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# The Nexus of Family, School, and Society in Adolescent Mental Health

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DOI: <https://dx.doi.org/10.47772/IJRISS.2023.701096>

Received: 25 September 2023; Accepted: 09 October 2023; Published: 08 November 2023

## ABSTRACT

Despite the critical nature of the adolescent period in human growth, mental health among teenagers in China has not received sufficient attention in academic research. This study investigates how the family, school, and community environments can interact to influence the mental health and wellbeing of Chinese teenagers. Using a mixed-methods approach that combines qualitative and quantitative methods, the study gathers both opinion and quantifiable data on how family, school, and societal interventions can work together to support and shape adolescents' mental stability and wellbeing. Data is collected through surveys and focus groups with parents, instructors, and community leaders. The study reveals that emotional and social problems are prevalent among Chinese teenagers and have various effects on their mental health. The findings suggest that kid-friendly interventions to support teenagers with mental health problems should be developed and distributed through family, school, and community-based mental health services. Schools, in particular, offer a unique setting for the promotion of mental health in teenagers by reducing risk factors and boosting protective elements. Educating families and communities about the warning signs of adolescent mental health problems and how to access local resources when they notice these signs in a loved one is also crucial.

**Keywords:** adolescents' emotional health, families, schools, community

## INTRODUCTION

Adolescents' emotional health, families, schools, and community. In this research, the effects of the family, school, and social settings on the mental health and general well-being of teenagers are investigated. It examines how various family, educational, and social initiatives support and mould the mental health and welfare of people during the adolescent period of human growth. It also looks at how those who work in these environments see their role in fostering the mental growth, development, and welfare of adolescents. The study was conducted in a local authority setting with an emphasis on social context and explores any social factors that people may think have an impact on the development of teenagers' mental health and welfare.

It aims to look into ideas, perspectives, and issues surrounding teen mental health in general and specifically how society, families, and schools can influence the welfare of the young people. Recent years have seen a rise in adolescent mental health problems all over the world. Therefore, governments and healthcare systems all over the world place a high emphasis on the development of teenagers' psychological, social, and emotional abilities [1].

## Background

Teenagers with poor mental health are more likely to experience hardship and other negative adult results, in addition to physical and social issues like failing grades, illegal activity, and drug abuse [2]. The resources, tools, and life skills that young people need to reach their best potential and surmount adversity can be provided to them through early interventions that promote mental health.

Studies [3] provide evidence from around the world, primarily from high-income countries, that broad-based interventions for mental health promotion, carried out in collaboration with families, schools, and communities, improve social functioning, academic and professional performance, and general health habits in addition to mental health.

Even though it is recognised how important it is to support teenagers' mental health, it is still an overlooked public health problem, especially in low- and middle-income countries. An unequal allocation of mental health results from the fact that the weight of mental disease and its damaging effects is particularly burdensome on those who are impoverished and/or experience different types of socioeconomic deprivation [4].

90% of the world's adolescents live in low- and middle-income countries, where they make up to 50% of the population, the importance of mental health in global development initiatives is becoming more widely recognised [5]. This is especially true in terms of achieving the Millennium Development Goals (MDGs), which include promoting mother and infant health, universal education, and reducing poverty.

Therefore, it is crucial to manage young people's mental health in a fruitful way, particularly during their formative years, as a part of a broader health promotion and development strategy and as a means of achieving a sustainable digital objective of good health and wellbeing. This is due to the fact that a sustainability-focused strategy to mental health can aid in reinventing different outcomes, reviving the earth, creating transformational ecologies, successfully treating mental health issues, and advancing the movement towards a more durable and sustainable future [6].

Communities, families, and schools are some of the most important social settings for promoting young people's mental health and wellbeing, according to study on mental health promotion conducted by the WHO [7]. In addition to helping and supporting a sizeable percentage of teenagers who experience mental health issues and challenges, these environments offer a venue for enhancing emotional and social competence and scholastic learning. This is as a consequence of the correlation between improved mental health outcomes and chances for lifelong learning.

