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SOCIAL FACTORS OF PSYCHOLOGICAL HELP-SEEKING AMONG RUSSIAN ADOLESCENTS

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INTRODUCTION

Relevance of the research topic. Mental health is currently recognized as a global problem, exacerbated against the background of political turbulence, pandemics, natural disasters and other global problems[1] . Studies of Russian society confirm this trend: according to data from 2016, an average of 24%[2] -25% of the total sample seek help from specialists to address their own mental and emotional problems[3] . However, the prevalence of mental health problems is not always commensurate with the level of service utilization and associated experience of help-seeking. The solution to this empirical contradiction is currently explained by the concept of 'help-seeking behaviour'. It reflects social attitudes and practices of engaging professionals as a coping strategy to address a person's emotional, psychological, mental health problems.

The most vulnerable risk groups in dire need of quality psychological assistance are often the least likely to seek and receive help: adolescents aged 14-17 are one of such vulnerable group. According to national studies, the majority (59%) of Russian adolescents face life difficulties that require the involvement of a psychologist, but only a third of them have contacted a specialist in crisis situations[4] . Adolescence is recognized as a critical stage in a child's life: it is at this age that a decline in the psychological well-being of the individual is observed, and the associated risks of developing both psycho-emotional problems and disorders and risky behaviour increase[5] . It is recognized that the

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[1] Integrated Mental Health Action Plan 2013-2030 // World Health Organisation, 2022. URL: https://www.who.int/publications/i/item/9789240031029 (date of access: 02.04.2024)

[2] Every second Russian complained of increased stress and anxiety // RBC. 2022. 14 April. URL: https://www.rbc.ru/rbcfreenews/625771af9a794771c6251aaa (date of access: 02.04.2024)

[3] Petrov V. E., Maltseva T. V. The problem of the demand for psychological services among employees of internal affairs bodies and the population // Applied Psychology and Pedagogy. 2017. №3. P. 37-43.

[4] 1 out of 3 teenagers in a crisis situation seeks psychological help // NAFI URL: https://nafi.ru/analytics/1-iz-3-podrostkov-v-krizisnoy-situatsii-obrashchaetsya-za-psikhologicheskoy-pomoshchyu/ (date of access: 02.04.2024).

[5] Aramacheva L. V., Dubovik E. Yu. Analysis of counselling requests of modern parents bringing up teenagers 13-15 years old // Vestnik KSPU named after V.P. Astafiev. 2023. № 1(63). P. 111.

presence of psychological problems is a significant risk for adolescents' development, negatively affecting their future well-being[6] .

The problematization of their psychosocial well-being has led to the institutionalization of psychological assistance to adolescents in Russian society. By 2023, the number of adolescents aged 14-17 living in the Russian Federation was estimated at 6,352,664[7] . Adolescents represent a large socially significant group, and comprehensive institutional work with them - including in the sphere of providing qualified psychological assistance - has become one of the federal priorities. Work on the development of psychological services in educational institutions of the Russian Federation, approval of "medical psychologists" in the nomenclature of the health care system of the Russian Federation[8] , further development of the Federal Law "On Psychological Assistance in the Russian Federation"[9] . There is also a significant growth of the private market of psychological services (including for children and adolescents), which has grown in Russia by 63% in 2022, according to the estimates[10] .

Special mention should also be made of the strategic programme "Adolescents of Russia" of the Presidential Commissioner for Children's Rights within the framework of the National Project "Education" supported by the President of the Russian Federation V.V. Putin and the Ministry of Education of the Russian Federation. The sociological study "Adolescents 360°", implemented within the framework of this programme and discussed at subsequent federal forums, demonstrated the possibilities of a science-based approach in addressing problems arising both in the lives of modern Russian adolescents and in their interaction with specialists in the prevention system, the socialization of adolescents and the provision of professional psychological and psychotherapeutic

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[6] Tsirulnikova E. A., Lukanin N. P. Modern trends in the manifestation of socio-psychological disadvantage in adolescents // Psychology and Psychotechniques. 2022. № 4. P. 62.

[7] Population of the Russian Federation by sex and age as of 1 January 2023. Federal State Statistics Service

[8] Order of the Ministry of Health of the Russian Federation from 14.10.2022 No. 668n "On Approval of the Procedure for the Provision of Medical Care in Mental Disorders and Behavioural Disorders" // Official Internet Portal of Legal Information. URL: http://publication.pravo.gov.ru/Document/View/0001202211140024 (date of access: 02.04.2024)

[9] Project. Federal Law "On Psychological Assistance in the Russian Federation" // Psychological Newspaper URL: https://psy.su/content/files/zakonoproekt.pdf (date of access: 02.04.2024).

[10] Psychologists are on the alert: the demand for psychological help in Russia has grown sharply over the year // Kommersant. 2022. 28 December. URL: https://www.kommersant.ru/doc/5748777 (date of access: 02.04.2024)

assistance to them[11] . The importance of psychological work can also be traced in the development of the concept of "teenagers centres" under the auspices of the Federal Centre for the Development of Adolescent Socialization Programmes[12] . At the same time, alternative sources of help are multiplying, such as all-Russian helplines, online counselling services, regional budgetary institutions and public foundations specializing in providing both comprehensive and individual social and psychological services.

It is in adolescence that coping behaviour is formed and becomes an important factor of psychological and social well-being[13] . The study of adolescents' seeking psychological help becomes an urgent interdisciplinary task with both applied and scientific significance. However, it is associated with a number of contradictions. The empirical paradox, as noted above, is that the need for psychological help among adolescents significantly diverges from the prevalence of seeking it. The main theoretical contradiction is observed in the high degree of study of individual-psychological causes of adolescents' treatment, with a lack of knowledge about other, social factors that explain this phenomenon. There is a need to develop new approaches and multifactor models to explain the phenomena of treatment and, no less importantly, "non-return" of Russian adolescents in need of qualified help from a sociological perspective.

The **research problem**, summarizing these contradictions, is as follows: in modern sociology of mental health there is a need to systematize existing and identify new knowledge about the factors of adolescents' psychological help-seeking.

