental health applications, online counselling services, and digital peer support networks that can provide accessible resources and intervention strategies tailored to the needs of youth. Furthermore, understanding how social media influences mental health—both positively and negatively—will be essential in developing comprehensive support systems that foster resilience and well-being. By conducting further studies into these digital avenues, we can identify innovative solutions that promote mental health awareness and prevention and empower youth to seek help and engage with their mental well-being in the digital age. Emphasising this digital dimension will help create a more integrated approach to mental health support, ensuring that it resonates with the lifestyles and preferences of today's youth. Regarding the methods of seeking mental health support preferred by youth, participants emphasised the importance of prioritising information and awareness-raising efforts. Given the prevalence of digital tools and social media in today's era, they highlighted that these platforms should effectively disseminate information and promote prevention strategies. By leveraging social media campaigns and online resources, mental health organisations can reach young audiences more efficiently and engage them in meaningful conversations about mental health. Additionally, participants stressed the need for an emergency hotline specifically for individuals experiencing mental health problems. Such a hotline would provide immediate support and guidance, ensuring that youth have access to help when they need it most. For example, a 24/7 mental health helpline, the creation of mobile mental health units to serve remote areas, and the development of an accredited online platform offering reliable mental health information and support services. Peer-to-peer education and mental health first aid training in schools and workplaces were also identified as critical tools for raising awareness and encouraging early intervention. By implementing these recommendations, we can enhance mental health awareness and accessibility for youth, creating a supportive environment where seeking help becomes normalised and encouraged.

- **Develop digital tools and online services.**
  Given young people's high use of digital platforms, utilising social media, online forums, and digital tools is an important way to engage youth in the design of mental health services. Online surveys, polls, or interactive platforms can be used to gather feedback on what mental health programmes or services would best serve their needs. Virtual focus groups or webinars can be conducted to discuss ideas and ensure broad participation. Additionally, digital tools such as mental health apps could be co-created with youth to ensure they are user-friendly and meet the target audience's needs. Youth aged 18 to 24 emphasised the pressing need to develop more digital tools and information services as they increasingly seek mental health information online. They suggested creating a digital information platform that provides relevant information and support services, such as chat options and guidance on where to access help. This platform should be state-accredited, staffed by qualified professionals, and designed to be youth-friendly. Such an initiative would ensure that even youth in remote areas can access vital information and services easily. Additionally, participants proposed the implementation of online questionnaires to map the specific needs of youth, along with incentives to encourage participation. This data could be invaluable in tailoring services to meet their needs better. Furthermore, leveraging the influence of social media figures or influencers could be a powerful way to inform youth about existing mental health services and normalise discussions surrounding mental health.

Establish a Multidisciplinary Approach to Promote Youth Mental Health

> Cyprus's mental health services are fragmented and lack a holistic approach, necessitating more in-depth discussions and planning to enhance collaboration among various agencies, including schools, health services, local governments, NGOs, and ministries. A significant issue is the fragmentation of services, particularly the lack of communication and coordination between outpatient services and other mental health care providers. Establishing a centralised coordinating body could be instrumental in bridging these gaps, acting as a unified agency to streamline communication, oversee service delivery, and ensure that care pathways are cohesive and efficient. Mental health service representatives have emphasised that the responsibility for mental health cannot rest solely with the MoH or SHSO; it requires active participation from multiple ministries, including those focused on housing, education, and social welfare, which is something that needs to be taken into serious consideration both in policy and practice level.

- Multifaceted and multidisciplinary cooperation is vital to addressing the diverse needs of youth and developing ***comprehensive mental health strategies.***

The stakeholders advocate for an inclusive and intersectoral approach, ensuring that mental health services are accessible and tailored to the diverse backgrounds of youth. This includes establishing well-funded and respectful prevention facilities across all medical and other institutions.

- **Implement Cross-Sector Training Programmes:** To ensure a multidisciplinary approach, it is crucial that professionals across sectors—teachers, social workers, healthcare providers, and law enforcement officers—receive training on youth mental health and how to respond appropriately. These training programmes should include trauma-informed care, early intervention strategies, recognising mental health issues, and providing adequate referrals. Addressing youth mental health requires a comprehensive, multi-sectoral approach encompassing prevention and treatment, particularly emphasising active involvement from the Ministry of Education. Given that schools are pivotal environments where youth spend a significant portion of their time, the Ministry of Education uniquely fosters mental health awareness and resilience. By integrating mental health education, early intervention programmes, and accessible support services within the school system, the ministry can help establish a proactive framework for identifying and addressing mental health concerns at early stages. This collaboration could include teacher training on mental health

literacy, implementing social-emotional learning curricula, and offering peer support programmes that equip students with the skills to manage stress, build resilience, and support one another. Such involvement from the Ministry of Education not only enhances preventive measures within the educational system but also helps to destigmatise mental health, creating a supportive and open school culture that benefits youth development holistically.

- **Create collaborative platforms for service coordination and delivery:** Establish physical and virtual platforms where professionals from various sectors can coordinate services for youth. This could include integrated service hubs where mental health, education, social services, and youth development programmes are co-located to offer holistic support to young people. A virtual platform could also allow real-time communication and referrals between sectors. A comprehensive approach with dedicated support from educational institutions and government bodies will strengthen the overall framework for youth mental health, ensuring that preventive efforts and early interventions are well-coordinated and accessible. In addition, organisations have collaborated with various entities, such as the MoH and academic institutions, to enhance mental health support. However, there is a growing need for structured coordination among these entities to ensure that support reaches all youth, particularly in rural areas with limited access. Enhancing communication between services and addressing systemic fragmentation should be a priority. Strengthening these connections through collaborative practises and shared protocols can ensure that mental health care delivery is comprehensive and accessible to those who need it most. Also, engaging non-governmental organisations (NGOs) is crucial, as the central government cannot manage all implementation aspects alone. Additionally, it was highlighted that service fragmentation remains a challenge, which is a key issue to address. However, positive steps have been taken toward greater cooperation between mental health and social services, and there is room for improvement. This collaboration is an encouraging development. It should be, however, acknowledged that an interdisciplinary approach is particularly challenging, especially in countries where services have traditionally been built around independent regulations. Nevertheless, given the increasing complexity of cases, we must move toward more integrated, collaborative work. Adopting a multistakeholder approach will be crucial in addressing these challenges effectively.

- **Establish multidisciplinary teams that can address various aspects of beneficiaries' needs holistically:** Other representatives have highlighted the need for multidisciplinary teams that can address various aspects of beneficiaries' needs holistically. They advocate for interdepartmental teams across public, private and community service providers to better respond to issues like addiction and domestic violence, underscoring the need for enhanced coordination and communication among different services. Recommendations include adopting a collaborative care model that emphasises partnerships between general practitioners and mental

health specialists, allowing for a more integrated approach to care. Such models could increase service uptake among adolescents, who often prefer receiving care in less stigmatising, non-specialised settings. Public sector stakeholders also call for better coordination among educational and mental health services, ensuring all support systems work together. Establishing a centralised authority to coordinate mental health services can help facilitate effective collaboration among various agencies. Regular, structured meetings among stakeholders are essential for improving communication and simplifying bureaucratic processes, ultimately leading to more efficient service delivery. By fostering better coordination and collaboration, Cyprus can create a cohesive and effective support system for youth mental health.

Strengthen Services and Programmes targeting Prevention.

> A significant emphasis has been shifted from reactive treatments to proactive and preventive approaches in mental health. To effectively address youth mental health, there is a critical need to shift focus from treatment-centred approaches to services that prioritise prevention. Preventive services can equip youth with coping strategies, emotional resilience, and social support networks before mental health issues fully emerge, helping to mitigate the severity and prevalence of such challenges. By proactively addressing the underlying factors that contribute to mental health concerns—such as stress, social pressures, and family or academic challenges—preventive services can reduce the need for later, more intensive interventions. This shift towards prevention-oriented programming also promotes mental health awareness. It reduces stigma, encourages youth to engage with mental health resources early and builds long-term habits supporting emotional well-being. Investing in prevention-focused services empowers youth to navigate life's stressors healthier, ultimately fostering a more resilient generation and better prepared to manage mental health proactively rather than reactively.

