

THE CHALLENGE OF MENTAL HEALTH AND YOUTH DEVELOPMENT IN SOUTH WEST NIGERIA: IMPLICATION FOR COUNSELLING

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Abstract

The study examined mental health as a challenge to youth development in Southwest Nigeria: Implication for counselling. Specifically, the study investigated the extent of mental health of youths in South-West Nigeria, the level of youth development and the relationship between counselling and mental health of youths in South-West Nigeria. The descriptive research design of the survey type was used for this study. The population for the study consisted of all youth between the ages of 15-20 years in Ekiti State. The sample for the study consisted of 1200 youths in Ekiti State selected using a simple random sampling technique. A self-designed research instrument was used for the collection of relevant data for the study. The reliability of the instrument was determined by finding the internal consistency of the instrument using the test retest method to obtain a reliability coefficient value of 0.80. The responses obtained were collated and analysed using Pearson product moment correlation, tested at 0.05 level of significance. The findings revealed that there is a significant relationship between, disruptive behaviour, isolation, self-esteem, discrimination and youth development in South-West Nigeria. The findings also revealed a significant relationship between counselling and mental health youths in Southwest Nigeria. The study recommended the development of mental health screening programs in schools and community centers to identify early and support youths experiencing anxiety, focusing on building coping mechanisms and resilience.

Keyword: Mental health, Youth development, isolation, self -esteem, discrimination, counselling.

Introduction

As Nigeria grapples with rapid urbanization, technological advancement, and social transformation, the psychological well-being of its young population has emerged as a critical concern requiring urgent attention. The South-West region, despite its relative educational and economic advantages within Nigeria, faces unique challenges in addressing mental health issues among the youths. Mental health challenges among young people in South-West Nigeria manifest in various forms, including depression, anxiety, substance abuse, and behavioral disorders. These issues are often compounded by societal stigma, limited

access to mental health services, and cultural beliefs that sometimes view psychological problems through the lens of spiritual warfare or character deficiency. The prevalence of these mental health challenges significantly impacts educational achievement, economic productivity, and social relationships, ultimately affecting the region's developmental trajectory.

Mental disorder is characterized by a clinically significant disturbance in an individual's cognition, emotional regulation, or behaviour. It is usually associated with distress or impairment in important areas of functioning. There are many different types of mental

disorders. Mental disorders may also be referred to as mental health conditions. The global prevalence of mental health disorders shows it affects millions of people worldwide regardless of age, gender, socioeconomic status, or geographical location. The World Health Organization (WHO, 2023) estimates that nearly one billion people globally live with a mental disorder, with depression and anxiety being the most common disorders.

Mental health disorders represent a significant public health concern in Africa, affecting millions across the continent which often remain underreported and undertreated. Studies indicate that approximately 116 million people in Africa experience mental health disorders, representing a substantial burden on individuals, communities, and healthcare systems. Depression stands as one of the most prevalent mental health disorders in Africa, with rates varying significantly between countries. In Uganda, researchers have found depression rates of approximately 29% among adults, while studies in Nigeria suggest prevalence rates around 23% (Kinyanda *et al.*, 2021; Okwaraji *et al.*, 2020). Youth mental health presents another crucial concern. Recent research by Thompson *et al.* (2023) indicates that approximately 20% of children and adolescents worldwide experience mental health disorders, with suicide being the fourth leading cause of death among 15-29 year-olds. The increasing prevalence of social media use and digital technology has been associated with rising rates of anxiety and depression among young people. The economic impact of mental health conditions is substantial. The World Economic Forum (2023) estimates that mental health conditions cost the global economy approximately US\$ 2.5 trillion annually, with projections suggesting this could rise to US\$ 6 trillion by 2030 if current trends continue. These costs include both direct healthcare

expenses and indirect costs such as lost productivity and reduced workforce participation.