There is strong proof that socially focused efforts to support mental health result in positive social, scholastic, and mental health results, according to research cited [8]. This is because developing life skills, encouraging social and emotional development, and starting early interventions to deal with emotional and behavioural issues all offer youth long-term benefits in the form of enhanced emotional and social functioning, healthy lifestyle decisions, and academic success. In light of this, supporting mental health and wellbeing is a key component of the WHO's "Health Promoting Schools" initiative [9]. Based on this, the current research investigates how the effects of family, school, and community on the mental health of teenagers in the Chinese setting.

China has drawn attention because of its varied sociocultural settings. The goal of the current research was to clarify how the three variables relate to how teenagers' mental health is developing.

### **Research Objectives**

The research aimed to accomplish the following four primary goals:

- To identify the availability of the welfare services for teenagers in China.
- To examine the school factors on teenagers' mental health.
- To investigate the teenagers' emotional states and techniques for assisting students with emotional problems

## LITERATURE REVIEW

### Empirical and Theoretical Review

The components that influence young people's mental health development have all been demonstrated in various studies, like [10], performed in various contexts around the globe. The controversial merger of family, schools, and society based on the articulation of the responsibility to provide all teenagers with a secure and appropriate setting within the context of education has become a societal turning point for the development of adolescents' mental health.

Some surprising findings have come from the most recent study on the impact of society, education, and family on teenage mental health. On the one hand, the Helping Adolescents Thrive (HAT) Initiative's curriculum narrowing to focus on tested subjects (such as math and reading) and the neglect of adolescent emotional development support have both been unintended consequences in terms of the development of mental health [11].

On the other hand, in a different global context, the Helping Adolescents Thrive (HAT) Initiative mandates the reporting of disaggregated data, allowing individuals, families, communities, and institutions to comprehend the effects of depriving adolescents of mental health care as well as the factors that affect their mental health. As a result, there are more and more calls for an educational framework and assistance programme that supports the stability and wellbeing of adolescents and encourages their mental health.

It has been highlighted [12] how important it is for families, institutions, and communities to shape and have an impact on teenagers' mental health development, and how the idea of life courses and social fields accurately captures this. The three major social areas of family, school, and society, which are important at every stage of life and have different effects on how teenagers' mental health develops, are seen from this viewpoint. Success or failure in fulfilling one's emotional and social obligations depends on how well each person adapts their behaviour to the unique social task demands encountered within each of these important social areas at each stage of life.

### Environmental Aspects' Effects on Mental Health

Despite being widely held, the myth that mental disease occurs in families is not backed by evidence. Genetics is only one of many factors; the surroundings is another important one. These diseases can be caused by a variety of factors, including an individual's environment and way of living. A person's mental health and wellbeing can be significantly impacted by the environment in which they reside, work, or where their teen grows [13].

### Needs for Adolescents' Unmet Mental Health

Since the early twentieth century, when all teenagers were accorded the right to a free public education, families, schools, and communities worldwide have been deeply concerned about the mental health requirements of students [14].

Mental health services have been expanded in schools and communities as a result of the substantial demand for good mental health during the early growth of teenagers. Due to the wide range of needs and the fact that the majority of children from low-income families could not access adequate community mental health interventions for adolescents, schools de facto took over as the primary location for receiving mental health care for adolescents [15]. This setup, however, was neither ideal nor sustainable, and research indicates that schools by themselves are unable to lessen the weight of teenage mental health issues.

Investigations like [16] revealed some of the unmet mental health requirements of the teens. The results showed that since the early 1990s, families, schools, and communities have been and remain the most important environments for fostering teenagers' mental health and welfare. Since significant inequalities were found, especially among the most vulnerable teenagers, it is also evident that increasing mental health services in schools has not sufficiently reduced the impact of mental health issues among adolescents.