- **Focus on preventive measures and services targeting youth** Stakeholders consistently called for the creation of a culture of prevention, aiming to equip youth with the tools and resilience necessary to maintain mental well-being and reduce the risk of future mental health issues. Key governmental stakeholders stressed that preventive measures must be a core part of the national mental health strategy, advocating for integrating comprehensive mental health education into school curricula across all age groups. Regular workshops, seminars, and programmes designed to teach emotional resilience and mental health management were suggested to empower youth with practical skills early on. The potential correlation between mental health vulnerability in youth and engagement in delinquency or other harmful behaviours. Indeed, these two issues can often be interconnected, as young people facing mental health challenges may be at a higher risk of engaging in risky behaviours, including delinquency. This connection is particularly significant when discussing vulnerable youth groups, who may be dealing with a range of personal, social, or environmental issues that exacerbate both their mental health struggles and their propensity for harmful behaviours. Understanding this relationship is crucial in developing targeted prevention and intervention

strategies. It is essential to focus on preventative mechanisms that can help address mental health concerns before they lead to adverse outcomes such as delinquency. Additionally, supporting these young individuals after they have gone through difficult experiences, such as incarceration, is equally important. Providing mental health support during this period of reintegration can help reduce the likelihood of recidivism and guide these youth toward healthier, more productive paths. In this context, exploring how mental health support and prevention programmes can be integrated into youth justice systems, schools, and community initiatives would be beneficial. This approach would not only address immediate mental health needs but also work to break the cycle of harmful behaviours, helping vulnerable youth to rebuild and thrive.

- **Design and develop early intervention programmes for early ages**
  Similarly, other representatives highlighted the need to shift focus towards prevention by providing youth with better information about services and strengthening their resilience. This includes early intervention mechanisms like hotlines, offering youth access to psychological support when needed. Schools were identified as a critical touchpoint for prevention, with calls for school staff—including teachers and other personnel—to receive targeted mental health training, ensuring they can identify issues early and provide timely referrals. Stakeholders also recommended initiating early intervention programmes from as early as kindergarten, emphasising the importance of addressing mental health issues before they can fully develop. Introducing age-appropriate mental health education and intervention strategies from a young age can significantly reduce the long-term demand for treatment services.

- **Design experiential workshops targeting students in schools**
  Representatives of governmental services added that experiential workshops, particularly in schools, have proven effective in engaging students and preventing addictive behaviours such as gambling and online gaming. These programmes should be regularly updated to address emerging mental health challenges. These programmes should go beyond traditional lecture-based formats to maximise the effectiveness of experiential workshops to prevent mental health in general. These should be highly practical, engaging youth through hands-on activities and simulations that allow them to experience real-life scenarios. When youth actively participate—whether through role-playing exercises, interactive simulations, or guided discussions—they are more likely to internalise and apply the lessons in their everyday lives. Customising these workshops to the specific needs of youth is crucial. For example, workshops tailored with this in mind—incorporating relatable situations and focusing on real-world skills such as stress management, digital literacy, and resisting peer pressure—will resonate more deeply and provide students with relevant tools for navigating their environment. These workshops should be integrated into school programmes continuously to create a lasting impact. Rather than a one-time intervention, a sustained approach embedded within the school curriculum allows for continued reinforcement

of skills and concepts, making the prevention of addictive behaviours a routine aspect of students' development. This sustained model provides a supportive, accessible, and engaging framework for equipping youth with the knowledge and skills they need to sustain their mental health in the long term. Equally important is the promotion of mental health literacy in schools. Educational institutions play a critical role in shaping attitudes and behaviours, making them an ideal setting to foster an understanding of mental health. By integrating mental health literacy programmes into the school curriculum, students, teachers, and parents can gain valuable knowledge to recognise early signs of mental health issues, reduce stigma, and support timely interventions. Others reinforced the importance of schools in supporting vulnerable children and stressed the need for preventive measures to keep children engaged in education. Schools provide a stable environment, and efforts should be made to reintegrate and support students at risk of mental health challenges before problems escalate. In addition, youth aged 18-24 called for systematically integrating mental health education and mental health first aid into school curricula and workplace training programmes.

These recommendations underline the importance of prevention, education, and early intervention in addressing youth mental health. By equipping youth with the right skills and support systems, future mental health issues can be mitigated, reducing the overall burden on treatment services.

Develop Customised Services and Programmes for Vulnerable Groups

> Support for vulnerable groups (e.g., male/female, youth with disabilities, low socioeconomic status, youth from rural or disadvantaged areas, etc.) is a significant focus, with targeted initiatives designed to assist those in greatest need. Representatives of public authorities strongly call for more specialised programmes tailored to individual needs. Current resources are often insufficient for delivering personalised care, impacting interventions' effectiveness.

- **Age-appropriate and needs-oriented services according to the developmental stages and specificities of youth**
  To address this, it is crucial to design and implement age-appropriate offline and online programmes catering to different developmental stages and interests. Structured socialisation initiatives should also be developed to encourage peer interaction both within and outside of facilities, fostering a sense of community and support. Furthermore, there is a pressing need to establish guidance and support systems for youth transitioning to adulthood and out of care after age 18. Representatives from private organisations have underscored the importance of creating structures that provide continued support during this critical developmental period.

- **Develop universal, targeted, and indicated mental health services for vulnerable groups**
  According to private sector representatives, a valuable resource is the "Helping Adolescents Thrive Toolkit," developed through a collaboration between WHO and UNICEF. This toolkit aims to promote mental well-being and reduce self-harm and other risky behaviours among adolescents.

It categorises interventions into universal, targeted, and indicated approaches. Universal interventions are designed for all adolescents and are often implemented in schools to minimise stigma. In contrast, targeted interventions focus on those at risk due to factors such as poverty or exposure to violence. Indicated interventions are aimed at adolescents already exhibiting emotional or behavioural symptoms, incorporating methods like cognitive-behavioural therapy.

Enhance the services targeting supporting unaccompanied and accompanied refugee children.

> Policymakers must urgently address the unique needs of both unaccompanied and accompanied refugee children by tackling the systemic barriers they face in accessing essential services. These children often struggle with transportation challenges that make education, legal support, and recreational opportunities effectively inaccessible. Additionally, inconsistent interpretation and translation services hinder their ability to utilise available resources, leaving many isolated and unsupported fully. Ensuring equitable access to these services is vital for their development and integration. A renewed focus on educational access is imperative, as education serves as a foundation for personal growth and a pathway to integration. Inclusive language programmes are crucial, enabling children to overcome language barriers and participate meaningfully in their education. Strengthened educational initiatives would foster academic achievement and bolster their sense of belonging and mental well-being. Recreational programmes must also be developed and expanded to support the mental health and social integration of refugee children. Structured activities such as sports, arts, and team-based programmes offer critical emotional healing and stability. These opportunities help children process trauma, build peer connections, and regain a sense of normalcy in their lives. Enhancing guardianship systems is equally essential. Guardians and shelter staff must receive trauma-informed training to understand better and address the complex needs of these vulnerable children. By integrating psychosocial support into educational and recreational settings, children can benefit from holistic care, promoting resilience and emotional recovery. In addition, shelter conditions require immediate attention, with upgrades prioritising hygiene, safety, and privacy. Dedicated recreational spaces and structured activities should be embedded into daily routines to promote mental well-being. Overcrowding must be addressed by expanding shelter capacity or transitioning to more minor, community-integrated housing models, ensuring children receive adequate supervision and care. Finally, policymakers should enhance access to information for refugee children, equipping them with the knowledge they need to navigate complex legal and social systems. Addressing these critical areas provides a more inclusive and supportive environment, empowering refugee children to heal, grow, and integrate into their new communities.

Invest in Mental Health and School Professionals' Training

> A critical recommendation from various stakeholders emphasises the need for mental health and school professionals. This investment is essential to ensure that staff are equipped with up-to-date knowledge and competencies, ultimately enhancing service delivery and support for target populations. Par-

ticipants from governmental authorities underscored that training for professionals involved in mental health programmes is vital.