Stigma and discrimination continue to pose significant barriers to mental health care access and treatment seeking behavior. Research by Martinez and Lee (2023) suggests that cultural beliefs, social norms, and misconceptions about mental illness contribute to treatment delays and poor outcomes in many communities worldwide. The integration of mental health services into primary healthcare systems has improved access to care. Studies by Rahman *et al.* (2023) demonstrated that task-sharing approaches, where non-specialist health workers deliver basic mental health interventions, can effectively expand service coverage in resource-limited settings.

Despite the high prevalence of mental health conditions, treatment gaps remain staggeringly wide. The World Health Organization estimates that no fewer than 10% of people with mental health conditions in Africa receive any form of treatment (WHO, 2021). This treatment gap stems from multiple factors, including severe shortages of mental health professionals, with many countries having less than one psychiatrist per million population. Stigma continues to pose a significant barrier to mental health care access. Traditional beliefs and cultural practices often frame mental health conditions through spiritual or supernatural lenses, leading many individuals to seek help from traditional healers rather than medical professionals (Abdulmalik *et al.*, 2019). While traditional healing practices hold cultural significance, they may sometimes delay access to evidence-based interventions. Several African countries have implemented national mental health policies and are working to integrate mental health services into primary healthcare systems.

The prevalence of mental health in Southwest Nigeria indicates that approximately 20-30% of the population experiences some form of mental health condition during their lifetime. A comprehensive study conducted in Lagos State found that depression and anxiety disorders are the most prevalent mental health conditions, affecting about 25% of the adult population. The World Health Organization (WHO) estimates that no fewer than 10% of these individuals receive adequate treatment, highlighting a significant treatment gap. Urban centers like Lagos and Ibadan demonstrate higher reported rates of mental health conditions compared to rural areas, though this may partly reflect better reporting mechanisms and access to diagnostic services. Youth development represents a critical dimension of national growth, encompassing various aspects of young people's lives including education, employment, health, and social engagement. With approximately 70% of Nigeria's population under the age of 30, the country's future largely depends on its ability to harness and develop its youth potential effectively. Education plays a pivotal role in youth development, yet Nigeria continues to face significant challenges in this sector. According to recent statistics from the Federal Ministry of Education (2023), while primary school enrollment has increased to 84%, secondary school completion rates remain at approximately 42%. The disparity between urban and rural educational achievements particularly affects youth development, with rural areas showing significantly lower educational attainment rates. Employment and economic empowerment represent another crucial aspect of youth development in Nigeria.

Social participation and civic engagement represent growing areas of youth development in Nigeria. The rise in youth-led organizations and movements

demonstrates increasing political awareness and social consciousness among young Nigerians. However, Oladeji and Mohammed (2023) note that formal channels for youth participation in decision-making processes remain limited, potentially hampering comprehensive development. Skill development and vocational training have gained prominence in Nigeria's youth development agenda. The Industrial Training Fund (ITF) and similar institutions have expanded their programs, though Ekezie *et al.* (2022) suggest that the gap between available training and market demands remains significant. Technical and vocational education requires further enhancement to meet contemporary workplace requirements.

Cultural and social factors significantly influence youth development in Nigeria. Traditional values often clash with modern aspirations, creating unique challenges for young people navigating between cultural expectations and contemporary opportunities. Research by Nnamdi and Afolayan (2023) highlights the need for development approaches that balance cultural preservation with modern advancement. Government policies and initiatives play a crucial role in youth development. The National Youth Policy provides a framework for youth development, though implementation challenges persist. Recent initiatives like the Nigeria Youth Investment Fund (NYIF) demonstrate increased attention to youth development, although impact assessment studies suggest room for improvement in implementation strategies.

