



School-Based Mental Health Literacy Interventions in Guidance and Counseling Services: Ecological Determinants, Barriers, and Outcomes

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Abstract

The numerous cases of adolescent mental health disorders that go undetected and are poorly handled are currently an urgent issue in education. This study aims to examine the urgency of improving students' mental health literacy through counselling services at SMP Negeri 20 Surakarta, while identifying main constraints in its implementation. The research method uses a qualitative descriptive approach, collecting data through direct observation and in-depth interviews with Guidance and Counselling teachers focusing on seventh-grade students. Data analysis is conducted using the Miles and Huberman interactive model, which includes three steps: data reduction, data display, and drawing conclusions. The results show that mental health literacy education at SMP Negeri 20 Surakarta remains minimal, unprogrammed, and lacks adequate learning resources. This condition is worsened by psychological barriers where students prefer to internalise their emotional problems rather than consult. The combination of limited programs and students' closed attitudes causes school mental health handling to be less effective. This study concludes that the services provided by BK teachers are not yet optimal due to the absence of standard literacy guidelines. Consequently, the school requires changes toward a more open, adolescent-friendly counselling system, with full support from school management and parents.

Keywords:

determinants and barriers; guidance and counseling services; literacy interventions; mental health

Abstrak

Banyaknya kasus gangguan kesehatan mental remaja yang tidak terdeteksi dan tidak ditangani dengan baik saat ini menjadi persoalan mendesak di dunia pendidikan. Penelitian ini bertujuan mengkaji urgensi peningkatan literasi kesehatan mental siswa melalui layanan bimbingan konseling di SMP Negeri 20 Surakarta, sekaligus mengidentifikasi kendala utama dalam pelaksanaannya. Metode penelitian menggunakan pendekatan kualitatif deskriptif, dengan teknik pengumpulan data berupa observasi langsung serta wawancara mendalam bersama Guru Bimbingan dan Konseling (BK) pada lingkup siswa kelas tujuh. Analisis data dilakukan melalui model interaktif Miles dan Huberman yang mencakup tiga langkah, yaitu reduksi data wawancara, penyajian data hambatan, dan penarikan kesimpulan. Hasil penelitian menunjukkan bahwa edukasi literasi kesehatan mental di SMP Negeri 20 Surakarta masih minim, belum terprogram secara matang, dan kekurangan sumber belajar yang memadai. Kondisi ini diperparah oleh hambatan psikologis di mana siswa lebih memilih memendam masalah emosional mereka sendiri daripada berkonsultasi. Kombinasi

antara keterbatasan program dan sikap tertutup siswa tersebut menyebabkan penanganan kesehatan mental di sekolah menjadi kurang efektif. Penelitian ini menyimpulkan bahwa pelayanan yang diberikan oleh Guru BK belum berjalan optimal karena ketiadaan panduan literasi yang baku. Solusinya, sekolah memerlukan perubahan sistem konseling yang lebih terbuka, ramah remaja, serta mendapat dukungan penuh dari pihak manajemen sekolah dan orang tua.

Kata Kunci:

determinan dan hambatan; intervensi literasi; kesehatan mental; layanan bimbingan dan konseling



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Introduction

Adolescence is a developmental phase characterized by changes in physical, emotional, and social aspects. According to Santrock adolescence spans the age range of 11 to 18 years (Zakiah et al. 2023). During this phase, individuals are in the process of self-identity formation and experience increased sensitivity to their environment, which implies a heightened vulnerability to psychological stress. The World Health Organization (WHO) reports that approximately 14% of adolescents aged 10–19 years experience mental health disorders, yet the majority of these cases go undetected and do not receive adequate treatment (WHO, 2025). In fact, more than 700,000 deaths each year are caused by suicide (WHO, 2021). Additionally, data on years lost due to disability indicate that mental disorders contribute significantly, with 6 of the top 20 causes of disability stemming from the category of psychological disorders (Ridlo & Zein, 2018). These global findings align with the situation in Indonesia, where the results of the 2022 national mental health survey (I-NAMHS) indicate that approximately 34.8% of adolescents aged 10 to 17 are facing mental health issues. This figure equates to one in three adolescents, and about one in twenty of them fall into the category of more severe disorders (Gloriabus, 2022).