• **Continuous education and skill development for professionals working in mental health and educational settings.**
A critical recommendation from various stakeholders emphasises the need for continuous education and skill development for professionals working in mental health and educational settings. This investment is essential to ensure that staff are equipped with up-to-date knowledge and competencies, ultimately enhancing service delivery and support for target populations. Participants from governmental authorities underscored that training for professionals involved in mental health programmes is vital. Ongoing education enables these individuals to assist youth facing mental health challenges effectively. Similarly, representatives from public authorities highlighted the necessity for training programmes that equip social workers to navigate administrative processes, thereby improving their capacity to serve clients. Moreover, representatives of non-governmental organisations called for comprehensive training for those engaged in prevention efforts. This training should focus on new methodologies, tools, and information relevant to contemporary mental health practices. Furthermore, the implementation of high-quality mental health first aid training is crucial for professionals who interact with youth, as well as for their families and friends. This training would help staff recognise early signs of mental health issues and respond effectively. Other governmental stakeholders emphasised capacity building within the mental health sector, supporting initiatives like the EU-PROMENS multidisciplinary capacity-building programme and the ImpleMENTAL joint action. These programmes aim to foster training and exchange opportunities among health professionals and facilitate mental health reforms across the EU.

• **Establish clinical and technical supervision or mentorship to adequately support mental health service providers, teachers, and other professionals.**
It is essential to emphasise the role of ongoing clinical and technical supervision or mentorship in ensuring that mental health service providers, teachers, and other professionals are supported throughout their work. While training is a critical foundation, continuous guidance and support help practitioners apply their knowledge effectively, navigate complex cases, and maintain their professional growth and well-being. Incorporating individual and group/peer supervision models into the workforce development framework is key to sustaining high-quality services and reducing burnout. Clinical and technical supervision should be institutionalised as a regular and non-negotiable component of professional practice. In addition to individual supervision, group and peer supervision approaches foster collaboration and shared learning among professionals. Group supervision sessions create a safe environment for staff to share challenges, exchange insights, and develop collective problem-solving strategies. Youth mental health programmes should involve multidisciplinary teams, including mental health professionals, educators, social workers, and caregivers.

Mentorship programmes should also be established to provide long-term support for professionals at all levels. Organisations can foster a learning and professional growth culture by pairing staff with mentors who possess expertise in their fields.

- **Consider mental health providers, teachers, and other professionals' wellbeing**
Supporting the well-being of mental health service providers, teachers, and other professionals who work closely with children and youth is critical to ensuring the quality and sustainability of services. The consultations highlighted the growing pressures these professionals face, including emotional burnout, secondary trauma, and systemic challenges that impede their ability to provide adequate care and support.

- **Training of youth workers, social workers and parents**
Additionally, representatives stressed the need for more social workers and expanding existing programmes to support youth better. The presence of psychologists and counsellors in various settings is essential for addressing the emotional and psychological needs of children. Another important perspective came from community-based providers, which highlighted the necessity of continuous training on emerging drug trends and therapeutic methods to adapt to changing patterns in substance use. Parents also contributed to this discussion by advocating for education on responsible technology use for students and parents. They suggested that schools implement programmes to enhance digital literacy, social media awareness, and the dangers of online bullying.

This holistic approach to training ensures that all stakeholders—professionals, students, and parents—are better equipped to navigate the complexities of mental health in today's digital age. The following recommendations are provided to address the training needs of mental health professionals and youth workers in Cyprus:

▸ To ensure that the capacity-building training for mental health professionals is relevant, impactful, and directly aligned with the unique needs of youth, it is essential to conduct a formal needs assessment before developing the content. This preliminary step is foundational for validating and tailoring the training materials. By gathering insights from mental health professionals, youth, and possibly other stakeholders, an informal needs assessment can reveal current gaps in knowledge, specific areas where professionals feel less confident, and pressing issues impacting youth mental health within the community.

▸ Moreover, this process enables trainers to adapt the curriculum to reflect real-world challenges, prioritise practical skills, and address region-specific or culturally relevant factors that may be overlooked in a standardised programme. Without this initial assessment, training content risks being overly theoretical or misaligned with the on-the-ground realities that professionals face, reducing the programme's overall effectiveness.

A formal needs assessment ultimately enhances the relevance and applicability of the training, ensuring it meets the diverse and dynamic needs of youth mental health support. It is essential to prioritise the training of youth workers and mental health professionals to enhance their effectiveness in addressing youth mental health issues, with a particular focus on treatment rather than prevention.

▸ The training should be ongoing and of long duration, allowing for in-depth learning and continuous professional development. Training programmes must be designed to foster ongoing and in-depth learning to maximise the effectiveness of capacity-building efforts for mental health professionals, teachers, and others working with youth. Short, one-time training sessions are insufficient to address the complex and evolving needs of youth mental health. Instead, these programmes should be long-duration initiatives that enable participants to delve deeply into critical topics, refine their skills over time, and adapt to emerging challenges. Training must be complemented by community-of-practice models or peer supervision systems to sustain and enhance this learning, ensuring that professionals continue to grow in supportive, collaborative environments.

▸ Incorporating a digital element into the training programmes will ensure that professionals are equipped to utilise technology effectively, enabling them to engage with youth in ways that resonate with their digital-native lifestyles.

▸ Moreover, the training should be grounded in practical applications, providing concrete examples and practical tools to implement in real-world settings. This includes specialised programmes tailored to the unique challenges faced by youth, ensuring that professionals can respond appropriately to various mental health concerns.

▸ Incorporating mental health first aid training will empower youth workers and mental health professionals to identify and respond to crises effectively, equipping them with the skills to provide immediate support and guidance.

By emphasising these elements in training initiatives, we can create a better-prepared workforce to deliver comprehensive and effective mental health support to youth, ultimately improving their treatment and care outcomes.

Enhance Community and Family Engagement in Mental Health Initiatives

> Enhancing community and family engagement in mental health initiatives is crucial for promoting well-being among youth. Caregivers and families are central to youth's mental health, providing emotional support, stability, and resilience. However, caregivers themselves often face significant stressors, including financial pressures, social isolation, and the challenges of addressing their children's complex emotional needs.

- **Invest in caregivers/families' wellbeing**

To fully support youth mental health, it is critical to ensure that caregivers have access to services that prioritise their well-being. This includes providing mental health support tailored to caregivers and opportunities to build their capacity to support children effectively. Programmes such as parenting skills training can equip caregivers with strategies to nurture children experiencing distress, foster open communication, and manage crises with empathy and confidence. By investing in caregiver wellbeing alongside youth-focused interventions, policymakers can strengthen the entire family unit, creating a more supportive environment for young people to thrive.

- **Establish local community services to address mental health needs directly and effectively**
  Youth representatives called for establishing more local community services and structures to address mental health needs effectively. They stressed the need for initiatives that engage families in mental health discussions. A key recommendation is to emphasise psycho-education for parents, fostering stronger collaboration between parents, schools, and the wider community. Since children spend the majority of their time either in school or within the family environment, these spaces are crucial for supporting their mental well-being. By providing parents with the tools and knowledge to better understand mental health issues, recognise early signs of distress, and respond effectively, we can create a more supportive environment for children. Additionally, enhancing cooperation between schools and parents through joint initiatives, workshops, and open communication channels can ensure that mental health is addressed holistically and continuously. This collaborative approach can empower families and educators to work together to support young people's mental health and provide them with the resources they need to thrive. Educating families through seminars and campaigns can help create a supportive community environment, particularly for those unaware of mental health issues. Organising local events through parent-teacher associations could further foster engagement and awareness. Others highlighted the importance of strengthening community initiatives and ensuring ongoing psychological support in schools to address mental health needs effectively. To proactively address youth mental health challenges, it is recommended to prioritise the development and expansion of community-based services and preventive interventions. Community-based services are essential for creating accessible, supportive, and familiar environments where youth feel comfortable seeking help before their concerns escalate into more serious mental health issues. These localised services can offer early screening, educational workshops, peer support programmes, and targeted interventions that address the community's unique pressures and risk factors. By focusing on prevention, such services reduce the stigma around mental health, promote early intervention, and foster resilience in youth populations. Furthermore, community-based approaches can bridge traditional mental health care gaps by reaching underserved or hard-to-reach groups, creating a supportive network that empowers youth and their families. Investing in these community-driven, preventive strategies

enhances early detection and builds a foundation of mental wellness that contributes to long-term health outcomes for youth.

