The Influence of School and Social Factors and Social Media Use on Mental Health Literacy and Help-Seeking Behaviors among Thai Adolescents

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ABSTRACT

Adolescent mental health has emerged as a major public health priority, particularly amid the rapid expansion of digital communication platforms. Within this context, mental health literacy and help-seeking behaviors are recognized as essential components for the early identification and appropriate management of psychological difficulties. This study aimed to explore the relative contributions of school-related psychosocial factors and patterns of social media use to mental health literacy and help-seeking behaviors among Thai adolescents. A cross-sectional survey was conducted involving 128 secondary school students in Thailand (mean age = 16 years). Participants completed a structured questionnaire covering daily social media engagement, mental health literacy, readiness to seek professional or informal help, stigma-related perceptions, and perceived support within the school environment. Data were analyzed using descriptive statistics, chi-square tests, and multiple linear regression models. Overall levels of mental health literacy were found to be moderate to high (mean = 3.99, SD = 0.83). Participants also reported a high degree of readiness to seek help (mean = 4.18, SD = 0.75) and generally favorable attitudes toward stigma reduction (mean = 4.06, SD = 1.12). No statistically significant relationship was observed between the amount of daily social media use and mental health literacy (p = 0.69). In contrast, multivariable regression analysis demonstrated that perceived school support was independently associated with higher mental health literacy scores (β = 0.28, p = 0.002), whereas social media use did not show a meaningful predictive effect. These findings suggest that, among Thai adolescents, mental health literacy is shaped more strongly by the quality of the school psychosocial environment than by the intensity of social media use. Strengthening school-based mental health support systems and fostering psychologically safe educational settings may therefore play a critical role in promoting early help-seeking and improving adolescent mental health outcomes.

Keywords: Mental health literacy, Help-seeking readiness, School psychosocial environment, Adolescent mental health, Digital media exposure

1. Introduction

Adolescence represents a formative developmental stage marked by profound emotional, psychological, and social transitions.

During this period, individuals undergo rapid changes in self-concept, peer relationships, and academic demands, which may heighten susceptibility to psychological stress and mental health difficulties [3]. At a global level, common mental health conditions such as anxiety and depressive disorders constitute leading contributors to disease burden and functional impairment among adolescents. In Thailand, growing attention has been directed toward adolescent mental health, particularly within school contexts where academic competition and social expectations are substantial.

Mental health literacy refers to the ability to recognize mental health concerns, understand available sources of support, and make informed decisions regarding help-seeking. Higher levels of mental health literacy have been associated with improved recognition of psychological distress, reduced stigmatizing attitudes, and increased engagement in adaptive help-seeking behaviors. Nevertheless, existing evidence suggests that many adolescents experience difficulty distinguishing between normative stress responses and clinically relevant mental health conditions, including depressive disorders. Inadequate mental health knowledge, combined with concerns about negative social evaluation, may discourage adolescents from

seeking professional assistance even when support services are accessible.

The widespread adoption of social media has further complicated the mental health landscape for adolescents. Digital platforms [4] offer opportunities for social connection, peer support, and access to mental health–related information. However, excessive or unregulated use has also been associated with heightened psychological strain, social comparison, and emotional vulnerability. Although a substantial body of literature has examined the adverse psychological consequences of social media exposure, comparatively fewer studies have explored whether the intensity of social media use is directly related to adolescents' mental health literacy or their readiness to seek help. Findings in this area remain inconsistent, particularly within Southeast Asian populations.