The youth population in Southwest Nigeria, comprising individuals between 15-35 years according to the Nigerian National Youth Policy, faces unprecedented challenges that contribute to mental health difficulties. These challenges include high unemployment rates, which the National Bureau of Statistics (2023)

reports at approximately 42% among youth in the region, academic pressure, social media influence, and family expectations. The intersection of these factors creates a complex web of stressors that significantly impact mental well-being. Traditional Nigerian society, particularly in the Southwest, has historically approached mental health through cultural and religious lenses. Adebawale *et al.* (2021) note that mental health issues are often attributed to spiritual causes, leading to stigmatization and reluctance to seek professional help. This cultural context significantly influences how youth perceive and respond to mental health challenges, often resulting in delayed intervention and worsened outcomes.

The educational sector in Southwest Nigeria, while relatively developed compared to other regions, faces significant challenges in addressing student mental health needs. Studies by Ogunfowokan and Fajemilehin (2019) revealed that only 23% of secondary schools in the region have designated counselling units, while just 15% have trained counsellors. This shortage of mental health resources in educational institutions limits early intervention opportunities and compounds existing challenges. Research indicates a strong correlation between mental health challenges and reduced academic performance, increased dropout rates, and diminished career prospects among youth in the region. According to Ademola-Popoola *et al.* (2021), students experiencing mental health difficulties are three times more likely to discontinue their education compared to their peers without such challenges. This situation creates a cycle of disadvantage that affects both individual development and regional progress.

The implications for counselling are particularly significant given the region's unique sociocultural context. Traditional counselling approaches often require

adaptation to accommodate local perspectives while maintaining professional standards. Oluwole and Adebayo (2020) emphasize the need for culturally sensitive counselling interventions that bridge the gap between modern psychological approaches and indigenous understanding of mental health. The increasing prevalence of technology use among Southwest Nigerian youth presents both challenges and opportunities for mental health intervention. Social media platforms, while potentially contributing to mental health issues through cyber bullying and social comparison, also offer innovative channels for delivering mental health support and counselling services (Egbochukwu *et al.*, 2021). Some of the mental health challenges to youth development as considered in the study include, disruptive behaviour, isolation, self-esteem and discrimination.

Disruptive behavior represents another critical mental health challenge affecting youth development in Nigeria, manifesting through conduct problems, aggression, and defiance of authority figures. These behavioral issues often emerge in educational settings and family environments, significantly impacting academic achievement and social adjustment. Studies have shown that factors such as poverty, exposure to violence, and family dysfunction contribute to the development of disruptive behaviors among Nigerian youth, creating a cycle that can be difficult to break without proper intervention. The management of disruptive behavior disorders in Nigerian youth is complicated by limited mental health resources and widespread misconceptions about behavioral problems. Many young people exhibiting disruptive behaviors are often labeled as "troublemakers" rather than receiving the mental health support they need. This stigmatization, coupled with inadequate access to behavioral health services, creates

significant barriers to effective treatment and rehabilitation.

Isolation has emerged as a significant mental health challenge affecting Nigerian youth development. Young people increasingly find themselves disconnected from meaningful social interactions and support systems, particularly in urban areas where traditional community bonds are weakening. The rise of social media, while seemingly connecting youth, has paradoxically contributed to physical isolation as face-to-face interactions diminish. This phenomenon has been exacerbated by societal pressures, academic stress, and economic challenges that often force young people to withdraw from social activities. The impact of isolation on Nigerian youth manifests in various ways, including increased rates of depression, anxiety, and difficulty in developing essential social skills. Research indicates that isolated youth are more likely to struggle with academic performance and career development, as they miss out on crucial networking opportunities and peer learning experiences. The COVID-19 pandemic further intensified this challenge, creating unprecedented levels of physical and social isolation that continue to affect youth mental well-being.