- **Develop programmes targeting engaging parents**
  Similarly, both representatives of governmental and non-governmental organisations advocated for targeted programmes and workshops for parents, focusing on modern challenges such as internet addiction and effective communication strategies in the local community. Also, they called for robust community support systems to sustain interventions beyond formal settings like schools. Investing in community-based support systems, including mental health and multi-purpose centres, can leverage existing family and neighbourhood networks to enhance accessibility and support. Some also highlighted the importance of encouraging parental involvement and broader prevention programmes to create healthier environments for children and adolescents. By fostering community and family engagement, these initiatives can cultivate a more informed and supportive atmosphere for addressing mental health challenges among youth.

06.
Conclusion

The current study underscores the critical need to regard mental health, cultivating an environment where youth feel understood and supported. Through comprehensive desk and field research, significant challenges and gaps in the existing mental health support systems for youth in Cyprus have been illuminated. Key barriers identified include pervasive social stigma, insufficient awareness among stakeholders such as youth and their families, a lack of a multidisciplinary approach to addressing mental health disorders, and inadequate training for mental health professionals. The insights gathered from this research are vital for developing effective strategies and policies to promote mental well-being and resilience among youth in Cyprus. By aligning national initiatives with broader EU objectives, there is a unique opportunity to foster a more supportive and inclusive environment for youth mental health. From the research, several key recommendations emerge to enhance youth mental health support in Cyprus. These recommendations draw on the valuable perspectives of those actively engaged in the sector—youth, practitioners, families, and various stakeholders. They highlight existing gaps and barriers while also recognising promising services and programmes. Ultimately, the findings culminate in priorities and policy recommendations that serve as a roadmap for future actions in the sector. Particular emphasis is placed on youth's engagement and participation as youth's voices and needs are crucial when designing and implementing mental health prevention and promotion services and programmes.

References

Alexi, N., Moore, K., & Argyrides, M. (2018). Openness to help-seeking for mental illness among Greek-Cypriots. *Health Promotion International, 33*(6), 990-998. https://doi.org/10.1093/heapro/dax040

Bor, W., Dean, A. J., Najman, J., & Hayatbakhsh, R. (2014). Are child and adolescent mental health problems increasing in the 21st century? A systematic review. *The Australian and New Zealand journal of psychiatry, 48*(7), 606–616. https://doi.org/10.1177/0004867414533834

Christodoulides, C., Intziegianni, K., Mappourides, A., Antoniou, P. & Hadjifoti, P. (2021). *Exploring the relationship of youth in Cyprus with the Social Media and the Internet.* Alexander College-Alexander Research Centre.

Caspi A, Houts RM, Ambler A, et al. (2020). Longitudinal Assessment of Mental Health Disorders and Comorbidities Across 4 Decades Among Participants in the Dunedin Birth Cohort Study. *JAMA Network Open, 3*(4). doi:10.1001/jamanetworkopen.2020.3221

Craig, S. L., Eaton, A. D., Leung, V. W., Iacono, G., Pang, N., Dillon, F., ... & Dobinson, C. (2021). Efficacy of affirmative cognitive behavioural group therapy for sexual and gender minority adolescents and young adults in community settings in Ontario, Canada. *BMC psychology, 9*(1), 94.https://doi.org/10.1186/s40359-021-00595-6

Eaton, J., McCay, L., Semrau, M., Chatterjee, S., Baingana, F., Araya, R., Ntulo, C., Thornicroft, G., & Saxena, S. (2011). Scale up of services for mental health in low-income and middle-income countries. *Lancet (London, England), 378*(9802), 1592–1603. https://doi.org/10.1016/S0140-6736(11)60891-X

European Commission. (2023). *Flash Eurobarometer 530: Mental Health* [Report]. Ipsos European Public Affairs. https://europa.eu/eurobarometer

European Commission - Directorate-General for Health and Food Safety. (2023). *A comprehensive approach to mental health*. https://health.ec.europa.eu/publications/comprehensive-approach-mental-health_en

European Youth Information and Counselling Agency (2023). Youth Information minding youth's mental health: A survey report. https://static1.squarespace.com/static/63e63a0eebdc006803f20644/t/65535e6ee577a04a364e2adb/1699962481192/YIminds-survey-report-FINAL.pdf

Fritz, J., De Graaff, A. M., & Caisley, H. (2018). A systematic review of amenable resilience factors that moderate and/or mediate the relationship between childhood adversity and mental health in youth. *Frontiers in psychiatry, 9*, 341825. https://doi.org/10.3389/fpsyt.2018.00230

Fusar-Poli, P., Correll, C. U., Arango, C., Berk, M., Patel, V., & Ioannidis, J. P. A. (2021). Preventive psychiatry: a blueprint for improving the mental health of youth. *World psychiatry: official journal of the World Psychiatric Association (WPA), 20*(2), 200–221. https://doi.org/10.1002/wps.20869

Gore, F. M., Bloem, P. J., Patton, G. C., Ferguson, J., Joseph, V., Coffey, C., Sawyer, S. M., & Mathers, C. D. (2011). Global burden of disease in youth aged 10-24 years: a systematic analysis. *Lancet (London, England), 377*(9783), 2093–2102. https://doi.org/10.1016/S0140-6736(11)60512-6

Gulliver, A., Griffiths, K. M., & Christensen, H. (2010). Perceived barriers and facilitators to mental health help-seeking in youth: a systematic review. *BMC Psychiatry, 10*, 113. https://doi.org/10.1186/1471-244X-10-113

Hafstad, G. S., & Augusti, E. M. (2021). A lost generation? COVID-19 and adolescent mental health. *The Lancet. Psychiatry, 8*(8), 640–641. https://doi.org/10.1016/S2215-0366(21)00179-6

https://www.who.int/publications/m/item/social-determinants-of-health-to-advanceequity. Accessed 15 Oct 2021

IMR & Youth Board of Cyprus. (2021). *IMR-UNIC quantitative survey report on mental health.* IMR/University of Nicosia. https://youthpolicy.onek.org.cy/wp-content/uploads/IMR-UNIC_Quantitative-Survey-Report_Mental-Health.pdf

Kouta, C., Phellas, C. & Charis, K. (2013). Knowledge, attitudes, and perceptions of immigrants from third countries in Cyprus, on HIV/AIDS and sexual and reproductive health: The implication of nursing ethics to healthcare. *Health Science Journal, 7* (3), pp. 258–268.

Lundy (2007). *A discourse analysis is conducted to conceptualise Article 12 of the United Nations Convention on the Rights of the Child.* 33(6), 927-942, British Educational Research Journal. https://doi.org/10.1080/01411920701657033

MacDonald, K., Fainman-Adelman, N., Anderson, K. K., & Iyer, S. N. (2018). Pathways to mental health services for youth: a systematic review. *Social psychiatry and psychiatric epidemiology*, *53*(10), 1005–1038. https://doi.org/10.1007/s00127-018-1578-y

Malla, A., Iyer, S., McGorry, P., Cannon, M., Coughlan, H., Singh, S., Jones, P., & Joober, R. (2016). From early intervention in psychosis to youth mental health reform: a review of the evolution and transformation of mental health services for youth. *Social psychiatry and psychiatric epidemiology*, *51*(3), 319–326. https://doi.org/10.1007/s00127-015-1165-4

Ministry of Education, Sport and Youth (2021) *Yearly Report.* Retrieved from https://archeia.moec.gov.cy/mc/606/etisia_ekthesi_2021_ell.pdf

Morris, J., Belfer, M., Daniels, A., Flisher, A., Villé, L., Lora, A., & Saxena, S. (2011). Treated prevalence of and mental health services received by children and adolescents in 42 low-and-middle-income countries. *Journal of child psychology and psychiatry, and allied disciplines*, *52*(12), 1239–1246. https://doi.org/10.1111/j.1469-7610.2011.02409.x

Mousoulidou, M., Siakalli, M., Christodoulou, A., & Argyrides, M. (2021). The impact of the COVID-19 pandemic on mental health: evidence from Cyprus. *International Journal of Environmental Research and Public Health, 18*(8), 3868. https://doi.org/10.3390/ijerph18083868

OECD/European Union (2022), *Health at a Glance: Europe 2022: State of Health in the EU Cycle*, OECD Publishing, Paris https://doi.org/10.1787/507433b0-en.