Educational institutions constitute a key social environment influencing adolescents' perceptions of mental health. A supportive school context [5], characterized by positive teacher–student relationships, accessible support services, and an atmosphere that normalizes discussion of psychological concerns [6], may facilitate healthier attitudes toward mental health and promote help-seeking behaviors. In Thailand, school-based mental health initiatives have increasingly been recognized as an important preventive strategy. However, empirical research examining how school-related psychosocial factors interact with social media use to shape mental health literacy and help-seeking behaviors among adolescents remains limited. Accordingly, the present study aimed to investigate the relative influence of school and social factors and social media use on mental health literacy [7,8] and help-seeking behaviors among Thai adolescents.
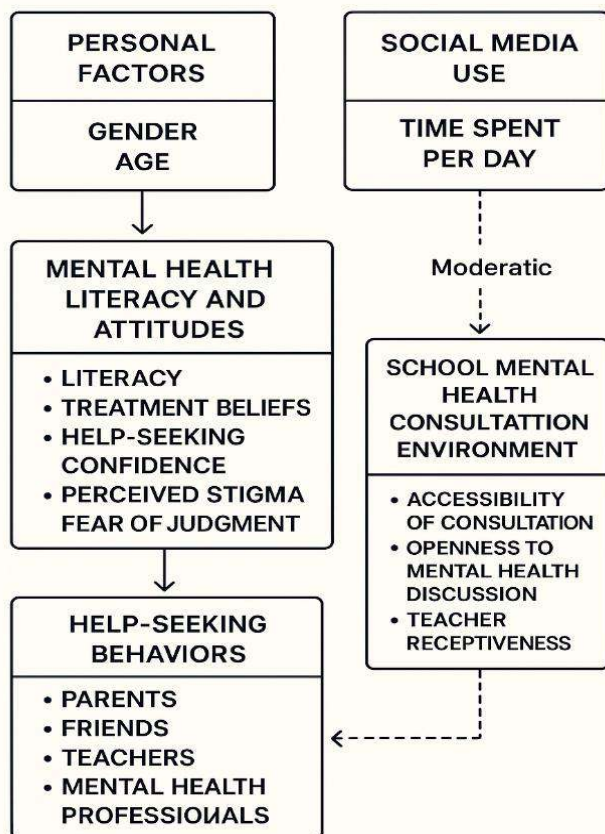

Figure 1. Theoretical Framework Illustrating Psychological and School-Related Determinants of Mental Health Literacy and Help-Seeking in Thai Adolescents

2. Methodology

2.1 Study Design and Participants

A cross-sectional survey approach was utilized to examine factors associated with mental health literacy and help-seeking behaviors among adolescents. The study sample consisted of 128 Thai secondary school students, with a mean age of 16 years. Participants were recruited from a secondary school in Thailand using a convenience sampling method. Participation was entirely voluntary, and data were collected anonymously to protect respondent confidentiality [9]. Questionnaires with missing or incomplete responses were excluded from the final analysis to ensure data quality and analytical validity.

2.2 Data Collection Instrument

Data were obtained through a structured, self-administered questionnaire designed with reference to existing literature on adolescent mental health literacy and help-seeking behaviors [10]. The instrument comprised four main components:

1. Sociodemographic information, including age and gender.

2. Patterns of social media engagement [11], assessed by self-reported average daily time spent on social media platforms [13].

3. Mental health literacy measures [12,15], evaluating participants' capacity to differentiate normative stress responses from depressive symptoms, as well as their awareness of available mental health support resources.

4. Help-seeking attitudes and behaviors, including stigma-related perceptions [14] and perceived availability of mental health support within the school environment

All mental health–related items were rated on a five-point Likert scale [17], ranging from 1 (strongly disagree) to 5 (strongly agree). Higher composite scores reflected greater mental health literacy [18], more favorable attitudes toward help-seeking [16], and lower levels of stigmatizing beliefs.

2.3 Variable Definition

- Mental Health Literacy was calculated as the mean score of two items assessing the ability to distinguish normal stress [19] from depression and knowledge of where to seek help.
- Help-Seeking [16] Readiness was calculated using items related to willingness to seek help and perceived encouragement from the school environment.
- Stigma Reduction Attitude was assessed using an item measuring beliefs about the role of school education in reducing mental health stigma.
- Social Media Use was measured as self-reported average daily usage in hours.
- Perceived school environmental support was assessed using an item evaluating the extent to which the school climate promotes open communication and facilitates students' willingness to seek support for mental health–related concerns.

2.4 Statistical Analysis

Data analysis was conducted using statistical software with functionality equivalent to SPSS. Descriptive statistics, including means and standard deviations, were computed to summarize participant demographics and mental health–related variables. Associations between levels of daily social media use and mental health literacy were examined using the chi-square test.

An independent samples t-test was initially considered to evaluate gender-based differences in stigma-related attitudes and help-seeking behaviors. However, due to an unequal gender distribution within the sample, inferential analyses by gender were interpreted with caution and were not emphasized. Multiple linear regression modeling was subsequently applied to examine factors associated with mental health literacy, with social media use, gender, and perceived school environmental support entered as independent variables [23]. A two-tailed significance level of $p < 0.05$ was adopted for all statistical tests.

2.5 Ethical Considerations
The study was conducted in compliance with established ethical standards for research involving human participants. Participation was entirely voluntary, and informed consent was obtained prior to data collection. All responses were collected anonymously, and strict measures were implemented to safeguard participant confidentiality. The research involved minimal risk, as it focused on the assessment of general mental health–related attitudes and perceptions without the collection of personally identifiable information.