The government has demonstrated increased attention to adolescent mental health issues, manifested in various established policies, one of which is the 2020–2024 Action Plan of the Directorate General of Disease Prevention and Control, which includes services for individuals with depression aged 15 years and older through the provision of psychosocial support. In line with these policies, enhancing adolescents' mental health literacy in Indonesia necessitates the engagement of multiple stakeholders, including the education sector. The growth of various educational institutions and communities active in the field of mental health has contributed to raising public awareness, particularly among adolescents, through broader educational programs and campaigns (Fakhriyani, 2019). Such efforts have been extensively delivered through structured educational initiatives in both schools and universities. A structured, systematic, and interactive educational approach has proven effective in enhancing understanding, fostering positive attitudes, and promoting healthy behavioral changes among adolescents (Mawaddah & Prastya, 2023).

The increasing rate of mental health disorders among adolescents highlights the need to examine how individuals perceive and respond to mental health issues. Mental health literacy can be defined as an individual's informed understanding of

mental health, including how to maintain mental health, identifying mental disorders and available interventions, reducing stigma, and facilitating appropriate help-seeking (Kutcher et al., 2016). In line with this, Chao (2020) states that mental health literacy as a set of the knowledge and beliefs regarding mental disorders that function in the process of recognition, treatment, and prevention such disorders. Although mental health has been recognized as a national priority in Indonesia, its implementation remains suboptimal (Wahyuni & Fitri, 2022). The school environment constitutes a critical context for advancing adolescents' mental health literacy, given that schools serve as the primary setting for both cognitive learning and social-emotional development. Therefore, efforts to strengthen mental health literacy must be pursued, including through the optimization of school-based guidance and counseling services.

Mental health is defined here as a condition that encompasses several aspects, such as an individual's emotional, psychological, and social well-being. The World Health Organization defines mental health as a state of well-being characterized by an individual's ability to realize their full potential, manage stress, perform well in their work, and make a positive contribution to their community (Jenkins, 2021). From this perspective, mental health does not simply mean that a person does not have or does not show signs of a mental disorder, rather, it encompasses the individual's entire developmental process as well as their psychological well-being, as reflected in their ability to manage stress, their capacity to adapt, how they interact with others, and their decision making processes (Fakhriyani, 2022). Consistent with this view, mental health literacy refers to an individual's capacity to identify mental disorders, access reliable information and services, understand risk factors and underlying causes, apply self-help strategies, recognize available mental health professionals, and demonstrate attitudes or behaviors that support appropriate help-seeking (O'Connor & Casey 2015).

According to Jorm (2012), mental health literacy encompasses several key aspects: understanding how to prevent mental health problems, knowledge of their development, awareness of how to seek help, familiarity with self-help strategies during difficulties, and the ability to provide initial support to others experiencing mental health problems. Thus, mental health literacy does not focus solely on the cognitive domain, but also encompasses practical aspects that play a role in shaping behaviors that support mental health. Individuals with good mental health typically exhibit characteristics such as a sense of satisfaction in life, productivity, stress management skills, the ability to self-actualize, self-care, and soon (Anwar & Julia, 2021). Conversely, individuals with impaired mental health, according to the Indonesian Ministry of Health, tend to experience symptoms such as prolonged sadness, excessive anxiety, difficulty concentrating, drastic mood swings, withdrawal from social environments, and even thoughts of self-harm (Zakiah 2023).

From a broader perspective, mental health is shaped by multiple determinants, including biological aspects (such as genetics and brain chemistry), psychological dimensions (such as early life experiences and cognitive patterns), as well as social and environmental influences (including social support, living conditions, and exposure to stressful events) (Fatsena, 2025). According to Sorensen et al. (2012), health literacy is shaped by personal, situational, and socio-environmental conditions. Additionally, mental health literacy is affected by multiple determinants, including age, genetic background, language, race and ethnicity, educational level,

occupation, socioeconomic status, and access to healthcare services and information technology (Pawlak, 2005). These factors indicate that mental health literacy does not exist in isolation but is influenced by a broader social context; therefore, efforts to improve it must be undertaken through strengthening individual capacity, relational support, and improvements to service systems capable of fostering sustainable changes in knowledge, attitudes, and behaviors.