### **The Development of Adolescents' Emotional Wellbeing Is Dependent on Their Family**

A crucial setting for promoting wellness is the family. Teenagers are born into families where they receive the requirements for their growth and development, making the family the most important societal structure for the development of their health. An adolescent's psychophysical health is harmed by intra-familial problems, which also hinder their academic transition.

The family can be a nurturing and social support system, but it can also be a place where injustice, tyranny, and control are practised. For instance, discrimination against older and female family members results in tyranny and inequality, which can cause tension and mental health issues in some members. This shows that family has an impact on health results both positively and negatively, and that this must be considered when creating health initiatives. A family environment is linked to good health outcomes, especially for the development and maturation of teenagers. For instance, it has been shown that two-parent biological homes are better able to safeguard the mental health of teenagers [17].

### **School as A Requirement for The Growth of Teenagers' Mental Wellbeing**

Schools are crucial locations for encouraging health, according to a WHO study, and the idea of a health-promoting school is becoming increasingly popular. This is due to the fact that schools provide a thorough approach that takes into account not only health education through the curriculum but also fostering a healthy school environment and ethos, as well as interacting with families and the larger community, realising the significance of the environment in supporting adolescents' and young people's health [18].

By implementing strategies catered to their unique needs, schools play a crucial part in assisting students' mental health and wellbeing [19]. As a result, schools all over the world are required by law to support their students' welfare. This includes protecting adolescents' health and development and taking action to guarantee that every student has access to an improved learning atmosphere that encourages the highest level of potential. To ensure that students' mental health and behavioural development is developing properly, it is crucial to intervene early to spot issues and provide suitable assistance.

### **Society as A Factor in The Growth of Teenagers' Mental Health**

The influence that society has on teenage mental health has been discussed in numerous research studies. According to research by [20], social variables can also contribute to depression, and those who are sad are more likely to retreat from social settings. Another element related to the emergence of melancholy is loneliness.

In order to help families, support their children's social and emotional development, the society and the social sector are essential, according to a WHO study. Organizations actively participate in a wide range of activities, including athletics, music, and religious events, from the viewpoint of the social sector [21]. Social authorities are therefore charged with both the main responsibility for teenagers who are at risk of abuse or neglect as well as the general responsibility for the wellbeing of all adolescents. In this manner, the community hopes to foster the growth of teenagers' mental health while also providing safe settings for them [22].

## METHODS

### Research Design

Based on the three crucial components of research—the goal of the study, the timeliness of data collection, and the relative weight of each data type—a mixed approach was used in this study. For these reasons, this research used an explanatory sequential design method, in which numeric data are collected and analysed first, followed by qualitative data.

### Location, participants, and sampling for the study

Due to their accessibility to families, educators, and other members of society concerned with teenagers’ healthy development and growth, 40 well-established local youth centres located within local governments in China were chosen for the research.

Due to the use of stratified sampling, stringent inclusion criteria had to be used to guarantee that the study’s subjects chosen were the most qualified. The selection of individuals was based on the inclusion factors listed in Table 1 below:

Table I. Inclusion Criteria

Data Set	Inclusion Criteria.
Adolescents	<p>Aged 13-19 years In schools</p> <p>Residing with their parents</p> <p>Parental approval was requested, as well as permission for teens to participate.</p>
Parents	<p>Adolescents whose parents have granted approval for them to join</p> <p>Live with their youngsters</p> <p>They consented to participate and allowed their teen to be involved.</p>
Staff at youth centers/teachers in schools	<p>Working directly with teenagers and accepting the study’s invitation</p> <p>Mentor young people by spending time with them.</p> <p>Instructors who instruct teenagers on various facets of life (social, emotional, etc.)</p> <p>Employ educational strategies that influence teenagers’ emotional health</p>
Data Set	Inclusion Criteria.
Community members	<p>Community representatives who were open to taking part in theresearch</p> <p>They create and supervise structures that foster and direct the social development of teenagers’ mental health and welfare.</p>

## Data Collection Process

1) 200 participants participated in focus group talks. The demographic of individuals who were involved in focus groups is shown in Table 2 below:

Table II. Population Of Focus Group Participants

Number of youth centres	Parents, Educators and Community
40	200 participants in groups of 25 members

Questionnaires: Table 3 Below Shows That Numbers Of Participants Engaged Using The Questionnaires:

Table III. Questionnaire Participants

Number of youth centres	Adolescents
40	200

## Pilot Study

The survey questionnaire was tested before being used to collect data in order to assess their suitability, appropriateness, and reliability as well as to identify any unexpected problems. (Reed et al., 1996). As a result, the pilot research involved all participant categories. The researcher modified and enhanced the usefulness of the research tools based on input from the pilot study. (i.e., focus groups, and questionnaires). The feedback was helpful in revising the wording of a number of queries that led to biased replies from participants, who preferred to give answers they believed to be socially acceptable. As a result, to make the focus groups and surveys more conversational and to help the participants unwind, the queries were rephrased and made more enjoyable.

Similar to this, additional questions were also added to the final focus group and survey plans in order to extract deeper and more insightful information about participant comprehension and views of the concept under study. This made sure that reliable information from reliable sources was gathered to meet the goals and purposes of the research.

## Data Analysis

The data collected through focus groups and the survey questionnaires was coded into a statistical software (SPSS) spread sheets in order to enable analysis using various statistical tests (Kulas, 2020). The selection of SPSS is credited to its appropriateness and ability to generate statistical analysis as well as its suitability to offer a range of tests and tools for output presentation such as tables, graphs, and charts that help in displaying the findings and making interpretation easy and convenient. The data were subjected to descriptive and inferential statistical tests in order to produce factual information to support the study. Descriptive tests were used to determine the availability of welfare programs for teenagers in China. Also, regression and correlation tests were performed to determine the impact of school-related elements on adolescents' mental health and to look into the connection between teens' emotional states and strategies for helping students with emotional issues. In this way, the analysis's findings were able to address the problem under investigation while also fulfilling the goals of the study.

## RESULTS

### The Welfare Of Teenagers

The study utilised the Chinese version of the KIDSCREEN-10 questionnaire to measure teenagers' Health-



Related Quality of Life (HRQoL). The questionnaire items assessed the teenagers’ mental stability, social wellness, self-development.

From the finding in Table IV, it is evident that the teenagers’ reacted as follows to the different items assessing their HRQoL. Item 1(80%) stated they often or always felt fit and well, Item 2 (95%) said they often or always felt full of energy, Item 5(90%) noted that they have had enough time for themselves, Item 6(97.5%) stated that they have often or always been able to do the things that they want to do in their free time, Item 7(70%) expressed that their parent(s) have often or always treated them fairly, Item 8(90%) voiced that they have often or always had fun with their friends, Item 9(82.5%) affirmed that they have often or always got on well at school and Item 10 (80%) approved that they have often or always been able to pay attention. On the other hand, the teenagers’ reacted as follows to the following items. Item 3(82.5%) expressed that they have never or sometimes felt sad and Item 4 (77.5%) indicated that they have never or sometimes felt lonely.

These findings reveal the availability of teenager welfare services in home, school and society settings in China. The responses indicate that the participants are provided with conducive growth and development conditions the prioritizes their health-related quality of life.

From these results, it is obvious that many teenagers are accessible to their emotional welfare services which are necessary for their mental health care and wellness.

Table I. Teenagers’ State Of Wellbeing

Teenagers’ Welfare					
Items		Never	Sometimes	Often	Always
Item 1	Freq	5	15	70	110
	%	2.5	7.5	35	55
Item 2	Freq	4	6	55	135
	%	2.0	3.0	27.5	67.5
Item 3	Freq	15	30	50	105
	%	7.5	15.0	25.0	52.5
Item 4	Freq	95	60	30	15
	%	47.5	30.0	15.0	7.5
Item 5	Freq	5	15	80	100
	%	2.5	7.5	40.0	50.0
Item 6	Freq	0	5	75	120
	%	0.0	2.5	37.5	60.0
Item 7	Freq	50	90	45	15
	%	25.0	45.0	22.5	7.5
Item 8	Freq	5	15	40	140
	%	2.5	7.5	20.0	70.0
Item 9	Freq	10	25	50	115
	%	5.0	12.5	25.0	57.5

	%	5.0	12.5	25.0	57.5
Item 10	Freq	5	35	60	100
	%	2.5	17.5	30.0	50.0

To confirm the output above, the questionnaire queried the following two question and the findings are as follows:

Do you feel that your welfare as a teenager is well catered for in school, family and society?