Degree of scientific development of the research problem. The concept of "psychological help-seeking" is studied in the tradition of the sociology of mental health, the originator of which is recognized as E. Durkheim[14] . The socio-structural influence on the processes of a person's search for external help, including mental health issues, is

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[11] Sociological research "Teenagers 360°" within the framework of the strategic programme "Teenagers of Russia" of the Russian Presidential Commissioner for Children's Rights // RosPodros URL: https://rospodros.ru/polls (date of access: 02.04.2024).

[12] Regulations on the Federal Centre for the Development of Adolescent Socialisation Programmes // FC RPSP URL: https://yadi.sk/i/jXyHHHKVaAGmeA

[13] Shereshkova E. A., Saunina A. P. Formation of constructive coping-strategies in adolescents // Scientific notes of Shadrinsk State Pedagogical University. 2024. №1. P. 120.

[14] Durkheim E. Suicide: A Sociological Study / Per, from Fr. with an abridgment; Ed. by V. A. Bazarov. A. Bazarov. M.: Mysl, 1994.- 399 p.

reflected in the works of T. Parsons, who conceptualized it in the form of role interaction between a "sick person" and a "doctor", taking place in the corresponding social system[15]. The subsequent movement for the formation of the sociology of mental health as a separate discipline of scientific knowledge was developed in the works of Michel Foucault[16] , Erving Goffman[17] , other sociologists-constructivists. Within the framework of domestic science, since the 1990s, the consideration of this problematic has been developed mainly in the scientific schools of sociology and social psychology of health and the works of I.N. Gurvich, M.M. Rusakova, A.A. Yakovleva[18] , V.A. Odinokova[19] , R.G. Dubrovsky, N.A. Antonova[20] , K.Y. Eritsyan[21] . The works of V.I. Dudina[22] , E.V. Dmitrieva[23] and other Russian researchers also contributed to the development of the Russian school of sociology of health. In the Russian bibliography, the study of "psychological help seeking" and, in particular, its gap in certain social groups became an independent subject of empirical research in the 2010s. However, the active development of this problematic by sociological researchers began in the early 2020s: the contribution of E.A. Mikhailova[24] , M.E. Esipov[25] , V.N. and T.S. Buzinykh[26] .

There are three key directions in the study and interpretation of the phenomenon of psychological help-seeking. Proponents of the biomedical model of "illness behaviour"

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[15] Parsons T. System of Modern Societies / Translated from English by L.A. Sedov and A.D. Kovalev. Edited by M.S. Kovaleva. Moscow: Aspect Press, 1998. 270 c.

[16] Foucault M. History of madness in the classical era / Michel Foucault; per. from Fr. I.K. Staf. M.: ACT: ACT MOSCOW, 2010. 698 c.

[17] Goffman, E. Total Institutions: Essays on the Social Situation of Mentally Ill Patients and Other Inmates of Closed Institutions. Translated from English by A. Salin; ed. by A. Korbut. Moscow: Elementary Forms, 2019. 464 c.

[18] Smolskaya T. T. T., Tretyakova V. I., Ogurtsova S. V. V., Shilova E. A., Yakovleva A. A., Gurvich I. N., Rusakova M. M. Epidemiological surveillance of HIV infection: organisation and content of comprehensive seroepidemiological and behavioural studies in vulnerable populations: methodological recommendations. St. Petersburg: St. Petersburg Research Institute named after Pasteur, 2009. 76 c.

[19] Influence of drug use on HIV treatment demand in St. Petersburg and Orenburg / O. S. Levina, A. A. Yakovleva, V. A. Odinokova, I. N. Gurvich // HIV-infection and immunosuppression. 2010. T. 2, № 1. P. 78-86.

[20] Gurvich I. N., Antonova N. A., Dubrovsky R. G. Diagnosis and prediction of deviant behaviour of adolescents in the educational environment: Educational and methodological manual. MOSCOW: RBF NAN, 2012. 144 c.

[21] Tsvetkova L. A. Methodology of development of preventive projects in the field of health: a textbook / L. A. Tsvetkova, N. A. Antonova, K. Y. Eritsyan. - St. Petersburg: Publishing House of St. Petersburg State University, 2013. 55 c.

[22] Dudina V. I. Health and social inequality: models of explanation // Vestnik of SPbSU. Ser. 12. 2010. Vyp. 3. P. 309 - 315.

[23] Dmitrieva E. V. Sociology of Health: Methodological Approaches and Communication Programmes. Moscow: Centre, 2002. 223 c.

[24] Mikhailova E. A. Helplines as a tool to prevent social disadvantage // Monitoring of Public Opinion. 2013. №1(113). P. 109-113.

[25] Yesipov M. A. Social representations of young people about psychological help: theoretical foundations of the study // ANI: Pedagogy and Psychology. 2021. №35(2). P. 354-357.

[26] Buzin V. N. N., Buzina T. S. Population assessment of the availability of psychological help: a sociological study // Social aspects of public health [online edition]. 2022. № 68(1). URL: http://vestnik.mednet.ru/content/view/1347/30/lang,ru/

put the presence and nature of mental illness as a key determinant of a person's seeking help. Alternative approaches were based on the theories of stigmatization and 'labelling', the sociological basis of which were T. Parsons' ideas about the structural-functional, controlling role of the health care institution and E. Goffman's theory of stigmatization. The newest approach to the study of treatment is the social-network approach, based on the works of B. Percosolido.

The conceptualization of adolescents as an object of sociological research begins with J. Coleman's work "Society of Adolescents" and the works of his followers. The "constructivist transition" to the treatment of children and adolescents as autonomous social actors and the object of focused research can be traced in the works of Russian sociologists I. Kon[27], E. Kurulenko[28]. The development of their ideas later led to the emergence of a "new sociology of childhood", the principles of which were developed in Russian science by such specialists as, for example, S. N. Mayorova-Scheglova[29], S. Y. Mitrofanova and A. G. Filipova[30], E. A. Kolosova[31], M. M. Rusakova[32], M. N. Yashina[33] and others.

Active study of adolescents' help-seeking has been observed since the 2000s. The first stratum of such studies was devoted to attempts to quantitatively measure the rates of "help-seeking" and "help-seeking gap" among adolescents in different societies. The aim of other interpretive studies was to search for specific factors that could explain the different patterns of adolescents seeking help. Rare sociological works aimed at rethinking and consolidating knowledge about adolescents' seeking psychological help, creating complex conceptual models: an achievement in this respect was the creation of

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[27] Con E. P. Childhood as a social phenomenon // Journal of Social Policy Research. 2004. № 2. P. 151-174.