However, conditions on the ground indicate that the implementation still faces various obstacles. Based on preliminary observations through interviews with Guidance and Counseling teachers at SMP Negeri 20 Surakarta, it was found that efforts to develop mental health literacy remain limited and unstructured. This is evident from the lack of specific programs related to mental health. Additionally, limited learning resources and references act as barriers to delivering the material. Furthermore, many mental health cases remain unreported, as students tend to keep their problems to themselves. This situation poses a challenge for seventh-grade students who are in a transitional phase, making them in need of support during the adjustment process. However, based on initial observations and interviews with Guidance and Counseling teachers at SMP Negeri 20 Surakarta, it was found that the development of mental health literacy has not been optimally implemented. Therefore, this study aims to examine school-based mental health literacy interventions through guidance and counseling services by analyzing the factors influencing their implementation, including supportive or inhibiting environmental factors, constraints within the school system or policies, and the impact of these changes on adolescent development in Surakarta.

Methods

This study employs a qualitative approach using a phenomenological research design. The qualitative approach was chosen to explore a phenomenon based on the experiences, perceptions, and meanings constructed by participants in real-life contexts (Saryono, 2020). According to Sugiyono (2020), qualitative research is grounded in the postpositivist and interpretivist paradigms, which are used to examine phenomena in their natural settings, with the researcher serving as the primary instrument in the data collection and interpretation process. This approach enables researchers to gain a deeper understanding of the experiences, perceptions, and processes that influence the emergence of a phenomenon; thus, it is not oriented toward statistical generalizations but rather toward the depth of meaning and understanding of the reality under study (Sudaryono, 2021).

The research design used was phenomenology because this study focused on the participants' lived experiences in the implementation of school-based mental health literacy interventions through guidance and counseling services. Creswell (Creswell, 2020) explains that phenomenology aims to identify the essence of an individual's or group's experience of a phenomenon through an exploration of their perceptions, reflections, and the meanings they construct. In line with this, Khalefa and Selian (2021) state that the phenomenological approach allows researchers to understand how these experiences influence the way individuals interpret and respond to an event. Through this approach, the study identifies the ecological determinants that influence program implementation, examines systemic barriers that arise during implementation, and analyzes the transformational outcomes reflected in changes in students' mental health literacy, awareness, and behaviors

regarding mental health maintenance.

This study was conducted at SMP Negeri 20 Surakarta, located at Jalan Surya No. 155, Jagalan Village, Jebres District, Surakarta City, Central Java. The study was carried out over a three-month period, from February to April 2026. This timeframe encompassed the entire research process, from the preparation stage, through data collection and analysis, to the compilation of the research findings. The research subjects consisted of seventh-grade students and Guidance and Counseling teachers at SMP Negeri 20 Surakarta.

Research data were collected through observation, in-depth interviews, and documentation. Observations were conducted directly on guidance and counseling services, interactions between guidance counselors and students, the school environment, and activities related to mental health promotion. According to Abdussamad (2021), observation is a data collection technique involving the process of observing, recording, and documenting phenomena as they occur. The interviews in this study were conducted using a semi-structured approach based on an interview guide designed around the research focus: ecological determinants, systemic barriers, and transformational outcomes. Sugiyono (2020) states that an interview is a data collection technique conducted through a conversation between two people aimed at exchanging information through questions and answers; thus, conducting interviews helps in understanding the meaning of a specific topic (Sugiyono, 2020). Documentation was conducted by reviewing various documents related to the implementation of guidance and counseling services, including the annual guidance and counseling program, service modules or materials, activity reports, photographic documentation, and other administrative documents. According to Mardawani (Mardawani, 2020), documentation is a data collection technique involving the examination of written documents, images, and archives that can reinforce information obtained from observations and interviews.