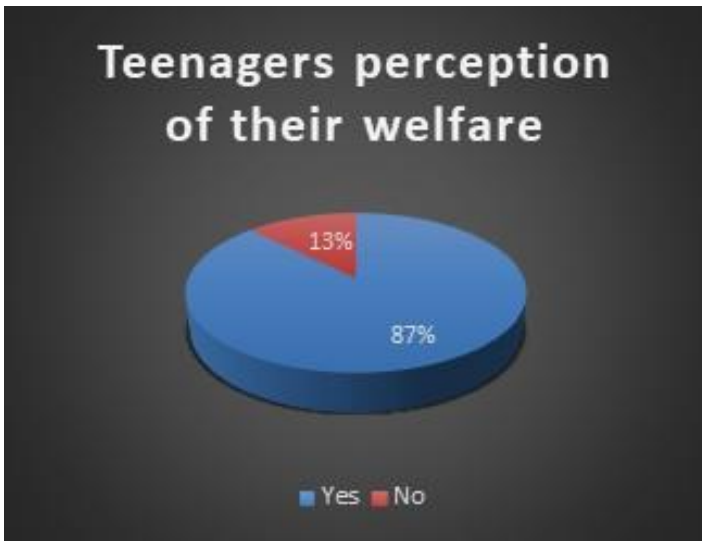


Fig 1. Teenagers perception of their welfare

The result shows that 87% of the teenagers feel that their welfare is well catered for at family, school and society level. This means that the environment provided for their mental growth and wellness is good. On the other hand, 13% felt that their welfare is not well catered for at family, school and community level.

Similarly, the study assessed the teenagers’ feelings on the commitment of the Chinese government to their welfare. The analysis output is presented below.

Do you think the Chinese government have put in place frameworks that adequately support your wellbeing and development as a teenager?

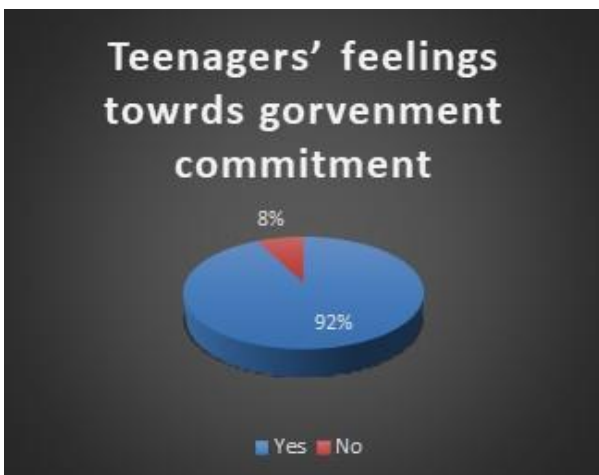


Fig 2. Teenagers’ feelings towards government commitment



The result shows that 92% of the teenagers feel that the Chinese government established frameworks show commitment to their welfare and are oriented to ensuring teenagers better development in terms of upbringing, health and educational. Only 8% said that the frameworks do not adequately support and protect their mental wellbeing and development as a teenager.

### School Factors

Four items were used to assess the teenagers’ feelings with regards to school factors. The findings were presented in the Table V below.