[28] Kurulenko E. A. Childhood as a socio-cultural phenomenon // Izvestia Samara Scientific Centre of the Russian Academy of Sciences. Social, humanitarian, medico-biological sciences. 2012. № 2-3. P. 838-844.

[29] Shcheglova S. N. Sociology of Childhood. Moscow: Sotsium, 1996. 127 c.

[30] Filipova A. G., Kupryashkina E., Mitrofanova S. Yu. Participatory research principle and field sociology for children // Universum: Social Sciences. 2016. №10 (28). P. 22-24.

[31] Kolosova E. A. Consumer behaviour of children of generation Z: age and territorial characteristics // Geography of childhood: interdisciplinary synthesis of research approaches and practices Materials of the international youth scientific school-conference. Editor-in-chief A.G. Filipova. 2018. C.118-122.

[32] Rusakova M.M., Odinokova V.A., Zakharova Y.P. Well-being and respect for the rights of orphans: a guide to conducting a survey of children and a report on the pilot study. St. Petersburg: ROO SPSBN "Stellit", 2015. 124 c.

[33] Yashina M. N. Questioning and interviewing children. Childhood of the XXI century: socio-humanitarian thesaurus: thematic dictionary-reference book / Ed. by S. N. Mayorova-Shcheglova. N. Mayorova-Shcheglova. Moscow: Izdvo ROS, 2018. P. 437-442.

a revised network episode model (REV NEM) for children and adolescents[34] , a model of adolescents' pathways to psychological help[35] , a model of children's psychological help-seeking[36] .

Nevertheless, among the available base of empirical studies, the absence of a systematic methodological approach to the treatment, measurement and interpretation of seeking psychological help is noticeable. The empirical base itself is represented mainly by qualitative studies: quantitative studies, especially on a representative sample, were extremely rare. There are also no valid sociological methods capable of assessing not only the very "appeal" of adolescents for help, but also the factors that hinder and facilitate their access to the system of psychological help. Moreover, the latest research on these issues signals the weakening of the role of "traditional" barriers to adolescent help-seeking (social roles and statuses, territorial and environmental specifics, certain social attitudes and stigma in particular): it is relevant to search for new social indicators capable of interpreting the phenomenon of adolescent help-seeking within the framework of sociological science. The above-mentioned aspects become an **actual theoretical problem** in sociology of mental health.

Based on the relevance, the object, subject of the study and purpose of the thesis are determined. The complex **object of the study** is Russian adolescents aged 14-17. They are segmented into three subgroups in order to triangulate the data. The central segment consisted of adolescents who sought professional psychological help. In addition to them, the specifics of the behaviour of adolescents who did not seek professional help were studied, as well as the trends in seeking help at the level of the entire representative sample of adolescents aged 14-17 living in the Russian Federation.

The subject of the study is social factors determining the demand for professional psychological help among Russian adolescents aged 14-17.

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[34] Boydell K., Volpe T., Gladstone B., Stasiulis E., Addington J. Youth at ultra high risk for psychosis: Using the Revised Network Episode Model to examine pathways to mental health care // Early intervention in psychiatry. 2013. №7(10). P. 170-186.

[35] Best P., Gil-Rodriguez E., Manktelow R., Taylor B. J. Seeking help from everyone and no-one: Conceptualizing the online help-seeking process among adolescent males // Qual. Health Res. 2016. №26. P. 1067-1077.

[36] Srebnik D., Cauce A. M., Baydar N. Help-Seeking Pathways for Children and Adolescents // Journal of Emotional and Behavioural Disorders. 1996. №4(4). P. 210-220.

The aim of this dissertation is to identify and systematize social factors of professional psychological help-seeking among 14-17-year-old adolescents in the Russian Federation. This can both lay down new mechanisms for improving practical work with adolescents in Russia and outline further prospects for the sociology of mental health in solving this problem. To achieve this goal, it is necessary to fulfil a number of **theoretical and research tasks**:

1) to identify the specifics of theoretical and methodological approaches to the study of help-seeking in the sociology of mental health;

2) to determine the features of interpretation and measurement of adolescents' help-seeking in the world and Russian science;

3) based on the results of the empirical study, to determine the prevalence of the practice of seeking psychological help among Russian adolescents and its specifics;

4) to identify and systematize social factors of help-seeking among adolescents in the context of socio-demographic groups and forms of psychological services;

5) to form a conceptual factor model explaining the formation of different trajectories of receiving psychological help by adolescents 14-17 years old;

6) to propose, justify and validate new indicators of measuring adolescents' demand for professional psychological help, allowing to use the obtained results within the framework of subsequent applied research and practical work of specialists.

The research hypothesis: among the social factors of seeking professional psychological help, the social-network portrait of Russian adolescents (social environment, nature of relations with it) is a more significant predictor than their position in the socio-demographic structure of modern Russian society.

The empirical base of the study is represented by:

- Russian and international normative legal acts regulating the provision of psychological services to adolescents;

- the results of Russian sociological studies (WCIOM, NAFI), as well as the data of official statistics on the issue of psychological services;

- the results of a qualitative sociological study of practices, attitudes and values of students of St. Petersburg conducted by Sociological Clinic of Applied Research of St. Petersburg State University in 2021 (under the supervision of the author, N = 22);

- the results of the quantitative sociological study of Russian teenagers 14-17 "Adolescents 360°" of the strategic programme " Adolescents of Russia" conducted by Sociological Clinic of Applied Research of St. Petersburg State University in cooperation with the Resource Centre "Centre for Applied Sociology" in 2022 (under the supervision of the author, N = 17,000);

- the results of a quantitative sociological survey of specialists of Russian organizations providing psychological assistance to adolescents as part of the project "Adolescents 360°" of the strategic programme "Adolescents of Russia conducted by Sociological Clinic of Applied Research of St. Petersburg State University jointly with the Resource Centre "Centre for Applied Sociology" in 2022 (under the author's supervision, N = 3,995);

- publications of Russian and foreign mass media (electronic and print editions) and materials of Internet-resources, such as websites of governmental authorities, public and non-profit organizations.

