



**FLOURISHING OR LANGUISHING? DESCRIPTION OF ADOLESCENTS
MENTAL HEALTH IN A POSITIVE CONTINUUM**

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ABSTRACT

Mental health in adolescents is an important aspect in supporting optimal individual development during the challenges of transition. This study aims to identify the positive continuum of adolescent mental health. This is a quantitative descriptive study with a cross-sectional design. The study sample consisted of 250 adolescents (aged 14–18 years) at SMKN 2 Garut, selected using stratified random sampling. The research instrument used was the Mental Health Continuum-Short Form (MHC-SF). The results of this study indicate that 103 adolescents (41.2%) have moderate mental health categories. In the emotional well-being and social well-being dimensions, the majority of adolescents have low categories. Contributing factors include age, grade level, out-of-school activities, and places to confide. These findings emphasize the importance of promotional programs and optimizing the role of families to enhance adolescent well-being.

Keywords: adolescents; mental health; well-being

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INTRODUCTION

Adolescence is a period of significant biological, psychological, social, and spiritual change as they learn new skills, develop responsibilities, build intimate relationships, and establish their identity and position in society. It is a transition from childhood to adulthood, and adolescents have complex challenges such as personal, family, and educational pressures. This makes adolescents more vulnerable to mental health problems. Globally, the leading cause of disability among children and adolescents is mental health problems with a prevalence of 13.96% for adolescents aged 15-19 years (Kieling et al., 2024). Indonesia – National Adolescent Mental Health Survey reported 1 in 3 adolescents (34.9%) experienced mental problems in the past 12 months (I-NAMHS, 2022). Risk factors that affect adolescent mental health are academic stress, maladaptation, low family intimacy, high family conflict, and parental separation (Yang et al., 2023). Problems with peers and social media use (Rodriguez-Ayllon et al., 2019). Adolescents who have poor childhood experiences are risk factors for mental health problems such as impaired emotion regulation, unstable interpersonal relationships, poor coping skills, and cognitive dysfunction (Mao et al., 2021). Poor mental health in adolescents can result in temperament problems, verbal and physical aggression, unhappiness, self-harm, and can affect their academic performance and achievement (Basu & Banerjee, 2020).

School-based mental health research has focused more on reducing stigma and negative perceptions to encourage people suffering from mental illness to seek appropriate help. However, mental health is not just the absence of illness. According to Westerhof & Keyes (2010) the two continua model consists of a negative continuum and a positive continuum where mental health is seen from the presence or absence of mental illness

and the presence or absence of mental health. The two are interconnected but in different dimensions. The positive continuum refers more to well-being and how individuals function in life. World Health Organization defines mental health as a state of well-being where individuals believe in their abilities, can cope with stress, and contribute to their communities (WHO, 2022). Good mental health can affect their growth and development, make them feel happier and enjoy life, and be able to adapt and face life's challenges. Therefore, it's important to know mental health on a positive continuum to encourage promotive and preventive efforts and see the potential extent to which they develop well. The purpose of this study is to look at and identify the positive continuum of mental health, especially in adolescents.

METHOD

This study used descriptive quantitative method with cross sectional research design. This research was conducted at SMK Negeri 2 Garut, West Java. Participants in this study were 10th and 11th grade students who were active at SMK Negeri 2 Garut. The sampling technique used stratified random sampling which recruited a sample of 250 adolescents. Data collection was carried out using a demographic data questionnaire and a mental health questionnaire, namely the Mental Health Continuum-Short Form (MHC-SF) developed by Keyes (2014) and adapted into Indonesian by Faradiba et al., (2023). The MHC-SF measure consists of three dimensions, namely emotional well-being (three items, an example "during the past month, how often did you feel happy?"), social well-being (five items, an example "during the past month, how often did you feel that you had something important to contribute to society?"), and psychological well-being (six items, an example "during the past month, how often did you feel good at managing the responsibilities of your daily life?"). The MHC-SF measuring instrument that has been adapted into Indonesian has a reliability value of 0.7-0.8 with each dimension of EWB 0.811, SWB 0.729, and PWB 0.809 and has good validity with a factor load value greater than 0.5. Participants will complete 14 questions using a Likert scale of 0 (never) to 5 (every day). Mental health results are divided into three categories, categorized as languishing if in the past month "never" or "1-2 times a month" felt 1 of the 3 hedonic symptoms (EWB) and 6 of the 11 positive function symptoms (SWB and PWB), categorized as flourishing if in the past month "almost every day" or "every day" felt 1 of the 3 hedonic symptoms (EWB) and 6 of the 11 positive function symptoms (SWB and PWB), and individuals who do not fall into the 'languishing' or 'flourishing' category are categorized as moderate mentally healthy. Data were analyzed by univariate analysis using descriptive statistics which resulted in frequency distribution and percentages. This study was approved by the Ethics Committee of 'Aisyiyah Bandung University with number 1154/KEP.01/UNISA-BANDUNG/I/2025.