Paradeisioti, A. (2023). Mental health services for children and adolescents in Cyprus. *European Child & Adolescent Psychiatry, 32*(4), 1521–1523. https://doi.org/10.1007/s00787-023-02194-9

Patel, V., Saxena, S., Lund, C., Thornicroft, G., Baingana, F., Bolton, P., Chisholm, D., Collins, P. Y., Cooper, J. L., Eaton, J., Herrman, H., Herzallah, M. M., Huang, Y., Jordans, M. J. D., Kleinman, A., Medina-Mora, M. E., Morgan, E., Niaz, U., Omigbodun, O., Prince, M., … UnÜtzer, J. (2018). The Lancet Commission on global mental health and sustainable development. *Lancet (London, England)*, *392*(10157), 1553–1598. https://doi.org/10.1016/S0140-6736(18)31612-X

youthPetrou, P. (2021). The 2019 introduction of the new National Healthcare System in Cyprus. *Health Policy*, *125*(3), 284-289. https://doi.org/10.1016/j.healthpol.2020.12.018

Potrebny, T., Wiium, N., & Lundegård, M. M. (2017). Temporal trends in adolescents' self-reported psychosomatic health complaints from 1980-2016: A systematic review and meta-analysis. *PloS one*, *12*(11), e0188374. https://doi.org/10.1371/journal.pone.0188374

Radez, J., Reardon, T., Creswell, C., Lawrence, P. J., Evdoka-Burton, G., & Waite, P. (2021). Why do children and adolescents (not) seek and access professional help for their mental health problems? A systematic review of quantitative and qualitative studies. *European child & adolescent psychiatry*, *30*(2), 183–211. https://doi.org/10.1007/s00787-019-01469-4

Radez, J., Reardon, T., Creswell, C., Lawrence, P. J., Evdoka-Burton, G., & Waite, P. (2021). Why do children and adolescents (not) seek and access professional help for their mental health problems? A systematic review of quantitative and qualitative studies. *European child & adolescent psychiatry*, *30*(2), 183–211. https://doi.org/10.1007/s00787-019-01469-4

YouthScheiner, C., Grashoff, J., Kleindienst, N., & Buerger, A. (2022). Mental disorders at the beginning of adolescence: prevalence estimates in a sample aged 11-14. *Public Health in Practice, 4*, 100348. https://doi.org/10.1016/j.puhip.2022.100348

Servili C. (2012). An international perspective on youth mental health: the role of primary health care and collaborative care models. *Journal of the Canadian Academy of Child and Adolescent Psychiatry*, *21*(2), 127–129. Scheiner

Sheppard, R., Deane, F. P., & Ciarrochi, J. (2018). Unmet need for professional mental health care among adolescents with high psychological distress. *The Australian and New Zealand journal of psychiatry*, *52*(1), 59–67. https://doi.org/10.1177/0004867417707818

Skeen, S., Laurenzi, C. A., Gordon, S. L., du Toit, S., Tomlinson, M., Dua, T., Fleischmann, A., Kohl, K., Ross, D., Servili, C., Brand, A. S., Dowdall, N., Lund, C., van der Westhuizen, C., Carvajal-Aguirre, L., Eriksson de Carvalho, C., & Melendez-Torres, G. J. (2019). Adolescent Mental Health Programme Components and Behavior Risk Reduction: A Meta-analysis. *Pediatrics*, *144*(2), e20183488. https://doi.org/10.1542/peds.2018-3488

Solmi, M., Radua, J., Olivola, M., Croce, E., Soardo, L., Salazar de Pablo, G., Il Shin, J., Kirkbride, J. B., Jones, P., Kim, J. H., Kim, J. Y., Carvalho, A. F., Seeman, M. V., Correll, C. U., & Fusar-Poli, P. (2022). Age at onset of mental disorders worldwide: large-scale meta-analysis of 192 epidemiological studies. *Molecular psychiatry*, *27*(1), 281–295. https://doi.org/10.1038/s41380-021-01161-7

Thompson, E. J., Richards, M., Ploubidis, G. B., Fonagy, P., & Patalay, P. (2023). Changes in the adult consequences of adolescent mental ill-health: findings from the 1958 and 1970 British birth cohorts. *Psychological medicine*, *53*(3), 1074–1083. https://doi.org/10.1017/S0033291721002506

Tzouvara, V., Kupdere, P., Wilson, K., Matthews, L., Simpson, A., & Foye, U. (2023). Adverse childhood experiences, mental health, and social functioning: A scoping review of the literature. *Child abuse & neglect*, *139*, 106092. https://doi.org/10.1016/j.chiabu.2023.106092

Uhlhaas, P. J., Davey, C. G., Mehta, U. M., Shah, J., Torous, J., Allen, N. B., Avenevoli, S., Bella-Awusah, T., Chanen, A., Chen, E. Y. H., Correll, C. U., Do, K. Q., Fisher, H. L., Frangou, S., Hickie, I. B., Keshavan, M. S., Konrad, K., Lee, F. S., Liu, C. H., Luna, B., … Wood, S. J. (2023). Towards a youth mental health paradigm: a perspective and roadmap. *Molecular psychiatry*, *28*(8), 3171–3181. https://doi.org/10.1038/s41380-023-02202-z

UNICEF. (2021). *Engaging children and youth on UNICEF's Strategic Plan*.

UNICEF. (2021). *The state of the world's children 2021: On my mind*. United Nations Children's Fund.

United Nations (2015). Transforming our world: the 2030 Agenda for Sustainable Development. *United Nations: New York, NY, USA*.

Vos, T., Lim, S. S., Abbafati, C., Abbas, K. M., Abbasi, M., Abbasifard, M., … & Bhutta, Z. A. (2020). Global burden of 369 diseases and injuries in 204 countries and territories, 1990–2019: a systematic analysis for the Global Burden of Disease Study 2019. *The lancet*, *396*(10258), 1204-1222. https://doi.org/10.1016/S0140-6736(20)30925-9

Westberg, K.H., Nygren, J.M., Nyholm, M., Carlsson I. & Svedberg, P. (2020). Lost in space - an exploration of help-seeking among youth with mental health problems: a constructivist grounded theory study. *Archives of Public Health, 78* (93). https://doi.org/10.1186/s13690-020-00471-6

World Health Organisation (WHO). (2021). Social determinants of health to advance equity. Retrieved from

World Health Organisation. (2001). *The World Health Report 2001: Mental Health: New understanding, new hope*. WHO, Geneva.

World Health Organisation. (2004). *Promoting mental health: Concepts, emerging evidence, practice: Summary report*. World Health Organization.

World Health Organisation. (2005). *Child and adolescent mental health policies and plans*. WHO, Geneva.
World Health Organisation. (2012). *Draft resolution on mental health: Global burden of mental disorders and the need for a comprehensive, coordinated response from health and social sectors at the country level (EB 130.R8)* WHO, Geneva.

World Health Organisation. (2014). *Investing in Children: The European Child and Adolescent Health Strategy 2015–2020.* World Health Organization; Copenhagen, Denmark.

World Health Organisation. (2021). *Mental Health Atlas 2020*. Geneva: World Health Organisation. https://www.who.int/publications/i/item/9789240036703.