Methodological basis. The greatest heuristic potential is possessed by an integrated approach that provides for the synthesis of theoretical and methodological concepts of the sociology of mental health and new sociology of childhood. The first branch uses E. Goffman's theories of stigmatization, the model of factors of referral to mental health professionals (T. V. Kazantseva, N. A. Antonova, K. Y. Eritsyan), the model of referral to psychological help by D. Rickwood and K. Thomas, and the model of network episodes by B. Percosolido. The paradigm of the new sociology of childhood in its domestic rethinking is presented in the works of S. N. Mayorova-Shcheglova. The synthesis of middle-level theories and private models is carried out within the framework of P. Bourdieu's paradigm of "structural constructivism", A. Giddens' theory of structuration, and T. Parsons' theory of social systems and social action.

Research methods: general scientific methods (analysis, synthesis, forecasting, deduction and induction) and empirical research methods (sociological survey, focus groups, document analysis) were used. The study involved a combined strategy and a two-stage design. The first, qualitative (focus group method), was predominantly exploratory in nature and allowed for the identification of factual features and categories of analysis subsequently used to create the instrumentation for the quantitative stage (online survey). The quantitative phase contained the greatest number of types of data analysis, including descriptive statistics, correlation analysis, and regression modelling.

Thus, taking into account the available theoretical and empirical base of research on the topic of work, it seems possible to formulate the main provisions that constitute the **scientific novelty of the study**:

- Approaches to the study of adolescents' help-seeking within the framework of the sociology of mental health are systematized;

- Through a normative-methodological and institutional review, knowledge about the work of the system of psychological assistance to adolescents in the Russian Federation was systematized;

- based on the results of the literature review, a conceptualization of "psychological help-seeking" within the framework of sociological knowledge (in the three-component structure "need - action - practice") is proposed;

- Based on the results of the literature review and empirical research, the author's conceptual model of the factors of adolescents' help-seeking was formed;

- The specifics and key trends of adolescents seeking psychological help in modern Russian society have been identified;

- The author's "help-seeking gap" and "risk index" indicators were proposed and tested to statistically assess the severity of the problem of non-return to care among certain groups of adolescents.

Theoretical and practical significance:

- on the basis of interdisciplinary analysis approaches to the study of adolescents' help-seeking in the research field of mental health sociology were systematized;

- the attitude of adolescents aged 14-17 to cope with psychological difficulties, psychological help, and the work of psychologists of various categories was revealed;

- the social attitudes of 14-17-year-old adolescents in relation to receiving professional psychological help, as well as structural factors determining the application of adolescents for psychological help were determined;

- author's conceptual model of the factors of adolescents' help-seeking was constructed;

- A set of factors (barriers and facilitators) capable of acting as indicators of programmes to improve the effectiveness of the system of professional psychological assistance to adolescents in the Russian Federation was formed.

The problems stated in this paper are relevant for further scientific research, and the scientific results and practical recommendations highlighted by the author can be used by organizations and specialists engaged in psychological, preventive and educational activities among adolescents in Russia. The results of the study, discussed and used within the framework of the all-Russian forums "Adolescents 360" and "Adolescents of Russia", became one of the tools for consolidating practical knowledge about adolescents within the strategic programme "Adolescents of Russia" of the Russian Presidential Commissioner for Children's Rights, during the launch of the information resource "Rospodros.ru" by Autonomous Nonprofit Organization "Centre for the Development of Social Projects" and the Expert Council of the programme, and the formation of the methodological bank of this resource. In addition, the results of the study of the digital transformation of the system of psychological assistance were also applied in the research work of SPBU "Comprehensive study of factors and mechanisms of political and socio-economic sustainability in the transition to a digital society" ((NP_2021 - 2). Also, the materials of the thesis can be used in the educational process in the discipline of "Sociology" (branches of sociology of health/mental health), preparation of articles or

development of teaching aids within the framework of sociology of mental health or the study of adolescence in general.

Approbation of the research results. The main conclusions and provisions of the author's research were presented, in particular, at the following conferences: All-Russian scientific conference XVI Kovalevsky Readings "Sociology in the post-global world: problems and prospects" (St. Petersburg State University, November 2022), All-Russian scientific conference XVII Kovalevsky Readings "Russian society today: values, institutions, processes" (St. Petersburg State University, November 2023), International conference of the Centre for Youth Studies "Youth between past and future: transitions, generations, engagement" (National Research University Higher School of Economics - St. Petersburg, October 2022).), International Conference of the Centre for Youth Studies "Youth between the Past and the Future: Transitions, Generations, Engagement" (National Research University Higher School of Economics - St. Petersburg, October 2022), IV All-Russian Conference "Decade of Childhood: Unifying Mechanisms in the Sphere of Childhood" (Ministry of Education of the Russian Federation, November 2022), Federal Forum "Adolescents 360" (Public Chamber of the Russian Federation, November 2022), Online Forum " Adolescents of Russia" (December 2022). The materials of the research and individual provisions put forward for defence were published in the form of 3 articles in the leading peer-reviewed scientific journals and editions recommended by the Higher Attestation Commission under the Ministry of Science and Higher Education of the Russian Federation[37] , as well as in publications and collections of abstracts of scientific conferences of various levels[38] .

The structure of the thesis includes an introduction, three chapters consisting of eight paragraphs, conclusion, list of references and appendices. The first chapter is

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[37] Plutov L. E., Rusakova M. M., Guzeva D. V. Digitalisation of psychological help: factors and trends (on the example of St. Petersburg) // Sociological Research. 2023.№ 7. P. 53-62; Plutov L. E. Sociological perspectives of studying the applicability for psychological help // Society: sociology, psychology, pedagogy. 2023. № 12(116). P. 51-56; Plutov L. E. Sex specifics of Russian teenagers' request for professional psychological help // Sociodynamics. 2023. № 10. P. 44-57.

