

Youth mental health context in Turkey

Aysun Dogan
Ege University
Melek Göregenli
Ege University
Pelin Karakus
Gediz University

According to the census of 2015, the population of Turkey is approximately 79 million, with children (ages 0-18) and young adults (19-24) constituting 40.2 % of

the entire population (Turkish Statistical Institute, 2015). Eleven percent of these children and adolescents suffer from various types of mental health problems (United Nations International Children's Emergency Fund, 2012). However, there are high numbers of untreated emotional, psychological, and psychiatric problems among children and adolescents due to the limited number of mental health professionals and shortage of mental health services in Turkey (Coskun, Zoroglu, & Ghaziuddin, 2012).

The current 'National Mental Health Action Plan' in Turkey is based on the mental health policy of the Ministry of Health. This action plan covers the activities that are being implemented between 2011-2023. The main activities include the establishment of community-based mental health services, the use of patient-centered approaches, the promotion of preventive intervention services, and the integration of mental health services in other health-related services both in the rural parts of the country and in the city centers (The Ministry of Health of Turkey, 2011).

According to a Ministry of Health of Turkey report (2011), there are 206 child and adolescent psychiatrists (0.28 per 100.000) working in hospitals or in private practice. This number is very low compared to European countries where there are 1.5 child and adolescent psychiatrists per

100.000 inhabitants (World Health Organisation, 2008). There are also 1.370 psychologists (2.20 per 100.000) working in the mental health field in Turkey. As compared to other European countries, this ratio is also considered very low. For example, there are 47 psychologists in Finland, 30 in the Netherlands, 14 in Greece and 10 in Denmark per 100.000 people (World Health Organisation, 2008). As the data shows, the number of mental health professionals working with children and adolescents are sparse in Turkey.

Over the past years, alcohol, drug and substance use have become one of the major problems affecting adolescents' life negatively in most societies. Despite the fact that there is a noticeable increase in drug use especially among adolescents in Turkey the prevalence of drug use in the young adult population is still far below the rates reported for most European Union countries and the United States (Ayvasık & Sümer, 2010). Ögel, Taner, and Eke (2006) showed that the life time prevalence was 37% for cigarette use and 51% for alcohol use among adolescents. Inhalants (5.9%), marijuana (5.8%) and flunitrazepam (4.4%) and ecstasy (3.1%) were the most commonly used substances among adolescents. According to Isıklı and Irak's comprehensive report (2002) the mean age of onset was reported as 12.83 years old for smoking and 13 years old for alcohol use. In a study including a large number of adolescents and using the Health Behavior in School-aged Children Survey (HBSC 2009/2010), Cavdar et al. (2016) found that 34% of the adolescents reported they experimented with smoking and 6.6% of them did so before the age of 11. In addition, 15% of the adolescents reported that they smoked regularly

and 18% of them got drunk within the last month. Furthermore, 13.3% of the youth reported that they bullied their peers at least two times and 12% of the youth reported that they were the victims of bullying.

Similar to many countries, suicide is the 4th leading cause of death among youth aged between 15-19 in Turkey (Turkish Statistical Institute, 2014). Eskin, Ertekin, Dereboy, and Demirkiran (2007) found that 23% of the high school students (aged 13-18) reported that they had thought of killing themselves at least once in their lives and 2.5% of them had attempted to kill themselves. Previous research also shows that women are at higher risk for suicide. The risk factors for young women, especially those living in the rural areas include forced marriages at early ages, domestic violence, sexual abuse, and lack of social support (Coskun et al., 2012).

Turkey is currently undergoing rapid social change that has been strongly affected by social factors at the personal, family, community, and national health system levels. These social determinants that affect adolescents' health are crucial for the health and the social development of the whole society. More cross-national and cross-cultural research is needed to determine how age, gender, developmental, family, and socio-political based community factors may mediate the strength and nature of social change, and to understand what type of interventions are the most effective in a variety of settings and cultural contexts.

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Aysun Dogan
Ege University, Psychology
Department, Turkey
doganaysun@gmail.com



Melek Göregenli
Ege University, Psychology
Department, Turkey
melekgor@gmail.com



Pelin Karakus
Gediz University, Psychology
Department, Turkey
pelinkarakus@gmail.com