Table II. School Factors

Items		Never	Sometimes	Often	Always
Item 6	Freq	0	5	75	120
	%	0.0	2.5	37.5	60.0
Item 8	Freq	5	15	40	140
	%	2.5	7.5	20	70
Item 9	Freq	10	25	50	115
	%	5.0	12.5	25	57.5
Item 10	Freq	5	35	60	100
	%	2.5	17.5	30	50

From the result presented above, it is clear that majority of the teenagers (97.5%) were often or always able to do what they wanted to do during their free time at school as well as at home (Item 6); 90% of the teenagers often or always had fun with their friends at school and at home; 82.5% of the teenagers often or always got well at school and finally, 80% of the teenagers were often or always able to pay attention.

To confirm the result in Table V, the questionnaire enquired the teenagers’ feelings with regard to how school conditions, teacher relationship as well as teaching approach and content affect their mental growth. The findings are as follows.

Do you feel the school conditions and your relationship with your teachers and other staff positively influence your academic performance and mental development?

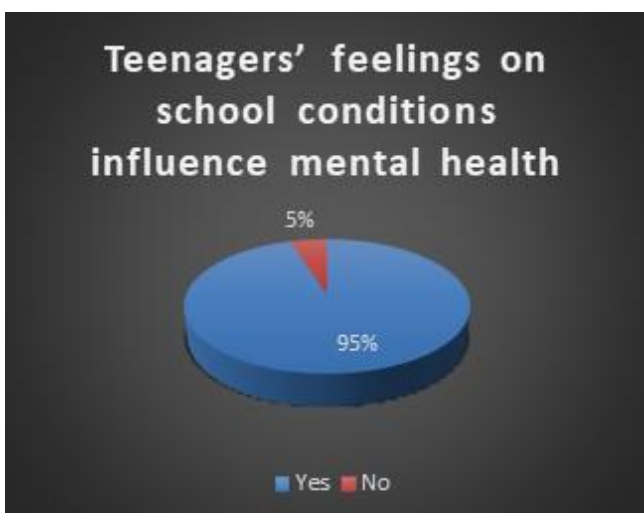


Fig 3. Teenagers’ feelings on school conditions influence mental health

The result indicates that 95% of the teenagers feel that the school conditions, relationship with their teachers and other staff have a positive influence on their academic performance and mental development. 5% of the teenagers felt that school conditions, relationship with their teachers and other staff has do not positively influence on their academic performance and mental development.

Moreover, the study sought to assess the teenagers’ feelings with regard to how the teaching approaches and content offer them the opportunity to grow mentally upright. The result is presented below.

Do you feel that the teaching approaches and content offer you the opportunity to grow as a mentally stable person?

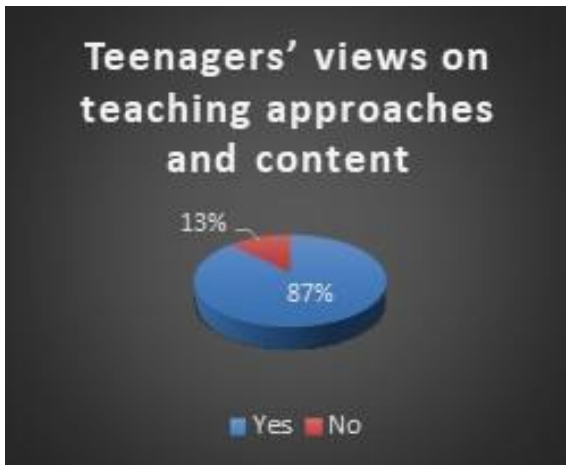


Fig 4. Teenagers’ views on teaching approaches and content

From the result presented in fig. 4 above, it is evident 87% of the respondents feel that teaching approaches and content offer the opportunity to mental growth while only 13% felt that the teaching approaches and content do not influence their mental growth.