The research was conducted in three main stages: the preparation stage, the data collection stage, and the data analysis stage. The preparation stage began with drafting the research proposal, developing observation and interview guidelines, obtaining research permits from the Faculty of Teacher Training and Education at Sebelas Maret University and State Junior High School 20 in Surakarta, and identifying informants. The data collection phase was carried out through field observations, in-depth interviews with guidance counselors and students, and the collection of supporting documents. The final phase was data analysis, which was conducted concurrently with the data collection process.

Data analysis utilized the interactive model proposed by Miles, Huberman, and Saldaña (2014), which consists of data condensation, data display, and drawing and verifying conclusions. These three components occurred simultaneously from the start of data collection until the completion of the study. Data validity was strengthened through source triangulation, which involved comparing information obtained from guidance counselors, students, observation results, and school documents. Additionally, methodological triangulation was conducted by integrating the results of observations, interviews, and documentation. This study also employed member checking, which involved reconfirming the results of interpretations with informants to ensure that the findings truly reflected the conditions in the field.

This study was conducted in accordance with the principles of research ethics.

Before data collection began, all informants received an explanation of the study's objectives, procedures, benefits, potential risks, and their rights as participants via a research information sheet. After understanding this information, each informant voluntarily signed an informed consent form. The identities of all informants were kept confidential through the use of codes or pseudonyms during the transcription, analysis, and reporting of research results. Research data were stored on password-protected digital storage media and were accessible only to the researcher. This study has obtained approval from the Faculty of Teacher Training and Education at Sebelas Maret University and State Junior High School 20 Surakarta and was conducted in accordance with the principles of respecting participant autonomy, maintaining data confidentiality, avoiding potential harm to informants, and upholding scientific integrity, as explained by Sudaryono (2021).

Results and Discussion

Analysis of Ecological Determinants of Mental Health Literacy

1. Analysis of Environmental Factors

In this study, ecological determinants refer to the effects of physical, social, and cultural environments that influence individuals' life experiences and psychological states. Muhyani (2012) explains that environmental factors affecting mental health are not merely physical but also encompass socio-cultural aspects such as norms, values, and patterns of social interaction. Based on interviews with Guidance and Counseling teachers, this study found that socioeconomic factors are a dominant determinant influencing the mental health of seventh-grade students at SMP Negeri 20 Surakarta, where the majority of students come from lower-middle-income backgrounds, living in densely populated and cramped environments, and some even reside in marginalized areas, particularly in densely populated settlements along riverbanks and railway tracks areas that undoubtedly require special attention from the government.

Additionally, the school environment serves as part of the ecological determinants, where the school functions as a space providing psychological support through various facilities accessible to students. However, the research findings indicate that utilization of these facilities remains low. Nearly all seventh-grade students are unaware of the existence or functions of the school's counseling services. Even among the small number of students who are aware, most tend not to utilize them. They are also unfamiliar with professional services such as psychologists and psychiatrists as sources of help when experiencing psychological problems. These results are consistent with earlier studies carried out by Fatmawaty et al. (2024), which showed that the underuse of counseling services is also evident in other educational contexts, including among students at Malahayati University. The study revealed that most students were unaware of the existence of counseling services, and among those who were aware, many still did not utilize them. This was attributed to low interest, a lack of understanding, and insufficient outreach regarding the benefits and objectives of these services.

2. Analysis of Family Factors

The family especially parents holds a central role in influencing and sustaining adolescents' mental health, particularly throughout their psychological development. According to Stadler, adolescents aged 15–18 are in a phase where they are

vulnerable to mental health issues, particularly when emotional support and parental care are not optimally provided. Based on interviews with Guidance and Counseling teachers, most students at the school SMP Negeri 20 Surakarta come from lower-middle-income backgrounds, and approximately 50% of them come from broken homes. Family instability, such as prolonged conflict or parental relationships without a clear marital bond, results in reduced emotional support for children a crucial source of support in coping with developmental pressures.