[38] Plutov L. E. The role of stigma in Russian adolescents' seeking professional psychological help / Russian society today: values, institutions, processes: Proceedings of the All-Russian Scientific Conference, St. Petersburg, 16-18 November 2023. St. Petersburg: LLC Publishing House "Scientia", 2023. 2010 p.; Lyalina I. N., Plutov L. E., Zolotova A. M., Balakina D. V. Attitudes and practices of adolescents 14-18 years old in receiving professional psychological help / Sociology in the postglobal world: Proceedings of the All-Russian scientific conference, St. Petersburg, 17-19 November 2022. - St. Petersburg: Skifia-Print LLC, 2022. - 929 P.

devoted to the peculiarities of studying the social group of adolescents in the context of receiving psychological services. The second chapter reveals the theoretical and methodological foundations of the study of seeking psychological help within the framework of the sociology of mental health, laid in the author's conceptual model of adolescents' help-seeking. The third chapter contains the results of the empirical study of psychological help-seeking among Russian adolescents aged 14-17.

The **main scientific results of** the thesis consist in the following provisions, also presented in the author's scientific publications in the editions indexed in international databases, defined in accordance with the recommendation of the Higher Attestation Commission of the Ministry of Education and Science of the Russian Federation:

- With a representative sample of 14-17-year-old adolescents in the Russian Federation, the prevalence of coping strategies used by adolescents in situations of psycho-emotional problems was determined, including the prevalence of the practice of referral to specialists in the field of mental health[39] .

- The social factors that act as key barriers to Russian adolescents seeking professional psychological help have been identified. The weak influence of stigma and other social attitudes preventing adolescents from seeking necessary psychological help has been separately identified and analyzed[40] .

- With regression modelling the key predictors of seeking remote psychological help were identified. The prospects of their application for facilitating access of vulnerable groups of population, including Russian adolescents 14-17 years[41] were determined. The author's personal contribution to the joint publication was at least 80%.

- Based on the results of a comprehensive meta-analysis of the literature base, the knowledge about "seeking psychological help" in the world science is systematized, the typology of approaches to its conceptualization is presented, the possibilities and

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[39] Plutov L. E. Sex specificity of Russian teenagers' appeal for professional psychological help // Sociodynamics. 2023. № 10. P. 49.

[40] Plutov L. E. Sex specificity of Russian teenagers' appeal for professional psychological help // Sociodynamics. 2023. № 10. P. 51-53.

[41] Plutov L. E., Rusakova M. M., Guzeva D. V. Digitalisation of psychological help: factors and trends (on the example of St. Petersburg) // Sociological Research. 2023.№ 7. P. 61.

limitations of the existing methodological models of interpretation and measurement of seeking psychological help are presented[42] .

- The ways of integration of sociological knowledge, metatheories and separate concepts for the formation of metacognition about the problem of the population's demand for psychological help, their synthesis within the framework of the author's model of psychological help0seeking, which became the basis for the empirical study of adolescents' demand for psychological help[43,44] are presented.

- The features of sex differentiation of trajectories of help-seeking among Russian adolescents of 14-17 years old, forming their social attitudes, sex specificity of spreading and acceptance of social practice of seeking psychological help are revealed. Recommendations for improving the quality of psychological work with Russian adolescents of both sexes are presented and published[45] .

Scientific provisions for defence, which are based on the main results of the conducted research:

- The key factors of professional psychological help-seeking among Russian adolescents are not socio-demographic, but socio-network factors (the social environment and networks, the nature of relations with it, manifestations of deviant behaviour, etc.).

- At the moment, the institutions of psychological assistance to adolescents are in the process of digital transformation, but face-to-face counselling prevails among the trajectories of adolescents' help-seeking.

- The stigma, which is considered the most powerful factor in the global literature on adolescents, has limited explanatory and predictive value in the Russian context.

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[42] Plutov L. E. Sociological perspectives of studying the demand for psychological help // Society: sociology, psychology, pedagogy. 2023. № 12(116). P. 53-54.

[43] Plutov L. E. Sex specificity of Russian teenagers' appeal for professional psychological help // Sociodynamics. 2023. № 10. P. 47.

[44] Plutov L. E. Sociological perspectives of studying the demand for psychological help // Society: sociology, psychology, pedagogy. 2023. № 12(116). P. 54.

[45] Plutov L. E. Sex specificity of Russian teenagers' appeal for professional psychological help // Sociodynamics. 2023. № 10. P. 49-53.

- The most acute problem of the gap between the need for psychological help and the demand for it is characteristic of adolescents facing victimization within the home/study space and suicidal behaviour.

- The author's three-component model of adolescent treatment (as a social need - action - practice) was validated, which allows us to use it as a theoretical and methodological basis for subsequent empirical research within the framework of the sociology of mental health.

Chapter 1: SPECIFICS OF THE STUDY OF ADOLESCENTS AS ACTORS OF PSYCHOLOGICAL HELP-SEEKING

1.1 Assistance for adolescents in the legal and institutional framework of the Russian Federation

The normative and legal boundaries of adolescence

The definition and conceptualization of the research object of this thesis should begin by drawing the normative-legal and institutional-methodological boundaries of contemporary Russian adolescents. First of all, it should be noted that, according to the 1989 UN Convention on the Rights of the Child, which was ratified by the Supreme Soviet of the USSR in 1990, a child is "every human being below the age of 18 years, unless under the law applicable to the child, majority is attained earlier"[46] . Also, in the Russian Federation is the 1998 law "On Basic Guarantees of the Rights of the Child in the Russian Federation", according to which a child is "a person until he or she reaches 18 years of age (majority)"[47] . The Family Code of the Russian Federation of 29.12.1995 repeats the definition of a child given in the law "On Basic Guarantees of the Rights of the Child in the Russian Federation"[48] . A child has rights from birth, and upon reaching certain ages, the range of rights expands, as does the range of responsibilities. For example, at the age of 14, a child's incomplete legal capacity begins. It includes the expansion of rights: the consolidation of copyright, independent disposal of income, the right to open personal bank accounts, etc. In addition, in 2023, the President of Russia

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[46] UN Convention on the Rights of the Child // Legal Information System "Legalact". URL: https://legalacts.ru/doc/konventsija-o-pravakh-rebenka-odobrena-generalnoi-assambleei/ (date of reference: 02.04.2024). 20.11.1989; entered into force for the USSR in 15.09.1990 // ConsultantPlus: reference legal system. - Regime access: http://www.consultant.ru/document/cons_doc_LAW_9959/. - Downloaded from the screen.

[47] Law of the Russian Federation "On Basic Guarantees of the Rights of the Child in the Russian Federation" of 24.07.1998 No. 124 // Collection of Legislation of the Russian Federation.