YouthWiki (2024). *7.5 Mental health. National-Policies*. Available at: https://national-policies.eacea.ec.europa.eu/youthwiki/chapters/cyprus/75-mental-health

Appendix I. **Participating Organisations Information**

	Organisation/ Service/ Provider	Short description
1	**Mental Health Services of the Ministry of Health (MoH)**	The Ministry of Health in Cyprus is responsible for government policy on health matters. The mission of Mental Health Services of the Ministry of Health is to provide quality care for mental health, including mental health prevention and promotion. Care should be organised according to the specific needs of the individual and the family, in collaboration with other concerned departments and institutions (government, community, voluntary, etc.).
2	**Cyprus Youth Council (CYC)**	CYC was founded in 1996 as a volunteer, non-governmental, non–profit organisation. It aims to promote dialogue and cooperation between youth in Cyprus and connect them with youth in Europe and the world. CYC is continuously cooperating with the European Youth Forum. Areas of interest, always about youth, include human rights and equality, employment and social issues, active citizenship and life-long learning, non-formal education and youth policies.
3	**Youth Board of Cyprus (ONEK)**	The Youth Board of Cyprus was founded in 1994 as a public legal entity under the Youth Board Law of 1994 (N.33 (I)/94), passed unanimously by the House of Representatives. Since the beginning of its operation on the 2nd of June 1994, when the first Board of Directors was appointed, the organisation has offered youth multiple opportunities for active participation in social activities in Cyprus and abroad. The organisation's primary role is advisory, but it also undertakes youth-related projects, following the approval of the Council of Ministers, either during the approval of the organisation's annual budget or under another extraordinary decision. As an advisory body, the Board of Directors submits proposals on forming a comprehensive and specialised youth policy to the Council of Ministers via the Minister of Education and Culture. The primary purpose of ONEK, which derives from the Youth Board's Law, is the essential contribution to youth-policy decision-making, focused on current challenges and with the greatest possible positive impact on youth.

4	**Cyprus Youth Clubs Organisation (KOKEN)**	It is one of the oldest and largest voluntary youth organisations in Cyprus. KOKEN is a non-profit, nonpartisan, non-governmental organisation (NGO) which consists of the central coordinating body of the Youth Clubs in urban and rural areas of the Republic of Cyprus. Youth in KOKEN are regarded as youth aged 13 to 35. An NGO dedicated to improving the quality of youth's life in urban and rural areas of Cyprus. It actively contributes to raising youth's awareness of various topics. In cooperation with the members of the governmental and non-governmental organisations, the business world, and civil society, KOKEN plans to develop and upgrade the adjustment of the measures of youth empowerment. KOKEN offers qualitative upgrades and modernisation in the constitution of Youth Clubs so that they carry on their multidisciplinary work for the spiritual development and healthy growth of the youth of Cyprus. Among others, we aim to support and encourage the volunteers' work to ensure the Youth Clubs' smooth operation and viability. Today, KOKEN supervises and guides 75 Youth Clubs, bringing the total number to 75 Youth Clubs with about 3000 members.
5	**House of Youth Representatives (HoYR)**	It legislates within the framework of the separation of powers under the Rule of Law. In parallel, the House of Young Representatives convenes to engage in a unique form of "legislation" through simulated adoption of reports and decisions, mirroring the formal parliamentary process. This initiative gives youth a formal platform to express their perspectives on issues affecting youth, allowing them to participate directly in a structured, parliamentary environment. Through this experience, young participants gain a deeper understanding of principles such as democracy, freedom of speech with respect for opposing views, human rights, and the dynamics of debate. They also develop skills in negotiation and compromise to reach mutually acceptable solutions to shared challenges. This hands-on approach builds informed, engaged, and respectful future leaders who understand the legislative process's privileges and responsibilities.

6	**Cyprus National Addictions Authority (NAAC)**	NAAC is the supreme coordinating body in the field of licit and illicit addictive substances and pathological gambling in Cyprus. NAAC has the following responsibilities: Planning and monitoring the implementation of the National Strategy on Illicit Substances Dependence and the Harmful Use of Alcohol 2013-2020, Coordinating and monitoring all relevant measures and interventions, Promoting legislative measures, Promoting timely and scientifically documented information and enlightenment, Authorising measures, programmes and interventions for prevention, treatment, harm reduction and social reintegration, as well as sponsoring licensed programmes of non-governmental organisations, Monitoring for the detection of any direct or indirect promotion or advertising of addictive substance use, Developing cooperation with corresponding international and national Bodies / Organisations, Implementing interventions or programmes, Collecting, processing, studying and evaluating information and data; Creating, organising and operating an electronic information network; and Cooperating with the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA).
7	**Commissioner for Children's Rights (CCR)**	An independent institution which deals exclusively with the rights of the child and whose competencies and obligations are prescribed by law. The Council of Ministers appoints the Commissioner. The Commissioner is responsible for overseeing the enforcement of children's rights and ensuring their well-being and protection across various domains, including mental, physical, and educational aspects.
8	**Social Welfare Services (SWS)**	A public authority under the Deputy Ministry of Social Welfare aims to support vulnerable populations, particularly children and families. Key services include alternative care arrangements such as foster care and institutional care for children in need.
9	**Educational Psychology Service (EPS)**	An independent service reports directly to the Ministry of Education, Sport and Youth Director. It serves the needs of students at all levels of education, from Pre-Primary through Primary and Secondary, including Vocational and Technical Education. Educational psychologists provide counselling services for students, teachers, and parents to empower children.

Appendix II. **Existing Promotion and Prevention of Mental Health Services**

Governmental initiatives

Services of Archbishop Makarios III Hospital
- *The in-hospital Adolescent Treatment Department (TENE),* which started operating in 2012, is the first inpatient facility for adolescents with severe psychiatric disorders.

- *The Liaison Service—Child Psychiatry Consultation provides psychological support for hospitalised children or those under outpatient treatment at Makarios Hospital. It offers diagnostic evaluations, therapeutic planning, interventions,* and parent counselling.

- *Center for the Prevention and Treatment of Eating Disorders of Children and Adolescents (CE.P.T.E.D)* specialises in treating eating disorders in children and adolescents by a trained interprofessional team collaborating closely with paediatric departments, clinical dietitians and TENE. There are five outpatient centres of the Centre for Prevention and Intervention: two in Nicosia and one each in Limassol, Paphos and Larnaca that function as open treatment systems and collaborate with other services to address parent-child relationship difficulties, emotional and behavioural issues, attention deficit/hyperactivity disorders and autistic spectrum disorders.

- *The Prevention and Psycho-social Intervention Centre* is in a Nicosia community space. It offers outpatient diagnostic, treatment and rehabilitation services to children and adolescents up to 17 years old while extending support to their families. Interventions provided by the centre encompass both familial and school environments. Support is directed at children and adolescents encountering mild to severe psychological, psychosocial or psycho-emotional challenges. Activities by the centre include prevention, diagnosis, treatment, education and research aiming to address the multifaceted needs of youth.

- *Limassol Children and Adolescents Mental Health Services* operates within a community-based interprofessional centre with Child Psychiatrists, Clinical Psychologists, Occupational Therapists and Mental Health Nurses. Their scope of services includes diagnostic, therapeutic and rehabilitation support provided on an outpatient basis to children and adolescents up to 17 years old and their families. Additional services include interventions extending to the family and school environments to ensure holistic care. Their services in activities encompass prevention, diagnosis, treatment, education and research.

Other governmental services
- **PERSEAS:** A specialised counselling centre supporting young individuals and their families in Cyprus. The centre operates under the SHSO, covering the regions of Nicosia, Larnaca, and Famagusta. PERSEAS aims to provide comprehensive support to youth up to the age of 22, addressing various forms of addictive behaviours, including substance abuse (both legal and illegal substances such as drugs and alcohol) and modernised addiction challenges like internet addiction, online gaming and online gambling.

- **EXELIXIS programme**: This is operating under the authority of the MoH. The preventive programme for Mental Health Nursing focuses on Public Mental Health. It aims to promote mental health and prevent addiction within the community. The programme addresses the mental health needs of diverse populations,

ranging from preschool children to the elderly. Exelixis collaborates with various entities, including schools, municipalities, youth organisations, the Cyprus Youth Organisation, the Ministry of Education, Sport and Youth (MoESY), and parental associations. It focuses on enhancing youth mental well-being and preventing addiction. In schools, Exelixis offers programmes on addiction prevention, mental health empowerment, and recreational activities like summer schools to build resilience and coping skills. In communities, the programme partners with municipalities to run workshops and awareness campaigns about mental health. The programme developed as part of the European Drug Addiction Prevention Trial, involved collaboration across six EU member states. Its primary goal is to enhance adolescents' mental resilience and life skills through critical thinking, decision-making, and emotional regulation education. Comprising 12 sessions throughout the school year, the programme focuses on building critical life skills while raising awareness about social influences. Certified prevention or addiction counsellors implement the sessions, aiming to prevent and delay substance use initiation and transition from experimental to regular use. The programme's general objectives include improving health awareness, understanding social pressures, and fostering better attitudes and behaviours related to substance use. It targets explicitly reducing the use of tobacco, alcohol, and cannabis. For parents, the programme emphasises understanding the adolescent phase, how family dynamics impact substance use, setting clear rules, and enhancing negotiation skills to support their children's healthy development.