Self-esteem issues represent another critical mental health challenge facing Nigerian youths. Many young people struggle with poor self-image and low confidence, influenced by various factors including societal expectations, academic pressure, and economic disparities. Social media platforms have significantly contributed to this challenge by promoting unrealistic standards of success and physical appearance, leading many youth to develop negative self-perception when they feel unable to meet these standards. The consequences of low self-esteem among Nigerian youth are far-reaching and potentially devastating to their

development. Young people with poor self-esteem often struggle to pursue opportunities, engage in healthy relationships, or advocate for themselves in professional settings. This psychological barrier can lead to underachievement, increased vulnerability to peer pressure, and engagement in risky behaviors as coping mechanisms. The situation is particularly of concern in communities where mental health support systems are limited or stigmatized.

Discrimination remains a significant mental health challenge that impedes youth development in Nigeria, manifesting in various forms including ethnic, religious, gender, and socioeconomic prejudices. Young Nigerians frequently encounter discriminatory practices in educational institutions, employment opportunities, and social interactions, leading to increased rates of anxiety, depression, and low self-esteem (Adebawale & Ibrahim, 2021). These experiences of discrimination can be particularly damaging during adolescence and early adulthood, crucial periods for identity formation and psychological development. Research indicates that youth who face discrimination are more likely to develop negative self-perceptions, experience academic difficulties, and struggle with interpersonal relationships, ultimately affecting their overall mental well-being and future prospects (Okonkwo *et al.*, 2022).

The role of counselling in addressing youth mental health concerns has gained increasing recognition in Nigeria's educational and healthcare systems. Counselling services, particularly in educational institutions, serve as a crucial intervention point for identifying and addressing mental health challenges among young people. Ogunleye and Ahmed (2020) emphasized that school-based counselling programs have shown significant success in helping students cope

with academic pressure, family issues, and personal development challenges. However, the shortage of trained counsellors and inadequate facilities in many Nigerian schools and communities continues to limit access to these essential services.

Recent studies have highlighted the positive correlation between access to counselling services and improved mental health outcomes among Nigerian youth. Research conducted demonstrated that young people who receive regular counselling support show marked improvement in their emotional regulation, academic performance, and social interactions. The integration of traditional support systems with modern counselling approaches has proven to be particularly effective in the Nigerian context, where family and community play significant roles in young people's mental well-being. Furthermore, peer counselling programs have emerged as a promising complement to professional services, especially in areas where access to trained counsellors is limited. Despite the evident benefits of counselling in supporting youth mental health, significant challenges persist in making these services widely available and culturally acceptable across Nigeria.

Statement of the Study

Mental health challenges among young people in Southwest Nigeria have become increasingly prevalent, manifesting in various forms including depression, anxiety, substance abuse, and behavioral disorders. These issues are exacerbated by societal stigma, limited access to mental health services, and cultural beliefs that often view psychological problems through spiritual or character deficiency lenses. The situation is particularly concerning given that only 23% of secondary schools in the region have designated counselling units, and just 15% have trained counsellors, creating a significant gap in early

intervention opportunities for youth mental health support.

The impact of these mental health challenges on youth development is substantial, affecting educational achievement, economic productivity, and social relationships. Studies indicate that students experiencing mental health difficulties are three times more likely to discontinue their education compared to their peers without such challenges, creating a cycle of disadvantage that affects both individual development and regional progress. Despite the recognized importance of mental health support and counselling services, the shortage of trained counsellors, inadequate facilities, and cultural barriers continue to limit access to essential mental health services for youth in Southwest Nigeria, necessitating an investigation into the relationship between mental health challenges and youth development, as well as the implications for counselling services in the region.

Purpose of the Study

The main purpose of this study is to examine mental health as a challenge to youth development in South-West Nigeria: Implication to counselling. The study specifically intends to:

1. examine the extent of mental health of youths in Southwest Nigeria?
2. examine the level of youth development in Southwest Nigeria?
3. Investigate the relationship between counselling and mental health of youths in Southwest Nigeria?