### Teenagers’ Emotions Displayed

The focus groups engaged parents, teachers and local community members and focused on evaluating teenagers’ emotional states and the techniques that can be used to support teenagers with emotional issues. According to the focus groups, majority of the respondents (90%) revealed that the majority of teenagers often or always displayed positive feelings like happiness, joy, interest, curiosity, excitement, gratitude, love, and contentment (see Fig. 5 and 6 below):



Fig 4. How Teenagers displayed the positive emotions

The instructors/centre staff and parents gave several explanations when asked about the teenagers' ability to function in class is affected by the negative feelings. According to the majority of respondents, for instance, favourable emotional state of the teenagers give them the confidence of learning, inspires their desire to study, and increases the development of beneficial learning dispositions. This in turn has a positive influence on their mental health development and adds to their health-related quality of life. the teenagers with positive emotions are motivated to success in all aspects of their lives.

Fig. 6 present the instructors/centre staff and parents with regard to how the teenagers' display the negative emotions.



Fig 6. How Teenagers displayed the negative emotions

Fig. 6 shows that majority of the respondents (92%) acknowledged the teenagers sometimes or never displayed negative emotions such as sadness, anger, loneliness, stress, depression, self-criticism, fear, or rejection. Etc. which are challenging, hurtful, or both at times. According to the focus groups responses when the teenagers feel any of the negative feelings, their focus will be drawn away from what they are attempting to learn as well as from their normal mental health. Failure, a lack of preparation, or a sense of isolation from the instructor or other pupils can all be considered negative emotions in a learning environment. Similarly, parent-child conflict, parent-neighbourhood conflict and peer conflict have been considered to promote negative emotions display among the teenagers.

### Techniques For Assisting Students with Emotional Problems

Teachers, parents and community members were questioned regarding the procedures and practices they deploy to support the teenagers' manifesting emotional challenges. According to the focus group discussions, the participants reported that supporting teenagers with emotional and behavioural challenges calls for a positive and structured approach that support their growth, foster their self-esteem and acknowledge better performance.

Therefore, some of the interventions discussed to promote positive development and behaviour among teenagers with emotional challenges included;

First, offer decision making opportunities through a three-step method that involve providing up three choice making options for the teenagers to choose only one from; create awareness on the of the choice they take and the pros and cons of the choices they make. This is to help student develop self-confidence and appreciation.

Secondly, conduct life space interviewing in which parents, teachers and society members in the focus groups agreed that it is a crisis intervention technique which looks to deliberate the teenager's negative behaviours with a view of letting the teenager understand what is expected of them and the need to correct their perception and emotions. As a result, this helps teenagers to be more receptive to emotional and

behaviour reforms while understanding the consequences of the negative emotions and behaviour.

Finally, the focus groups acknowledged that providing good conditions at home, school and in the society help the teenagers' mental health development.

Various strategies were proposed through their answers. The majority (84.0%) suggested planning exercises and assessments that connect new knowledge and skills, ask questions, and foster contemplation, metacognition, and self-reflection. 90.5% supported allowing teenagers the opportunity to develop and use coping skills for controlling their feelings and learning. 97.5% of respondents also suggested fostering a sense of belonging among the pupils. Give teenagers opportunities to interact and develop healthy connections while setting an example for them to follow. The following is a summary of these results:

Table V

Techniques for assisting students with emotional problems			
		Yes	No
Planning development exercises and assessments	Freq	168	32
	%	84.0	16.0
Allowing teenagers, the opportunity to develop	Freq	181	19
	%	90.5	9.5
Fostering a sense of belonging	Freq	195	5
	%	97.5	2.5

## CONCLUSION AND RECOMMENDATIONS

The research gave proof that the Chinese government and the society at large are committed to teenagers' welfare in terms of their mental growth and development. Despite the literature review suggesting the increasing burden of mental health in the world as more people suffer from mental health problems, the article has shown the commitment of the Chinese government, parents, schools and societies in providing ideal upbringing environment in which teenagers can mentally develop and ensure health-related quality of life. The results of this research lend credence to the gradually gaining notion that adolescents' mental health is significantly influenced by their family, school, and social environments.

During the conversations in the focus groups, it was discovered that support from family, school, and peers in the community were all independently linked to teenagers' mental health in China. This implies that all three environments (family, school and society) serve as buffers for adolescents' mental health and growth. The results of this study are coherent with earlier studies that revealed a link between having supportive connections and having good mental health (Hartup, 1989; Hughes et al., 2018).