RESULT

Table 1. illustrates the frequency distribution of respondent characteristics. There were 250 respondents where most of the respondents in this study were 16 years old, as many as 141 students (56.4%) and most of the respondents were male (64.4%) compared to female (35.6%). Based on class, most respondents are grade 11, as many as 130 students (52.0%). And almost all students have social media accounts (99.2%), only 2 students (0.8%) do not have them. In addition, most teenagers did not have any activities after school (57.2%) and 7.6% chose others, such as helping parents, playing musical instruments, religious activities, playing with friends, and extracurricular activities. Almost half of the respondents (44.8%) preferred to pour out their hearts to their friends rather than to their parents (17.6%) and siblings (7.2%) who should be closer, and 52 students (20.8%) chose to keep their problems to themselves or to God.

Table 1.

Respondent characteristics (n = 250)		
Respondent characteristics	f	%
Age		
14	2	.8
15	57	22.8
16	141	56.4
17	49	19.6
18	1	.4
Gender		
Male	161	64.4
Female	89	35.6
Class		
10	120	48.0
11	130	52.0
Have a social media account		
No	2	.8
Yes	248	99.2
Other activities outside school		
Sports	66	26.4
Course	11	4.4
Work/sales	11	4.4
Not doing anything	143	57.2
Other	19	7.6
A place to confide		
Parents	44	17.6
Teacher	0	.0
Siblings	18	7.2
Friend	112	44.8
Social media	24	9.6
Other	52	20.8

Table 2.
Mental Health of Adolescents (n = 250)

Variable	f	%
Mental health		
Languishing	97	38.8
Moderate	103	41.2
Flourishing	50	20.0

Table 2. illustrates the mental health condition of adolescents at SMKN 2 Garut. Based on the results of the study, almost half of the respondents had moderate mental health as many as 103 people (41.2%). While when compared between the languishing and flourishing categories, more respondents have a languishing category, which is a less than optimal mental health condition (38.8%) compared to the flourishing category which shows good and optimal mental health (20.0%).