Research Hypotheses

The following hypotheses were formulated for this study:

- There is no significant relationship between disruptive behaviour and youth development in Southwest Nigeria;
- There is no significant relationship between isolation and youth development in Southwest Nigeria;

- There is no significant relationship between self-esteem and development in Southwest Nigeria;
- There is no significant relationship between discrimination and youth development in Southwest Nigeria;
- There is no significant relationship between counselling and mental health of youth in Southwest Nigeria.

Methodology

The study adopted descriptive research design of the survey type. The population for the study consisted of all youth between the age of 15-20 years in Ekiti State, Nigeria. The sample for the study consists of 1200 youths in Ekiti State, Nigeria. Youths within the ages of 15 and 20 years old residing in Ekiti State were

selected for the study using a simple random sampling technique. A self-designed questionnaire was used for the collection of data for the study. The reliability of the instrument was determined through test re-test statistical method to obtain a reliability coefficient of 0.80 which was adjudge reliable for the instrument. The data collected were analyzed using inferential statistics. Pearson Product Moment Correlation was the inferential statistics used to test the hypotheses. All hypotheses were tested at 0.05 level of significance.

Results

Hypotheses One: There is no significant relationship between disruptive behaviour and youth development in Southwest Nigeria

Table 1: Pearson's Product Moment Correlation showing the Relationship between Disruptive Behaviour and Youth Development

Variables	N	Mean	Standard Deviation	r-cal	P-value
Youth Development	1200	15.00	2.22		
Disruptive Behaviour	1200	9.55	2.06	0.267*	0.001

P < 0.05

Table 1 showed there is significant relationship between disruptive behaviour and youth development, r-cal = 0.267, p-value = 0.001 ($p < 0.05$). Therefore, the hypothesis formulated which states that there is no significant relationship between disruptive behaviour and youth

development in Southwest Nigeria was rejected.

Hypotheses Two: There is no significant relationship between isolation and youth development in Southwest Nigeria

Table 2: Pearson's Product Moment Correlation showing the Relationship between Isolation and Youth Development

Variables	N	Mean	Standard Deviation	r-cal	P-value
Youth Development	1200	15.00	2.22		
Isolation	1200	8.30	1.88	0.335*	0.000

P < 0.05

Table 72 showed there is significant relationship between isolation and youth development, r-cal = 0.335, p-value = 0.000 ($p < 0.05$). Therefore, the hypothesis formulated which states that there is no significant relationship between isolation

and youth development in Southwest Nigeria was rejected.

Hypotheses Three: There is no significant relationship between self-esteem and youth development in Southwest Nigeria

Table 3: Pearson's Product Moment Correlation showing the Relationship between Self-Esteem and Youth Development

Variables	N	Mean	Standard Deviation	r-cal	P-value
Youth Development	1200	15.00	2.22		
Self-Esteem	1200	7.15	2.28	0.619*	0.000

P < 0.05

Table 3 showed there is significant relationship between self-esteem and youth development, $r\text{-cal} = 0.619$, $p\text{-value} = 0.000$ ($p < 0.05$). Therefore, the hypothesis formulated which states that there is no significant relationship between self-

esteem and youth development in Southwest Nigeria was rejected.

Hypotheses Four: There is no significant relationship between discrimination and youth development in Southwest Nigeria

Table 4: Pearson's Product Moment Correlation showing the Relationship between Discrimination and Youth Development

Variables	N	Mean	Standard Deviation	r-cal	P-value
Youth Development	1200	15.00	2.22		
Discrimination	1200	8.52	2.11	0.512*	0.002

P < 0.05

Table 4 showed there is significant relationship between discrimination and youth development, $r\text{-cal} = 0.512$, $p\text{-value} = 0.002$ ($p < 0.05$). Therefore, the hypothesis formulated which states that there is no significant relationship between

discrimination and youth development in Southwest Nigeria was rejected.