3. Results
3.1 Participant Characteristics
The study included a total of 128 adolescent participants, most of whom were 16 years old and female. Daily social media use ranged from 3 to more than 7 hours per day, with the largest proportion of students reporting 5–7 hours of social media use per day, indicating high digital engagement [21] among the study population.

Table 1. Participant Details

Variable	Category	n (%)
Age	16 years	Majority
Gender	Female	Predominant
	Male	Minority
Daily Social Media Use	≤ 3 hours	30 (23.4%)
	3–5 hours	52 (40.6%)
	5–7 hours	46 (35.9%)

3.2 Summary Statistics for Mental Health Measures
Table 2 provides a summary of descriptive statistics across mental health domains. Overall, mental health literacy scores indicated a moderate to high level among participants (mean = 3.99, SD = 0.83). Help-seeking readiness was relatively high (Mean = 4.18, SD = 0.75), suggesting generally positive attitudes toward seeking mental health support. Attitudes toward stigma reduction were also positive (Mean = 4.06, SD = 1.12), indicating that most participants believed school education [20] could help reduce mental health stigma.

Table 2. Descriptive Statistics of Mental Health Domains

Domain	Mean	SD	Interpretation
Mental Health Literacy	3.99	0.83	Moderate–High
Help-Seeking Readiness	4.18	0.75	High
Stigma Reduction Attitude	4.06	1.12	Positive

3.3 Association Between Social Media Use and Mental Health Literacy
A chi-square analysis was performed to assess the relationship between levels of daily social media engagement and mental health literacy. For analytical purposes, mental health literacy scores were dichotomized into higher and lower categories, while social media use was classified according to average daily duration. The analysis revealed no statistically significant association between social media use and mental health literacy ($\chi^2 = 0.76$, $p = 0.69$).

Across all categories of social media engagement, participants demonstrated comparably high levels of mental health literacy, indicating that literacy levels were not dependent on the extent of social media use.

Table 3. Distribution of Mental Health Literacy Levels Across Categories of Daily Social Media Use

Social Media Use (hrs/day)	High Literacy	Lower Literacy	Total
≤ 3 hours	20	10	30
3–5 hours	31	21	52
5–7 hours	31	15	46

3.4 Gender Differences in Stigma and Help-Seeking Behaviors
An independent samples t-test was initially considered to examine potential gender-related differences in stigma-related attitudes and help-seeking behaviors. However, due to a highly imbalanced gender distribution, inferential statistical comparison was limited. Descriptive trends suggested that female participants reported slightly higher scores in help-seeking readiness and stigma-reduction attitudes than male participants. These findings should be interpreted with caution.

Table 4. Multiple Linear Regression Predicting Mental Health Literacy

associated factor	B	β	p-value
Social media hours/day	−0.02	−0.04	0.687
Supportive school environment	**0.27**	**0.28**	**0.002**
Gender	—	—	—

3.5 Predictors of Mental Health Literacy
Multiple linear regression modeling was conducted to examine factors associated with mental health literacy (Table 4). The overall model demonstrated statistical significance ($F_{(3,124)} = 3.41$, $p < 0.01$) and accounted for 7.6% of the variance in mental health literacy scores.

Perceived support within the school environment was independently associated with higher mental health literacy ($\beta = 0.28$, $p = 0.002$). In contrast, the amount of daily social media use showed no significant association with mental health literacy ($\beta = −0.04$, $p = 0.687$). Gender was not retained as a meaningful explanatory variable due to limited variability within the sample.
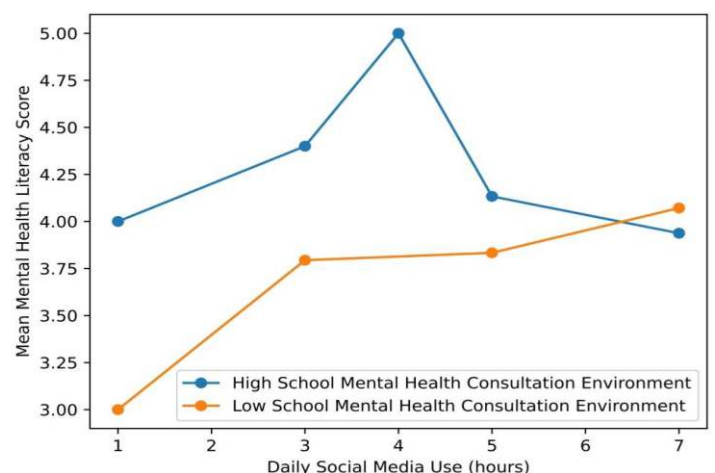

Figure 2. Social Media Use × School Mental Health Consultation Environment Interaction

Figure 2 illustrates the interaction between daily social media use and the school mental health consultation environment in predicting mental health literacy. Adolescents in schools with a high consultation environment consistently demonstrated higher mental health literacy across all levels of social media use, whereas those in low consultation environments showed lower literacy levels.