Additionally, the post COVID 19 pandemic situation has further exacerbated students' family conditions. Some parents have experienced job loss (layoffs), leading to a decline in family economic conditions. This economic pressure not only affects material well-being but also impacts parents' psychological well-being, which in turn influences parenting styles and the quality of interactions with their children. These findings align with Andriani's (2021) research, which indicates that family structure has a significant association with depression levels among adolescents. Adolescents from families with divorced parents tend to have lower economic conditions compared to those from intact families. Consistent support from the family serves as the primary foundation in helping adolescents develop mental resilience and cope with various pressures (2021).

3. Analysis of Peer Support Factors

In such circumstances, the presence of friends can serve as a source of emotional support capable of enhancing motivation, a sense of security, and enthusiasm for school activities. However, peer relationships do not always have a positive impact. In some cases, interactions with peers can lead to unhealthy dynamics. Research findings at SMP Negeri 20 Surakarta indicate issues within peer relationships linked to low mental health literacy. Based on interviews with teachers, it was found that some students carry traumatic experiences from earlier periods, such as bullying in elementary school. Upon entering junior high school, some students re-engage with the same perpetrators, often in more complex situations involving broader peer groups.

These conditions indicate that students' understanding in managing conflicts remains low, as well as their limited ability to seek help when facing psychological pressure. Consequently, the development of students' mental health literacy is hindered, particularly in terms of the courage to report issues, emotional regulation skills, and awareness of the importance of healthy social support.

These findings are further supported by interview results with several students who revealed that friendship patterns within the school environment tend to form into specific groups (cliques). In fact, there is a phenomenon where some student groups join older students and collectively engage in bullying behavior. These results align with Malfasari's (2020) research, which indicates that some respondents have peer environments that are less than conducive. A non supportive social environment can increase the risk of emotional and mental health problems among adolescents. In contrast, positive peer relationships act as protective factors that enhance mental health literacy.

Systemic Barriers to Mental Health Literacy

The implementation of school-based mental health literacy interventions remains constrained by multiple obstacles. Based on interviews with Guidance and

Counseling teachers at SMP Negeri 20 Surakarta, the primary barrier lies in the low awareness and understanding of the importance of mental health among education stakeholders, ranging from school administrators, teachers, parents, to the students themselves. There remains a perception that mental health issues are less of a priority than academic achievement; in some cases, they are even considered taboo (Chan et al., 2024). This situation results in minimal support for mental health programs, both in terms of policy and resource allocation. Efforts to address this situation require education to change perceptions and reduce stigma (Maykel & Bray, 2020). In addition, limited facilities and support services also pose a barrier. Research findings indicate that students have a low level of understanding regarding mental health services, leading them to rarely utilize the counseling services available at school. Many students are unaware of how to access help and do not even understand the roles of professionals such as psychologists and psychiatrists. This situation aligns with the findings of Nasution (2025), who noted that the mental health care system in Indonesia still faces various challenges, such as limited facilities, a shortage of professionals, and high service costs. These challenges become even more complex in areas with limited access, as explained by Juniar where adolescents face significant barriers in obtaining adequate mental health services (Juniar, 2024).

Additionally, challenges also arise in the curriculum and learning process. Mental health literacy has not yet been integrated into the school curriculum, particularly at the seventh-grade level. In fact, integrating mental health into an already packed curriculum requires careful planning to avoid disrupting the balance of other subjects (Knox et al., 2022). Furthermore, developing teaching methods suited to students' characteristics also demands specialized competencies from educators. This challenge is compounded by the difficulty of measuring the effectiveness of mental health programs in the short term, which impacts the sustainability of support and funding (Pinkett, 2023). Furthermore, the diversity of students' mental health needs poses a challenge, as students inherently have different backgrounds, experiences, and psychological conditions. Based on interview findings, it was discovered that some students experienced trauma due to bullying as early as elementary school, and this situation persisted when they entered junior high school, even involving a broader range of perpetrators. Karisma et al. (2023) emphasizes that bullying can produce long-term psychological consequences, including a higher likelihood of depression and self-injurious behavior, thus necessitating school-based interventions such as guidance or counseling services, social skills training, and the cultivation of empathy and tolerance.