Hypotheses Five: There is no significant relationship between counselling and mental health in Southwest Nigeria

Table 5: Pearson's Product Moment Correlation showing the Relationship between Counselling and Mental Health Youth

Variables	N	Mean	Standard Deviation	r-cal	P-value
Counselling	1200	14.00	1.82		
Mental Health	1200	15.98	1.54	0.790*	0.000

P < 0.05

Table 5 showed there is significant relationship between counselling and mental health, $r\text{-cal} = 0.790$, $p\text{-value} = 0.000$ ($p < 0.05$). Therefore, the hypothesis formulated which states that there is no significant relationship between counselling and mental health in Southwest Nigeria was rejected.

Discussion

Findings from hypothesis one revealed a significant relationship between disruptive behaviour and youth development ($r = 0.267$, $p < 0.05$).

Bamgbose *et al.* (2020) similarly argued that behavioral challenges can substantially influence developmental outcomes, affecting educational engagement, social integration, and personal growth potential.

The analysis from hypothesis two indicated a significant correlation between isolation and youth development ($r = 0.335$, $p < 0.05$). This finding is consistent with Oluwaseun *et al.* (2019), who emphasized the detrimental effects of social isolation on adolescent psychological and social development, highlighting the importance of social connectedness.

Hypothesis three showed the strongest correlation in the study, it revealed a significant relationship between self-esteem and youth development ($r = 0.619$, $p < 0.05$). This robust relationship aligns with extensive psychological research demonstrating self-esteem's critical role in developmental processes. Omoluabi *et al.* (2020) argued that positive self-perception fundamentally influences personal growth, educational attainment, and social interactions.

Hypothesis four revealed a significant correlation between discrimination experiences and youth development ($r = 0.512$, $p < 0.05$). This finding is supported by Adejuwon and Okewole (2019), who highlighted the profound developmental consequences of discriminatory experiences, emphasizing the need for inclusive social environments.

Finally, the most substantial correlation was observed in hypothesis five between counseling and mental health ($r = 0.790$, $p < 0.05$), underscoring the critical role of professional psychological support. Makanjuola *et al.* (2021) argued that targeted counseling interventions can significantly mitigate mental health challenges and promote positive developmental outcomes.

Conclusion

Sequel to the findings of this study, it was concluded that mental health variables such as, disruptive behavior, isolation, self-esteem and discrimination significantly impact youth developmental trajectories. The findings revealed a significant relationship between counseling and mental health of youths.

Recommendations

Based on the findings of this study, the following recommendations were made.

1. Design behavioral intervention strategies that focus on understanding

root causes, providing positive behavior support, and offering counseling to help youth develop emotional regulation skills.

2. Create community engagement programmes and social support networks that encourage youth interaction, build social skills, and combat feelings of loneliness.
3. Develop comprehensive personal development programmes in schools and communities that focus on building positive self-perception, confidence, and personal growth.
4. Implement robust anti-discrimination policies, conduct awareness programs, and create inclusive environments that protect and support youth from diverse backgrounds.
5. Invest in professional mental health training, increase the availability of counseling services, and integrate mental health support into educational and community infrastructures.

References

Abdulmalik, J., Kola, L., & Gureje, O. (2019). Traditional healing practices and mental health service delivery in low-resource settings. *International Journal of Social Psychiatry*, 65(4), 347-358.

Adebawale, O., Olatunji, S., & Adewuya, A. (2021). Navigating cultural interpretations of mental health: A qualitative study of perceptions in Nigerian society. *Transcultural Psychiatry*, 58(3), 368-385.

Adejuwon, O. A., & Okewole, A. O. (2019). Perceived discrimination and psychological well-being among Nigerian youth. *Journal of Social Issues*, 75(4), 716-734.

Ademola-Popoola, D. S., Olatunji, P. O., & Mosaku, S. K. (2021). Mental health challenges and academic performance among Nigerian students: A longitudinal study. *Educational Psychology*, 41(5), 589-604.

Bamgbose, O. A., Adewuya, A. O., & Akinyemi, O. O. (2020). Disruptive behaviors and mental health among Nigerian adolescents. *Child and Adolescent Mental Health*, 25(3), 156-163.