[48] "Family Code of the Russian Federation: of 29.12.1995 N 223-FZ (ed. of 31.07.2023). // Rossiyskaya Gazeta. 2023 г. №171.

signed a law that allows adolescents over the age of 14 to be officially employed in their free time without the consent of the guardianship authorities[49] .

Also, at this age comes the consolidation of responsibilities: obtaining a passport of a citizen of the Russian Federation[50] , the obligation to work in good faith, to observe labour discipline (part 2 of article 21 of the Labour Code of the Russian Federation), etc. Also, a child of 14 can be held criminally liable for the most serious offences[51] . Nevertheless, it is necessary to return to the concept of "adolescent" and designate the age limits within which it is acceptable to consider this concept.

As such, adolescence has several key points around which transitional boundaries are set. For example, there is the concept of 'teenager', which derives its name from the 'teen' part: it is applied to ages 13-19 in English. According to this concept, adolescents can be considered to be people between the ages of 13 and 19. According to Presidential Order No. 234-rp of 15.07.2022, according to the content of the document, adolescents are considered to be persons between the ages of 10 and 18[52] ; thus, the lower boundary is shifted. It should be noted here that the movement of age boundaries is not a new phenomenon; they are mobile and can change. For example, in the Resolution "On the main directions of youth policy in the Russian Federation", 14-30-year olds were considered to be youth, and in 2020 the State Duma approved raising the youth age to 35[53] .

The methodological work from the Ministry of Justice of the Russian Federation also clarifies the intermediate boundaries within adolescence: younger adolescence (12 to 14 years) and older adolescence, also defined as early adolescence (15 to 17 years).

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[49] Law of the Russian Federation "On Amendments to Article 63 of the Labour Code of the Russian Federation" dated 13.06.2023 Rossiyskaya Gazeta. 2023 г. № 132(9077).

[50] ""Decree of the Government of the Russian Federation "On Approval of the Regulations on the Passport of a Citizen of the Russian Federation, a sample form and description of the passport of a citizen of the Russian Federation" from 08.07.1997 № 828 // Official Internet Portal // Official Internet Portal

[51] "Criminal Code of the Russian Federation from 13.06.1996 N 63-FZ (ed. of 25.12.2023) // Rossiyskaya Gazeta. 2023 г. №115.

[52] Order of the President of the Russian Federation from 15.07.2022 № 234-rp "On allocation of funds from the Reserve Fund of the President of the Russian Federation to the Ministry of Education of Russia" // Website of the President of Russia. URL: http://www.kremlin.ru/acts/bank/48105 (date of access: 02.04.2024)

[53] Federal Law of 30 December 2020 N 489-FZ "On Youth Policy in the Russian Federation" // Rossiyskaya Gazeta - Federal Issue: No. 1(8352)

However, the book notes that there are other variations in the definition of adolescence: from 10 to 19 years[54] . At the same time, adolescent boundaries can also be defined in certain spheres: for example, the age boundaries of 10-14 years and 15-17 years are used in education and medical practice to define adolescence.[55] It should also be noted that depending on the country and legislation, as well as on areas of social life, different boundaries may be used to define adolescence. Nevertheless, based on all these variations of age boundaries, the general boundaries of the age of a child-child can be set from 10 to 18 years of age (the age of majority and full legal capacity).

Areas of systematic work with Russian adolescents

To understand the empirical problem of this dissertation, it is necessary to contextualize the social processes and institutions in which systemic socio-psychological work with contemporary Russian adolescents takes place. By this work we mean external assistance aimed at creating a favorable microclimate in the family and micro-society in which the adolescent develops, eliminating negative influences from the significant environment and difficulties in relationships with society, as well as assistance in professional and personal self-determination[56] . The effectiveness of this work with minors is a sensitive indicator not only of the general well-being of the social state in the current historical period, but also of its global prospects[57] . Knowledge of specific mechanisms and tools of work, actual national specifics and the subject field as a whole is important both for theoretical conceptualization of the author's model and for the formation of the empirical research toolkit. In particular, it is necessary to form a common understanding of this phenomenon in the modern socio-political discourse of Russia, categorization of target "risk groups" (social characteristics of adolescents that

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[54] Start to adulthood: Adolescents (14-18 years old) about their rights, duties and responsibilities / author-companion. E. V. Gorbacheva, ed. by A. V. Fedichev. Moscow: FBU NTPI under the Ministry of Justice of Russia, 2016. 176 с.

[55] From what age to what age a person is considered a teenager. Online information magazine fsnslnr.su. URL: https://fsnslnr.su/faq/s-kakogo-do-kakogo-vozrasta-celovek-scitaetsya-podrostkom (date of reference: 02.04.2024)

[56] Dubrovina, L. A. Social and psychological work with children and adolescents at risk: textbook / L. A. Dubrovina, I. R. Sorokina; Vladimir State University named after A. G. and N. G. Stoletov. A. G. and N. G. Stoletov. Vladimir: Izd-v VlSU, 2022. P. 42.

[57] Kokorenko V. L. Social work with children and adolescents: textbook for students of institutions of higher vocational education / V. L. Kokorenko, N. Y. Kuchukova, I. Y. Margoshina. Y. Kuchukova, I. Y. Margoshina. Moscow: Publishing Centre "Academy", 2011. P. 10

predetermine priority attention to them), the variety of social institutions, bodies, services and services involved in systemic work to protect the socio-psychological well-being of adolescents.

When working with adolescents, there are certain rules that are adhered to by specialists of various profiles: psychologists, teachers, social workers, medical workers, etc. Due to their age and puberty (the transition between childhood and adulthood), adolescents have peculiarities that require different strategies of behaviour and work with them. In modern Russia, public interests in relation to adolescents, ensuring their well-being, and continuous support are defined both by various normative-legal acts and normative-methodological documents, which can include methodological recommendations formed within the framework of public activities to work with adolescents.