- **ANAKAMPSI:** A community-based, open treatment centre with the mission of offering therapeutic rehabilitation services. It is addressed to individuals over the age of 22 who are grappling with drug use, addiction, or alcohol abuse, along with support for their families. The centre offers both short-term (2-3 months) and long-term (up to 1.5

years) rehabilitation programmes based on the severity of addiction. These programmes include individual therapy sessions, occupational therapy and group interventions like relapse prevention and psychoeducation workshops. Family involvement is crucial, with counselling provided to family members to support the rehabilitation process. The centre also conducts proactive measures in schools, offering workshops aimed at students who have not yet engaged in substance use, as well as those who have had minor encounters with substances. These workshops focus on social and emotional skill development. The centre collaborates with schools, the military and other mental health services to ensure a holistic approach to rehabilitation. These partnerships help provide comprehensive care, including referrals to other services when necessary.

- "Στέγη Νεανίδων": A service under the SWS with a primary focus on meeting basic needs (such as safety, food, housing and education) and ensuring family protection for female adolescents aged 14 to 18 years old.

Non-Governmental Initiatives

- The **Cyprus Youth Council** (CYC), established in 1996, is a non-governmental, non-profit organisation that acts as the National Youth Council of Cyprus. Its primary mission is to foster dialogue and cooperation among youth within Cyprus and to connect them with their peers across Europe and globally. CYC actively advocates for youth rights, addressing key issues through collaboration with organisations, civil society groups, and policymakers. In recent years, especially after the COVID-19 pandemic, CYC has specialised in youth mental health, designing and implementing informational campaigns and participating in European-funded projects. The organisation also integrates youth perspectives into national mental health strategies and related policies. As a full member of the European Youth Forum, CYC is involved in decision-making processes, advocating for human rights, equality,

active citizenship, youth policies, non-formal education, and mental health. Additionally, CYC maintains a pool of trainers from its member organisations who are experts in non-formal education. These trainers design and implement training programmes to develop key competencies in youth, facilitate events, and provide consultancy services on youth development and non-formal education topics. In relation to mental health, the Youth Information Minding Youth's Mental Health project (YiMinds) surveyed Youth Workers (YW) and Youth Information Workers (YIW) across 25 European countries, including Cyprus. A significant outcome of the project was creating a guide for YIW, offering strategies and resources tailored to their professional needs (European Youth Information and Counseling Agency, 2023).
https://cyc.org.cy/

- **Cross Culture International Foundation Cyprus (CCIF)** focuses on mental health and well-being, emphasising mindfulness to help youth become more resilient, proactive and optimistic. It organises activities that support mental health, environmental and climate action, and inclusivity. Additionally, CCIF Cyprus Youth NGO engages in international cooperation through projects like Erasmus+ and collaborates with volunteers from various countries.
https://www.ccifcyprus.com/

- **Youth for Exchange and Understanding (YEU Cyprus)** focuses on raising awareness about mental health and well-being across all age groups. It undertakes various projects and initiatives to support youth in Cyprus, collaborating with local authorities, educational institutions, and international partners to enhance its impact.
https://www.yeucyprus.org/

- **Day Centre "Η** Πάντων Χαρά**":** Two non-governmental organisations. The first operates with a multifaceted approach to support children and adolescents who are referred from SWS using multisystemic therapy to

integrate youth into society.

- **Cyprus Family Planning Association** offers comprehensive mental health services for individuals affected by childhood sexual abuse, including psychological support, therapy, legal counselling, and social assistance. These services are tailored through individualised evaluations to address the unique needs of survivors as part of a multidisciplinary approach to care that extends support to their families and networks. In addition, the association provides counselling on sexual and reproductive health issues related to abuse. Their "Youth for Youth" team, established in 1996, engages youth aged 16-30 in addressing the issues that directly impact them. This initiative promotes two-way communication with youth and involves them in decision-making processes. The team also manages the 1455 hotline, offering support on sexual and reproductive health, focusing on youth. The hotline is facilitated by trained professionals and youth team members, ensuring accessible and informed guidance for the public.
https://www.familyplanning.org.cy/

Alternative Services

- **Holina Youth Village** is a specialised residential programme in Larnaca for youth between the ages of 16-26 who are struggling either with addiction, self-harm, stress, depression, anxiety and/or traumatic experiences. The programme is designed to last between 3 to 6 months using 12-step support and various other talking therapy strategies, in addition to a holistic healing approach and mindfulness practices, including exercise, art therapy, somatic therapy, and equine therapy. During their stay there, the programme focuses on preparing youth for their return to daily life with practical skill development and ongoing support mechanisms.
https://holinacyprus.com/

- **Resilient Lives** is a centre dedicated to promoting social and emotional well-

being through early detection, diagnosis, treatment, and prevention of mental health disorders in children, adolescents, and families. The Resilient Lives Centre is dedicated to promoting mental health and resilience among children, adolescents, and their families, in addition to individual and group therapies focusing on the multisystemic model. Its primary focus is early detection, diagnosis, treatment (including individual/group psychotherapeutic, psychopharmaceutic and psychosocial interventions) and prevention of mental disorders and emotional difficulties in children, adolescents, and their families. The centre assesses biopsychosocial factors that influence emotional and developmental challenges using a comprehensive, multidisciplinary approach. Their services include individual and group psychotherapeutic interventions with a multisystemic approach, targeting neurodevelopmental, social, emotional, and behavioural issues. The centre also offers preventive programmes like "Resilient Parents" and "Resilient Kids and Teens." The Resilient Parents programme encourages parents to prioritise self-care and mental health practices, with an online option for greater accessibility. Meanwhile, the Resilient Kids and Teens programme focuses on building resilience and social skills, with progress

tracked through structured assessments. Additionally, Resilient Lives runs school-based preventive programmes addressing issues such as bullying, eating disorders, and autism awareness, complemented by educational initiatives and media campaigns.
https://resilientlives.eu/

- **Cyprus Samaritans** is an online centre with volunteers that provides support to individuals dealing with mental health issues, anxiety, depression and suicidal thoughts with confidentiality and non-judgemental. The service is available nationwide.
www.cyprussamaritans.org

Appendix III. **Mapping of Current Promising Practises**

I Deserve a Chance

One of the longest-running and most impactful initiatives is the "*I Deserve a Chance*" that operated in Nicosia. It targets high-risk children and adolescents between the ages of 8 and 15 and their families in need by assessing their needs and linking them with relevant services such as psychological and learning support. The programme, launched in 2017, is one of NAAC's most impactful initiatives. This programme provides educational, psychological and social assistance, ensuring a stable environment for children to excel. Its comprehensive approach addresses not only the educational needs of participants but also their psychological and social challenges, making it a multifaceted solution for families in need. One of the programme's strengths is its ability to assess individual needs and connect participants with relevant services. The programme ensures that each child receives the resources required to thrive by providing tailored support. This holistic model recognises that academic success is deeply intertwined with emotional and social well-being. Key components include after-school activities, tutoring, psychological support, and family assistance, encompassing basic needs like food and clothing to continuous social work support. The programme operates year-round, without breaks during holidays. It has seen significant success, with participants progressing from primary school to university, highlighting its profound impact on improving children's lives and future. These activities enhance academic skills and foster social connections and personal development. Including psychological support and family assistance addresses underlying issues that may hinder a child's ability to learn and grow, promoting resilience and stability within the home. Also, the programme's commitment to operating year-round, including during holidays, demonstrates its dedication to continuous support. This consistency is

crucial for maintaining progress and providing a safety net for children who may otherwise fall through the cracks during school breaks. Therefore, it illustrates the immediate impact on individual lives and the long-term benefits for communities, as educated individuals are more likely to contribute positively to society.