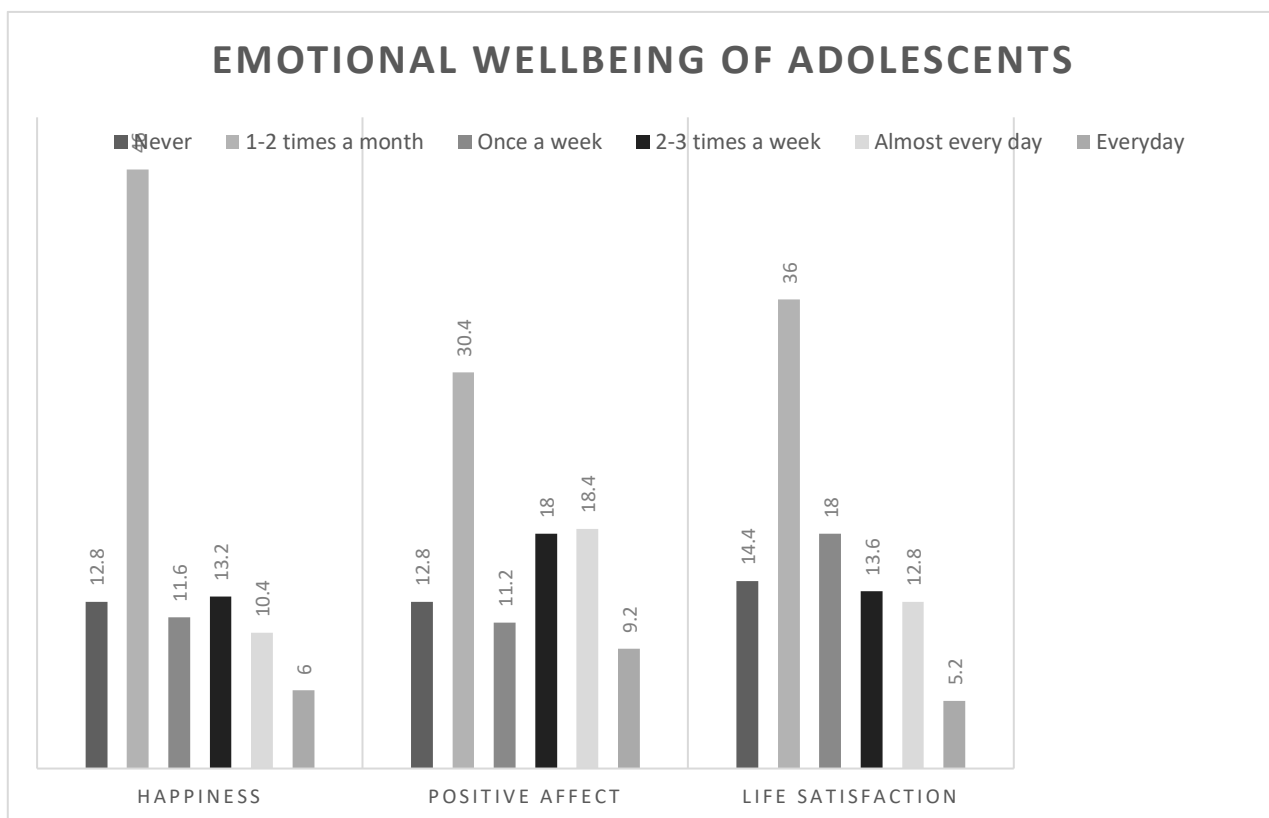


Figure 1. shows a description of emotional well-being as measured by three main items, including happiness, positive affect, and life satisfaction. From these three items, it shows that almost half of the respondents only feel happiness (46.0%), positive affect (30.4%), and life satisfaction (36.0%) 1-2 times a month.

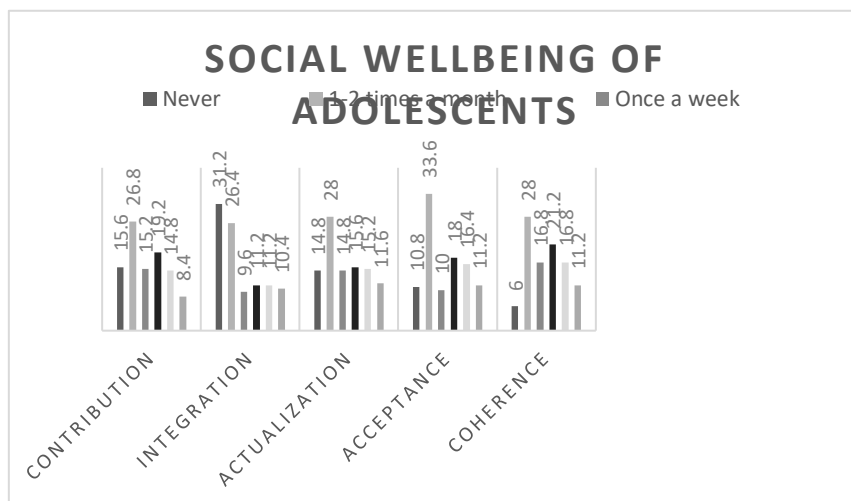


Figure 2. describes social well-being analyzed based on five domains: contribution, integration, actualization, acceptance, and coherence. The high number of adolescents who only 1-2 times in the past month felt a contribution to society (26.8%), experienced social actualization (28.0%), acceptance in society (33.6%), and social coherence (28.0%). Meanwhile, in the social integration domain, most respondents in the past month never felt part of the community (31.2%).

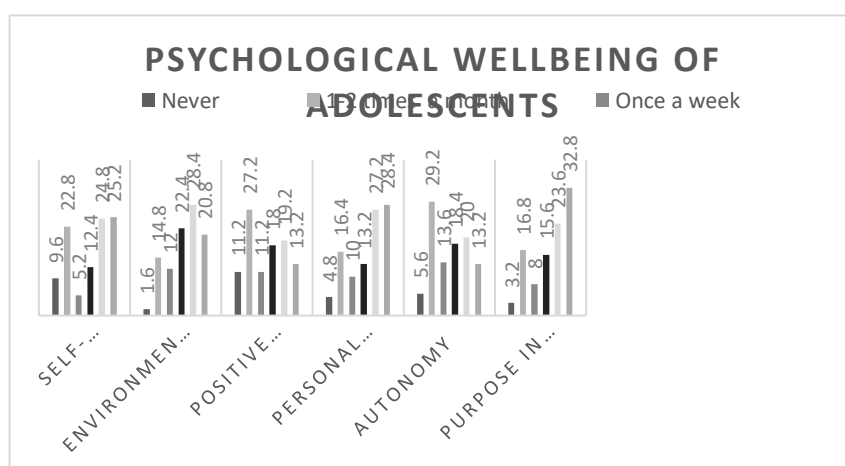


Figure 3. shows psychological well-being seen based on six domains: self-acceptance, environmental mastery, positive relations with others, personal growth, autonomy, and purpose in life. In the past month, although there are still those who feel less than optimal, most adolescents feel every day to accept themselves as they are (25.2%), experience self-development/personal growth (28.4%), have a purpose in life (32.8%), and almost every day feel responsible for their own lives (28.4%). However, on the other hand, a large proportion of adolescents indicated that only 1-2 times a month they felt meaningful relationships with others (27.2%) and autonomy (29.2%).