The results show that some elements of Chinese culture, families, and institutions are risk factors for the mental health of teenagers. For starters, maternal attachment is a reliable indicator of mental and behavioural problems in adolescence. This is explained by data from focus group talks showing that parenting practises in Chinese culture have a double-edged effect on teenagers' views towards scholastic success and emotional growth.

When taken as a whole, the study's results show that the emergence of adolescent mental health problems is affected by a variety of variables, including the family, school, and community settings. Parenting style and parental attachment were found to be the most reliable indicators of the presence of mental health issues among the Chinese adolescents, despite the fact that experiences and perceptions of teenagers in a school context and those in a community setting are very different from one another. This result indicates that the

most important factors affecting teenagers' mental health are family dialogue and functioning.

Families in China are a haven for care and mental support for the majority of teens because mutuality, harmony, and parental worry are valued and respected by young people. Thus, by focusing on attachment, taking into consideration, and resolving dialogue and functioning problems, adolescent psychopathology can be decreased.

According to the research, social and emotional skill-development initiatives should be implemented both inside and outside of schools because they have been shown to benefit young people's social and emotional, physical, and academic wellbeing. These include efforts that focus on the family, the community, and educational programmes like Promoting Alternative Thinking Strategies (PATHS), a Social and Emotional Learning curriculum.

Furthermore, the study present that family-school- society collaboration for the welfare of teenagers is embedded on the principle of merging upbringing with health-related quality of life and education. This is based on the evidence that that family-school- society environments are the most crucial drivers of better mental health and wellbeing among adolescents. The study also indicate that strong societal environment has an influence on adolescents' mental health that is comparable to the effects of the two other caring settings: family and school settings. This result is consistent with earlier research that have discovered that supportive societal peer interactions can operate as protective factors for teenagers who are vulnerable because of family or school distress (Schwartz et al., 2000; Criss et al., 2002).

The study findings also acknowledged that the association of the different settings (family-school-community) have the capacity to meet different needs hence explaining why the collaboration of the three settings is the best. For instance, when needs are not being addressed in a certain relationship context, such as at home, teenagers may find other relationships, such as peers relationships help them meet the needs. According to this study, social interactions at home, school and in the society have a crucial developmental role in determining how young people behave, think, and identify themselves as well as in fostering social skills and self-worth. Additionally, healthy relationships in school and society may serve as a corrective socialization framework for teenagers to gain abilities they do not learn at home. Similarly, teenagers who have experienced bad things at home may benefit from behavioural interventions through the use of positive role models in the school and society settings. Teenagers who experience severe parenting and corporal punishment, for instance, run the risk of exhibiting externalizing behaviours and interacting with others in ways that are improper. Good schools and communities interaction models may serve as buffers to counterbalance and change this behaviour learned at home by teaching the adolescent's more pro-social ways to engage with others. This implied that family-school-community support programs offered in schools and communities are effective in fostering these connections, boosting resilience, and preventing mental health issues among teenagers.

Effective family-school-community alliances are also suggested in China so that the three foundations of family, school, and society cooperate and work together to guarantee that teenagers receive the necessary emotional and mental support. In order to ensure that their teenage family members receive the assistance they need, it is advised that families receive training on how to recognise symptoms of mental and emotional distress in these individuals. This way, the nexus of Family, School, and Society will be dedicated to fostering young people's overall development and progress as well as expanding their possibilities to live better, more equal lives.

However, the results of the current investigation were also explained in light of a variety of constraints. Although analysis showed links between family-school-community collaboration and mental health, the cross-sectional study design makes it impossible to determine how these connections are influenced. As a result, it is impossible to say if adolescents with mental health concerns have more trouble connecting with



their family, teachers, and peers or even if they merely believe that these relationships are less supportive than those of teenagers who do not experience similar challenges or whether teenagers who receive less help in a variety of areas are more likely to have poor mental wellness.

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