Life Impact

Another promising practice is the "*Life Impact*" programme. It is a promising preventive intervention because it focuses on reducing risk factors for substance abuse in youth aged 8-18, targeting a critical developmental period. By engaging preadolescents and adolescents from high-risk environments in Larnaca and Famagusta, the programme addresses the root causes of addictive behaviours before they manifest. The 16-hour experiential workshops, based on the ACT (Acceptance and Commitment Therapy) model, provide a structured yet flexible framework for youth to develop coping skills, emotional regulation, and resilience. Additionally, including workshops for parents strengthens the family unit, which plays a key role in preventing substance abuse. The mentoring component offers personalised support, ensuring that adolescents at heightened risk receive ongoing guidance, making this programme a comprehensive and effective preventive measure. Its focus on individual and family engagement and evidence-based therapeutic approaches reinforce its potential for long-term impact.

Exelixis

Although the aforementioned programmes are primarily aimed at preventing substance use, they also implement activities and workshops aimed at the overall well-being of youth. These activities include supportive and educational practises that contribute to developing essential life skills beyond substance use prevention,

such as social skills and psycho-educational and experiential workshops for emotional expression. The *Exelixis* programme is a very promising initiative that could and should be expanded further in the school setting and the community, according to the representative of Exelixis:

"One of the most important aspects of Exelixis is the network; we have an excellent network of partners, very close collaboration with Cyprus Youth Board (ONEK), as well as programmes in collaboration with parents' associations, municipalities, communities, so there is a network based on which people who provide these services apply what we call a multisectoral approach."

The programme offers various services targeting diverse age groups, from children and adolescents to adults and the elderly. While the programme primarily focuses on delivering preventive mental health initiatives within schools, it also extends its reach beyond educational settings. By collaborating with municipalities, community centres, camps, and summer schools, Exelixis can engage a broader audience and make a more significant impact. Key focus areas include fostering mental resilience, encouraging healthy emotional expression, teaching stress management techniques, and preventing substance use. Through these initiatives, Exelixis promotes holistic well-being and mental health awareness across different sectors of society. The programme investigated youth satisfaction through a questionnaire; initial feedback from their actions amongst 234 students indicated a high satisfaction rate of 77% engaging activities like games and teamwork, emphasising the enjoyable and educational nature of the programme. The students also indicated that they preferred themes related to enhancing knowledge of risks and protective factors and fostering attitudes against substance use; moreover, from the students' recommendations, they reported incorporating more activities and games in the programme, while others recommended repeating the programme next year.

Η Πάντων Χαρά

The Day Centre "Η Πάντων Χαρά" is a pioneering initiative due to its holistic and multisystemic approach to supporting children and adolescents, which operates under the monitoring of Social Welfare Services and referred by them. The centre creates a structured yet adaptable environment for youth integration into society by focusing on individual and group therapies. Its targeted inclusion criteria ensure that participants can benefit fully from the services, prioritising those without severe conditions that require immediate, specialised care. The centre goes beyond traditional therapy by offering skill development through healthy activities such as sports and cooking, tailored to each child's interests and strengths. This not only fosters engagement but also promotes physical and emotional well-being. The involvement of career counsellors and sports psychologists adds an extra layer of support, preparing youth for a more successful transition into adulthood. This comprehensive, strength-based model makes "Η Πάντων Χαρά" a highly effective preventive and integrative practice. One of this centre's innovative approaches is employing former participants who finished the programme as "co-workers" and mentoring and guiding the youth that enter the programme. These "co-workers, having successfully navigated their challenges and completed the centre's interventions, offer a valuable perspective and relatable presence for children in the programme. This also offers the opportunity for youth to enhance and express their voice.

List of Figures

List of Graphs
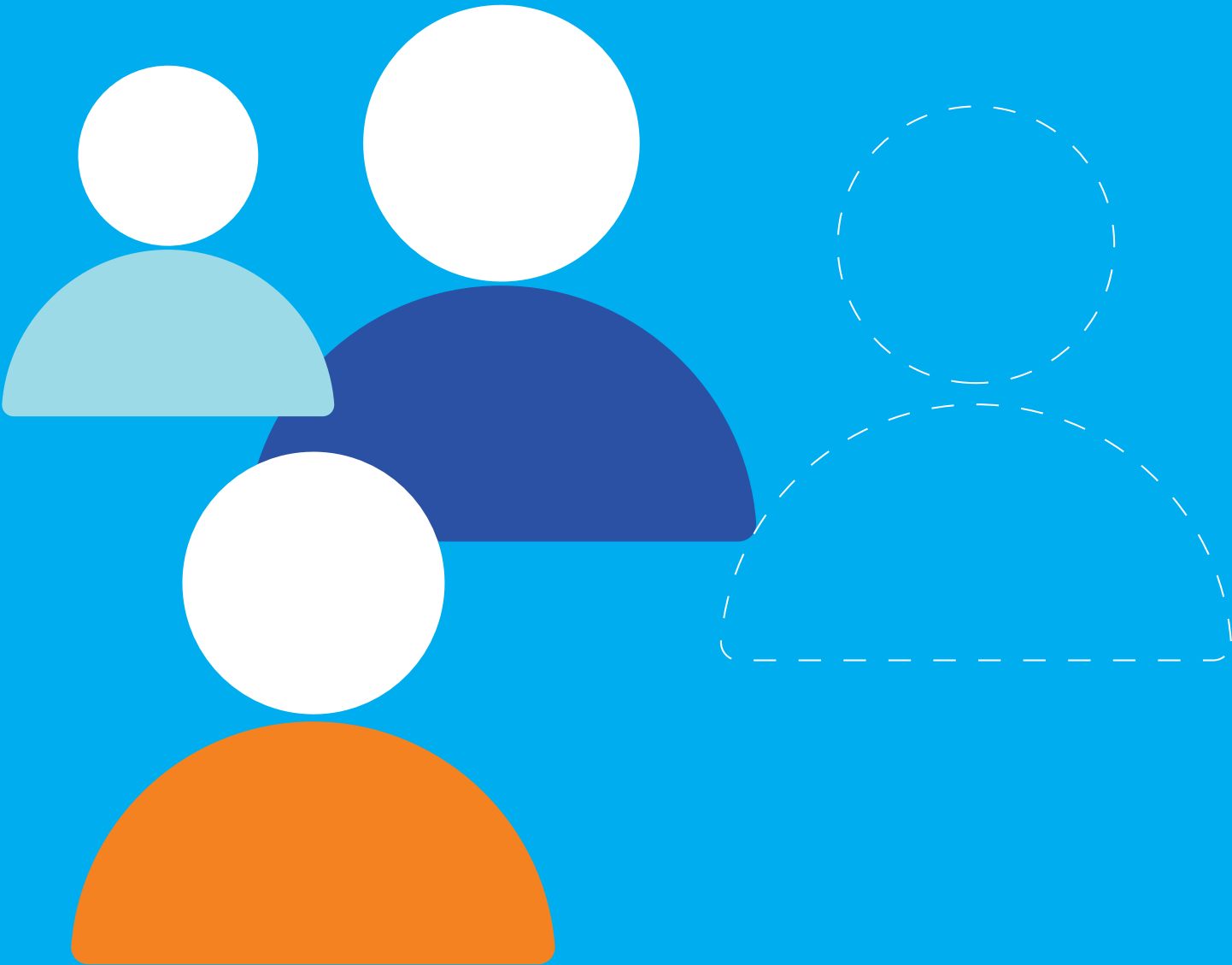
for every child

Whoever she is.

Wherever he lives.

Every child deserves a childhood.

A future.

A fair chance.

That's why UNICEF is there.

For each and every child.

Working day in and day out.

In more than 190 countries and territories.

Reaching the hardest to reach.

The furthest from help.

The most excluded.

It's why we stay to the end.

And never give up.

unicef ☺

for every child

Funded by
the European Union