Table 3.

Distribution of Adolescent Mental Health Based on Respondent Characteristics (n = 250)

Respondent Characteristics	Mental Health					
	Languishing		Moderate		Flourishing	
	f	%	f	%	f	%
Age						
14	2	2.1	0	0	0	0
15	17	17.5	27	26.2	13	26.0
16	60	61.9	50	48.5	31	62.0
17	18	18.6	25	24.3	6	12.0
18	0	0	1	1.0	0	0
Class						
10	38	39.2	49	47.6	33	66.0
11	59	60.8	54	52.4	17	34.0
Have a social media account						
No	2	2.1	0	0	0	0
Yes	95	97.9	0	0	50	100.0
Other activities outside school						
Sports	20	20.6	30	29.1	16	32.0
Course	5	5.2	2	1.9	4	8.0
Work/sales	1	1.0	5	4.9	5	10.0
Not doing anything	63	64.9	59	57.3	21	42.0
Other	8	8.2	7	6.8	4	8.0
A place to confide						
Parents	10	10.3	21	20.4	13	26.0
Teacher	0	0	0	0	0	0
Siblings	7	7.2	7	6.8	4	8.0
Friend	43	44.3	45	43.7	24	48.0
Social media	7	7.2	15	14.6	2	4.0
Other	30	30.9	15	14.6	7	14.0

Table 6. shows the distribution of mental health based on respondent characteristics. The results indicate that most respondents were in the languishing category, specifically those aged 16 years (61.9%) and in grade 11 (60.8%). Nearly all respondents who had social media accounts were in the languishing category (97.9%). Most respondents in the languishing category (64.9%) and moderate category (57.3%) did not engage in any activities outside of school. In contrast, respondents in the flourishing category were more likely to participate in positive activities such as sports (32%), courses (8%), and work (10%) compared to those in the languishing category. In all categories, the majority preferred peers as a place to confide (44.3%, 43.7%, and 48.0%). Interestingly, the use of social media as a place to confide was higher among moderate respondents (14.6%), but remained relatively low among flourishing respondents (4.0%), indicating that social media is not an ideal place to confide to support mental health.

DISCUSSION

This study aims to examine mental health among adolescents. The results of this study indicate that adolescents' emotional well-being is in a less than optimal category. The three main indicators—happiness, positive affect, and life satisfaction—are generally only experienced by the majority of respondents 1–2 times in the last month. These findings reflect the presence of stress or a lack of emotional support, as well as barriers in social and family environments that hinder the sustained emergence of positive emotions. Adolescents with low life satisfaction tend to exhibit symptoms of depression and are more likely to feel unhappy (Freire & Ferreira, 2020). Emotional well-being and social well-being are connected, whereby adolescents with positive feelings are more likely to contribute better to society because they have good emotional well-being (Sulistiowati et al., 2019). In this study, in addition to low levels of emotional well-being, they also had low levels of social well-being. Most adolescents only experienced contribution, self-actualization, acceptance, and social coherence at very low frequencies. This condition indicates limitations in meaningful social engagement experiences. Furthermore, in the domain of social integration, one-third of respondents reported never feeling like part of the community in the past month, indicating weak social connectedness among adolescents. These findings reflect that many adolescents face barriers in building strong social relationships, experiencing meaningfulness within the community, and receiving consistent social acceptance (Aldam et al., 2019; Sulistiowati et al., 2019).

Meanwhile, most adolescents have relatively high psychological well-being in several important aspects. They feel almost every day to every day on items such as self-acceptance, environmental mastery, personal growth, and purpose in life. This indicates that adolescents have the ability to accept themselves, experience continuous personal growth, have a clear sense of purpose in life, and feel responsible for their life choices. However, there are two aspects that require attention: positive relationships with others and autonomy, where they experience these aspects with low frequency (1-2 times a month). These findings suggest that while many adolescents are internally capable of developing personal aspects, relational and autonomy aspects remain a challenge for others. Low positive relations with others may be due to limitations in building meaningful relationships with peers, family, or the social environment. Factors such as bullying, social isolation, domestic violence, and academic pressure can be the main causes of this aspect (Addy et al., 2021). Meanwhile, low autonomy indicates a gap between the desire for independence and the reality of limitations in decision-making, reflecting the strong controlling role of the environment (such as the family). This aspect is no less important because autonomy emphasizes the importance of power and control for children's growth, particularly their experiences of being seen and heard and their opportunities to participate in decision-making related to themselves (Eriksson et al., 2022).