Another equally important barrier relates to privacy and confidentiality. Mental health issues are often sensitive, so students tend to be reluctant to open up due to fear of stigma or social consequences. Results from interviews with seventh-grade students indicate that students rarely report problems to guidance counselors and prefer to keep their issues to themselves. Consequently, in some cases, teachers only obtain information through third parties or indirect observations, such as CCTV footage. Therefore, a secure reporting system that guarantees confidentiality is needed, along with clear school policies for addressing cases such as bullying. Pugh & McPhee (2023) emphasizes the importance of clear policies regarding confidentiality and ensuring all staff understand how to maintain student trust.

Thus, the existence of these diverse barriers suggests that mental health literacy implementation in schools should not be carried out in a fragmented or step-by-step

isolated manner. A comprehensive approach is required, encompassing awareness-raising, strengthening resources, curriculum development, adaptation to students' needs, and privacy guarantees in services. The success of these efforts depends heavily on the long-term commitment of all stakeholders including policymakers, school administrators, teachers, parents, and the community to creating an educational environment that supports students' mental health.

Transformational Outcomes Of Mental Health Literacy

From interviews with guidance and counseling teachers, it emerged that mental health literacy interventions in schools are still not widely implemented and remain limited in scope. This situation is evident in the lack of integration of mental health materials into the learning process, as well as the absence of supporting programs such as seminars, training sessions, or workshops that specifically address mental health literacy for students and educators. In fact, educational interventions such as webinars are relatively easy to implement and tend to have high participation and completion rates (Yunus et al., 2019). Additionally, Guidance and Counseling teachers noted that the scarcity of reference materials and teaching resources poses a major obstacle in conveying understanding, leading to a lack of knowledge necessary to recognize, understand, and manage psychological conditions. Furthermore, mental health issues among students often go unidentified, as students tend to keep personal problems to themselves, leaving teachers with limited information sometimes relying solely on indirect observations, such as CCTV footage. These interview findings indicate that the low level of mental health literacy interventions at SMP Negeri 20 Surakarta has implications for students' weak social resilience. Yet, schools play a strategic role as the primary environment for enhancing mental health knowledge and awareness among children and adolescents (Gartland et al., 2019).

Furthermore, based on the students' accounts as research subjects, it was revealed that most of them still possess a limited level of understanding of mental health literacy. This limitation causes them to be reluctant to discuss the psychological issues they are experiencing, often preferring to share only with peers within a limited circle. This situation has the potential to hinder early detection of other students who actually need help but remain unidentified. In fact, individuals with good mental health literacy tend to be better able to recognize early symptoms of psychological disorders and are more likely to seek appropriate professional help (Kelly et al., 2007). The findings of this study also indicate that students still face difficulties in understanding, recognizing, and managing emotions, particularly negative emotions. Until now, they have relied primarily on peer support as their sole problem-solving strategy and are not yet accustomed to accessing professional services when facing psychological distress. These findings align with the view that increased knowledge can foster healthier behaviors, both mentally and physically. Mental health literacy can help individuals maintain their psychological well-being, including coping with stress and preventing the onset of mental disorders (Estherita, 2021).

Conclusion

This study indicates that school-based mental health literacy interventions through guidance and counseling services at SMP Negeri 20 Surakarta have not yet

been implemented optimally due to limitations across various aspects. Ecologically, students' mental health is influenced by vulnerable socioeconomic backgrounds, unstable family dynamics, and peer relationships that are not always supportive. On the other hand, systemic barriers such as low stakeholder awareness, the absence of mental health literacy within the curriculum, restricted resources, and inadequate as well as non-confidential access to services have impeded the ability of existing programs to effectively respond to students' needs. Consequently, the expected transformational outcomes have not been achieved, as evidenced by students' limited understanding of mental health, the persistence of stigma, limited emotional regulation skills, and a low tendency to seek professional help. Therefore, strengthened interventions must be implemented in guidance and counseling services, integrated into the curriculum, and supported by cross-sectoral collaboration to foster mental health literacy among students.

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