It is fair to say that supporting adolescents is a key national interest, which is confirmed by projects, research and the active involvement of both adults (specialists, teachers, parents) and adolescents themselves in the discussion and formation of an adolescent-centred environment. According to Rosstat data, as of 1 January 2023, the number of adolescents aged 14-17 living in the Russian Federation was estimated at 6,352,664 [58] . Thus, adolescents represent a large, socially significant group, and comprehensive institutional work with them has become one of the federal priorities in the field of social, educational and family policy in the Russian Federation. Perhaps the key role in the implementation of this mission was played by the strategic programme "Teenagers of Russia" of the Presidential Commissioner for Children's Rights within the framework of the National Project "Education" supported by the President of the Russian Federation V.V. Putin and the Ministry of Education of the Russian Federation. Putin and the Ministry of Education of the Russian Federation. The key objectives of this programme are to consolidate practical knowledge about adolescents and form a professional community of adolescent specialists, to raise the level of parental

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[58] Population of the Russian Federation by sex and age as of 1 January 2023. Federal State Statistics Service

competence on adolescent issues, and to support and develop children's public associations.

For this programme, it is worth mentioning the significant contribution of sociological methods and applied empirical research capabilities. In particular, the author of this dissertation took an active part in the design, conduct and summarization of the federal sociological research "Adolescents 360°" in June-November 2022, organized by the ANO Centre for the Development of Social Projects together with the Sociological Clinic for Applied Research and the Resource Centre "Centre for Applied Sociology" of St. Petersburg State University. With a sample of more than 300,000 respondents, it became the largest national sociological study on adolescents: more than 130,000 adolescents, more than 120,000 parents of adolescents, more than 40,000 teachers and more than 40,000 specialists in working with adolescents took part in it. The research helped to formulate a comprehensive approach to solving the social problems of adolescents in the Russian Federation, and its results formed the basis for the programme of federal forums. In particular, the results of the study were widely discussed at the All-Russian Forums " Adolescents 360°" in St. Petersburg (28-29 June 2022), Vladivostok (25-26 August 2022), Novosibirsk (12-13 October 2022), Moscow (29-30 November 2022), and Moscow (29-29 November 2022).), Moscow (29-30 November 2022), Teenagers 360 online forum (22-23 December 2022), RosPodros All-Russian Teen Rally (15-18 August 2023) and RosPodros forum in Moscow (6-7 December 2023).

The strategic programme " Adolescents of Russia" also actively develops methodological recommendations on working with different groups of teenagers: teenagers with destructive behaviour, on organizing the activities of street social work services with teenagers, etc. In addition to methodological recommendations for specialists working with adolescents, brochures and recommendations are also produced for adolescents and their parents. These include, for example, information and visual materials and leaflets for students on preventing involvement in addictive (addictive) behaviour and preventing risky, destructive and autodestructive behaviour among

minors[59] . It is important to understand that parents of adolescents are also explained the principles of ethical interaction with adolescents, strategies to prevent risky behaviour, since adolescence is a period when adolescents are exposed to many risks: from the environment (family, friends), in school, on the street, etc. Both adolescents and their parents are made aware of the contacts that can be used in a difficult situation (among them, for example, are helplines and the addresses of teenage centres). In turn, the statistics of calls to the helplines also show that the problem of child-parent relations remains one of the key requests (in 2020, 30% of calls from children/adolescents will be from children and adolescents). - 30% of calls from children/adolescents and 67% from parents of adolescents)[60] .

In addition, formats for consolidating the efforts of various specialists in assisting adolescents in the concept of "adolescent centres" are being actively developed. For example, the Federal Centre for the Development of Adolescent Socialization Programmes of the Federal State Budgetary Institution "Centre for the Protection of Children's Rights and Interests", the main purpose of which is to "disseminate and introduce positive experience in the socialization of adolescents aged 10 to 18 years". The Centre uses the practice of bringing together resource sites specializing in methodological, educational, practical or other activities related to the development of a system of work with adolescents aimed at their socialization. Prospects for the development of adolescent centres in the Russian Federation were also discussed in the Public Chamber of the Russian Federation, with the participation of representatives of the Office of the Presidential Commissioner for Children's Rights, the Federal Adolescent Centre, participants and winners of the All-Russian Competition of Adolescent Socialization Programmes, and heads of adolescent centres on 23 August 2023[61] . It is important to note that, as in the strategic programme "Adolescents of Russia", this

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[59] Methodological recommendations for minors, parents (legal representatives) of minors, information and visual materials, leaflets for students on prevention of involvement in addictive (addictive) behaviour, prevention of risky, destructive and autodestructive behaviour of minors. 11 June 2022. Ministry of Education of the Russian Federation

[60] Kuchmaeva O. V. V., Davletshina L. A. Characteristics of the availability of psychological help for children and their parents (according to the activities of the children's helpline) // University Bulletin. 2023. № 10. P. 241.

[61] The Public Chamber of the Russian Federation discussed the creation and prospects for the development of teenage centres in the country // Federal Teenage Centre. 24.08.2023. URL: https://xn--b1adeawvbbbfnhgog5d9dg.xn--p1ai/tpost/ova9i1nl11-v-obschestvennoi-palate-rf-obsudili-sozd (date of access: 02.04.2024)

discussion also actively voiced the need to speak to adolescents in their language, pay attention to their ideas, use the principle of inclusiveness and, crucially important in the context of this work, provide psychological help and support. By the end of 2023, 35 adolescent spaces operating in the Teenagers of Russia network had been opened.

A similar federal programme, also implemented in 2023 by the Office of the Presidential Ombudsperson for Children's Rights, was the strategic programme "A Country for Children"[62] . State and public efforts, implemented through the foundation of the same name, were also aimed at providing social, humanitarian, psychological, rehabilitative and other forms of assistance to children in need, families with children and children's organizations. Among the many beneficiaries of the foundation, a special group was made up of teenagers, whose work was carried out within the framework of the projects "Federal Children's Public Council", "After Tomorrow", as well as the charity events "Childhood Safety" and "Children in Hands".

In general, it can be noted that the institutionalization of comprehensive work with adolescents and the provision of various forms of assistance to them at the federal level has contributed to the emergence of regional voluntary initiatives. Since 2022 (the start of the Adolescents of Russia programmes), there has been an increase in research interest aimed at providing information and methodological support for applied "adolescent work" as a separate category of child protection in the Russian Federation. These areas of work also included the improvement of socio-psychological services for target groups of adolescents, assistance in their socialization and prevention of deviant behaviour, which required the development of forms of interaction between adolescents and mental health specialists. However, the variety of services and whole institutions of psychological help available to adolescents was formed long before the emancipation of adolescents as a separate area of systemic work.