Overall, the results of this study indicate that almost half of adolescents have moderate mental health (41.2%). This indicates that adolescents have mental conditions that are not entirely optimal but are also not classified as poor or severe. There is longitudinal research suggesting that the moderate mental health group is 3-4 times more likely to experience mental disorders than the flourishing group (Chan et al., 2022). For example, they are able to adapt, manage their emotions, and engage in activities, but when faced with greater challenges, they are more vulnerable to prolonged stress and anxiety. Anxiety is the most common mental health issue (26.7%) among Indonesian adolescents aged 10-17 years (I-NAMHS, 2022). Many factors can influence mental health in adolescents. Based on age, most 16-year-olds are in the middle phase of adolescence. This phase is a crucial period in which adolescents begin to find their identity, want to be independent, experience various academic, social, and emotional pressures, and are very selective and competitive in choosing friends (Izzani et al., 2024). This can certainly contribute to high levels of mental health in the moderate to languishing categories, as not all adolescents have good coping skills to manage these pressures. When looked at by grade level, the results show that the proportion between the two levels is fairly balanced, with a slight dominance of 11th grade students in the moderate to languishing category. This difference in grade levels causes an increase in stress as students get older and their academic workload increases as they approach graduation and career or further education choices. Additionally, it is likely that they have not yet developed good emotional skills and stress management abilities. This can impact their academic performance, as mental health issues can cloud their thoughts and weaken their motivation to learn (Kusuma, 2024). There are findings indicating that good mental health among students can enhance their academic performance (Ulfah, 2023).

Students who are not involved in out-of-school activities such as sports, extracurricular activities, religious activities, work, etc. tend to be more likely to fall into the low mental health category, namely moderate and languishing. The lack of out-of-school activities causes teenagers to have more free time without direction. For example, the use of social media, where the findings show that almost all teenagers have social media accounts. It has been proven that social media plays an important role in the emotional and social development of adolescents. Although the use of social media has benefits in education, culture, and social life. However, unwise use can have an alarming negative impact. A qualitative study suggests that adolescents view social media as a dangerous platform for mental well-being as it can cause stress, depression, low self-esteem, and even suicidal ideation. The platform opens up opportunities for bullying and provocative, and addictive behaviour (O'Reilly, 2020). Excessive social media use is more likely to experience unhappiness and decreased psychological well-being (Twenge & Campbell, 2019). According to these findings, teenagers only feel happy 1-2 times a month, or even never. On the other hand, productive teenagers can experience social support, strengthen their sense of self, and have healthy outlets for their emotions. For example, one activity they can participate in is extracurricular activities, which give students the opportunity to interact with others and teach them how to work together in a team—an important part of developing interpersonal skills (Kusuma, 2024).

A lot of pressure, hormonal changes, and environment certainly pose unique challenges for teenagers. As social beings, they need space to express their feelings and concerns. The results of this study show that teenagers more often turn to their peers as someone to confide in, perhaps because they experience similar burdens and support each other. Although they do not always have positive relationships with others, as indicated in the psychological well-being items where they mostly only feel positive relationships with others 1-2 times a month. However, it has been proven that support from peers is associated with improved mental well-being (Roach, 2018). If we look further, only a few adolescents poured out their hearts to their parents or siblings. This is despite the importance of family attachment, co-parenting, and

family functioning, where research shows that family relationships, especially between parents and adolescents, are determinants of family well-being (Tafà et al., 2023). Parents are often confused and even unaware of the emotional lability of adolescents which can cause conflict between the two, but in fact adolescents need to be listened to and given support. The existence of these conflicts actually makes adolescents feel isolated in the family so that they prefer their peers.

CONCLUSION

Overall, these findings indicate that the majority of adolescents in this study have moderate to poor mental health, with a smaller proportion achieving developed or optimal mental health. Many factors can influence the mental health and well-being of adolescents. This study serves as an initial finding to determine further interventions. This indicates the importance of strengthening school-based programs that support and promote mental health in adolescents, such as educating adolescents about mental health, providing counseling services in collaboration with professionals, and maximizing the role of extracurricular activities for students.

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