3.6 Summary of Key Findings

The results reveal that while Thai adolescents tend to hold favorable views on mental health and help-seeking, the school environment exerted a greater impact on their mental health literacy than social media engagement. This emphasizes the value of implementing school-centered mental health initiatives.

4. Discussion

The present study explored the relative contributions of social media engagement and school-related contextual factors to mental health literacy and help-seeking behaviors among Thai adolescents. Overall, participants demonstrated moderate to high levels of mental health literacy, accompanied by generally favorable attitudes toward help-seeking and stigma reduction. Notably, the findings indicate that characteristics of the school mental health consultation environment exert a stronger influence on mental health literacy than the duration of social media use.

Contrary to commonly held concerns, the frequency of social media use was not significantly associated with mental health literacy. Adolescents reporting lower and higher levels of daily social media engagement exhibited comparable levels of mental health knowledge and awareness. This pattern aligns with emerging evidence suggesting that exposure duration alone may be insufficient to account for mental health–related outcomes. Instead, broader psychosocial and educational contexts may play a more central role in shaping adolescents' understanding of mental health. The absence of a clear linear association was further supported by regression diagnostics and residual analyses, reinforcing the robustness of this finding.

In contrast, perceived support within the school mental health consultation environment emerged as a salient factor associated with higher mental health literacy. Adolescents who viewed their schools as accessible, responsive, and open to mental health–related dialogue reported greater understanding and awareness of mental health issues [25]. Moreover, interaction analyses suggested that a supportive consultation environment functioned as a protective contextual factor across varying levels of social media use. This buffering pattern highlights the importance of school climates that normalize mental health discussions and reduce perceived barriers to seeking assistance.

Although female students demonstrated slightly higher descriptive scores in help-seeking attitudes and stigma-related perceptions, inferential gender comparisons were constrained by the unequal gender distribution within the sample. This limitation underscores the need for future investigations with more balanced samples to clarify potential gender-specific patterns in adolescent mental health literacy and help-seeking behaviors [25]. Additionally, the relatively modest proportion of variance explained by the regression model suggests that mental health literacy is shaped by a constellation of influences beyond those examined in the present study. Factors such as family dynamics, peer relationships, cultural norms, and individual coping capacities warrant further exploration.

Collectively, these findings underscore the pivotal role of schools as primary settings for adolescent mental health promotion. Rather than emphasizing reductions in social media use alone, preventive strategies may be more effective if they prioritize the development of supportive school mental health consultation systems, enhance access to guidance and counseling services, and foster an educational climate characterized by openness and psychological safety.

Such school-centered approaches have the potential to strengthen mental health literacy and facilitate earlier, more adaptive help-seeking behaviors among adolescents.

5. Conclusion

This study investigated the roles of social media engagement [23] and the school mental health consultation context in relation to mental health literacy and help-seeking behaviors among Thai adolescents. The findings indicate that the majority of participants demonstrated relatively well-established mental health literacy alongside positive orientations toward seeking support. Importantly, these outcomes appeared to be more closely associated with school-based contextual conditions than with the duration of social media use. Notably, social media engagement in isolation was not independently associated with levels of mental health literacy. Instead, the school mental health consultation environment emerged as a key determinant, both as a direct predictor and as a moderating factor. Adolescents who perceived their schools as open, accessible, and supportive of mental health consultation consistently showed higher mental health literacy across all levels of social media use. This suggests that a strong consultation environment may buffer potential negative influences associated with high digital exposure.

These findings highlight the critical role [26] of schools as primary settings for adolescent mental health promotion. Strengthening school-based mental health consultation systems, improving access to trusted guidance, and fostering a culture [29] that encourages open discussion without stigma may be more effective strategies than focusing solely on reducing social media use. Such approaches can enhance adolescents' ability to recognize mental health problems [27] and seek appropriate help at an early stage.

In conclusion, promoting a supportive school mental health consultation environment should be considered a central component of adolescent mental health policies and interventions in Thailand. Future efforts should prioritize integrated, school-based strategies that empower adolescents with knowledge, confidence, and accessible support systems to promote long-term [30] mental well-being.

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