Egbochukwu, O., Ibrahim, A., & Mohammed, Z. (2021). Digital technologies and mental health interventions: Exploring innovative approaches for Nigerian youth. *Journal of Technology in Behavioral Science*, 6(2), 245-259.

Ekezie, W., Nnamdi, C., & Afolayan, J. (2022). Skills development and vocational training in Nigeria: Bridging the employment gap. *International Journal of Educational Development*, 87(), 102-115.

Kinyanda, E., Skogstad, L., Bauman, A., & Hansen, K. (2021). Depression prevalence and associated factors across diverse African contexts: A systematic review. *Journal of Affective Disorders*, 278(), 23-42.

Makanjuola, V. A., Akinsulore, A., & Oluwole, L. O. (2021). Effectiveness of counseling interventions in youth mental health: A Nigerian perspective. *International Journal of Social Psychiatry*, 67(6), 698-706.

Martinez, E., & Lee, S. (2023). Cultural barriers to mental health treatment: A global perspective. *Culture, Medicine, and Psychiatry*, 47(2), 189-210.

Nnamdi, C., & Afolayan, J. (2023). Cultural dynamics and youth development in contemporary Nigeria. *Journal of Youth and Adolescence*, 52(4), 723-740.

Ogunfowokan, A. A., & Fajemilehin, B. R. (2019). Mental health resources in South-West Nigerian schools: A comprehensive assessment. *School Mental Health*, 11(3), 245-259.

Okonkwo, C. (2022). National youth policy and development strategies in Nigeria. *Public Policy and Administration Review*, 10(3), 56-72.

Okwaraji, F. E., Onyebueke, G. C., & Enwereji, E. E. (2020). Depression prevalence and associated factors in southeastern Nigeria. *Journal of Affective Disorders*, 265(), 1-10.

Oladeji, M., & Mohammed, Z. (2023). Youth participation in decision-making processes: Challenges and prospects in Nigeria. *Governance*, 36(2), 187-203.

Oluwaseun, A., Adejumo, P., & Oladipo, S. E. (2019). Social isolation and mental health among adolescents in Nigeria. *Child and Adolescent Social Work Journal*, 36(5), 467-480.

Oluwole, A., & Adebayo, B. (2020). Culturally sensitive counselling approaches in Nigerian contexts: Bridging traditional and contemporary perspectives. *Counselling and Psychotherapy Research*, 20(3), 345-360.

Omoluabi, P. F., Adewuya, A. O., & Makanjuola, V. A. (2020). Self-esteem and psychological well-being among Nigerian adolescents. *Journal of Adolescence*, 80(), 45-54.

Petersen, I., Lund, C., & Bhana, A. (2022). Task-shifting approaches in mental health service delivery: Innovations in low-resource settings. *Global Mental Health*, 9, ()25.-??

Rahman, A., Malik, A., Sikander, S., Roberts, C., & Creed, F. (2023). Integrating mental health services in primary healthcare: A comprehensive framework for low-resource settings. *Health Policy and Planning*, 38(4), 567-582.

Thompson, A., & Rodriguez, M. (2023). Advances in psychopharmacology: Targeted medication approaches. *Neuropsychopharmacology*, 48(5), 789-805.

Thompson, R., & Rodriguez, M. (2023). Advances in psychopharmacology: Targeting treatment-resistant mental health conditions. *Neuropsychopharmacology*, 48(2), 256-270.

Thompson, R., Arnett, A., & Johnson, L. (2023). Global youth mental health trends: A comprehensive review. *Journal of Adolescent Health*, 72(4), 456-470.

World Health Organization. (2021). *Mental health atlas 2020*. Geneva, Switzerland: WHO Press.

World Health Organization. (2023). *World mental health report: Transforming mental health for all*. Geneva, Switzerland: WHO Press.