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[62] Report on the implementation of the strategic programme "A Country for Children" for 2023 // Commissioner under the President of the Russian Federation for Children's Rights. URL: https://deti.gov.ru/Deyatelnost/documents/270 (date of access: 02.04.2024).

The system of psychological help for adolescents in the Russian Federation

Psychological work with adolescents, as emphasized earlier, is currently one of the Russian Federation's public priorities in the sphere of maintaining the well-being and protection of children and their rights. In a broad sense, it can be both specialized (e.g., aimed at specific categories of adolescents, such as adolescents with delinquent behaviour) and general, aimed at any adolescent who does not exhibit risky behaviour. The work of psychology specialists with adolescents in Russia today takes various forms, among which the following institutional groups can be distinguished:

- *Psychological assistance to adolescents in the state health care system of the Russian Federation.* First of all, it includes state federal/municipal health care institutions providing psychological/psychiatric services free of charge, including to adolescents aged 14-17. In addition to specialized mental health care institutions, from 2022 the services of "medical psychologists" also function within the framework of polyclinic work[63] .

- *Public services of face-to-face psychological assistance to adolescents.* Within the structure of this institution, it is possible to identify regional budgetary institutions and public foundations specializing in the provision of both comprehensive and individual social and psychological services to adolescents in the formats of face-to-face visits or inpatient placement. For example, among St. Petersburg institutions, this institute can include the City Centre for Social Programmes and Prevention of Antisocial Phenomena among Youth "KONTAKT"[64] or the Free Psychological Assistance Office for St. Petersburg students and their family members organized by the Institute of Psychotherapy and Counselling "Harmony"[65] .

- *All-Russian remote assistance services for adolescents.* This institution is represented by state and public projects aimed at providing emergency psychological and

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[63] Order of the Ministry of Health of the Russian Federation from 14.10.2022 № 668n "On Approval of the Procedure for the provision of medical care for mental disorders and behavioural disorders" // Official Internet portal of legal information. URL: http://publication.pravo.gov.ru/Document/View/0001202211140024 (date of reference: 02.04.2024).

[64] St. Petersburg State Budgetary Institution "City Centre for Social Programmes and Prevention of Antisocial Phenomena among Youth "CONTACT" // URL: https://profcenter.spb.ru/ (date of access: 02.04.2024).

[65] Harmony Institute of Psychotherapy and Counselling // Harmony Institute URL: https://inharmony.ru/ (date of access: 02.04.2024).

psychiatric assistance to children and adolescents in the format of helplines. In particular, it is worth mentioning here the "Children's Helpline" of the Foundation for the Support of Children in Difficult Life Situations (established by the Ministry of Labour and Social Protection with a presidential decree of 2008[66]), "children's helplines" on the basis of certain scientific, educational and psychological centres (Moscow Psychological and Pedagogical University, the St. Petersburg public organization for the harmonious development of the family and personality "RADOMIRA" Centre, the Institute of Psychotherapy and Counselling "Harmony", etc.), and, for example, the Institute of Psychotherapy and Counselling "Harmony",

- *Online psychological counselling services for adolescents.* The services of this assistance institute specialize in organizing low-threshold anonymous online counselling for adolescents in various life situations. Examples of such services include the website of psychological help for teenagers "PomoschRyadom.rf" organized by the NGO "Doctors for Children"[67] , the online chat room for teenagers and young people "YOUR TERRITORY.ONLINE"[68] , the website of the Free psychological support for people under 20 years of age who have faced sexualized violence from the ANO "You will be believed", the anonymous chat room for teenagers "We are near - online" on the basis of the Children's City Polyclinic No. 148 in Moscow[69] and others.

- *Psychological service in the educational system of the Russian Federation.* As part of this area of work, the position of a teacher-psychologist ("school psychologist") has been introduced in institutions of secondary and secondary vocational education in the Russian Federation, to whom adolescent students can turn. Such specialists can detect the risks to which an adolescent is exposed in time and react to them promptly: they can help the adolescent directly or, if the adolescent's problem is beyond his or her capabilities and competences (for example, prolonged work with a psychotherapist or psychiatric help is

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[66] Decree of the President of the Russian Federation "On the creation of a fund to support children in difficult life situations" of 26.03.2008 No. 404 // Rossiyskaya Gazeta. 2008 in the edition of 12.11.2021.
[67] Psychological help to teenagers "Help.rf" // MPO "Doctors for Children" URL: https://pomoschryadom.ru/ (date of access: 02.04.2024).
[68] YOUR TERRITORY.ONLINE: psychological help to teenagers and youth daily // YOUR TERRITORY URL: https://xn--b1agja1acmacmce7nj.xn--80asehdb/ (date of access: 02.04.2024).
[69] MyRYADOM.ONLINE: Anonymous psychological help to children and teenagers // MyRYADOM.ONLINE URL: https://xn--d1apbhi9d3a.xn--80asehdb/ (date of access: 02.04.2024).

needed), they can refer the adolescent and/or his or her parents to a municipal institution for psychological help. Thus, already in the educational environment, adolescents can expect to receive professional psychological assistance on request. The functioning of this institution and the improvement of the quality and accessibility of the assistance it provides is supported by the Federal Coordination Centre for the provision of psychological services in the educational system of the Russian Federation[70] .

• *Psychological assistance within the framework of adolescent centres*. These were partially mentioned earlier, but it should be noted here that adolescent centres, in addition to providing psychological help to adolescents and/or their parents who seek it, also organize other activities to work with adolescents. Such activities can be competitions (local, city, national), round tables, practices, individual mentoring projects, etc. Among the bank of successful practices that are published on the RosPodros website[71] , there is a wide range of successfully implemented cases aimed at working with different categories of adolescents. Thus, teenage centres are singled out as a separate institution of psychological assistance due to the peculiarity of their work as a "third place", a special and safe teenage space where teenagers can receive, among other things, qualified psychological assistance.

• *Other outreach services for adolescents*. These refer to various community-based organizations that provide a wide range of support services to adolescents, without directly counselling or providing therapy. Activities and programmes within the framework of this work are of different nature: they include, according to the same bank of practices listed on the RosPodros resource (ANO Centre for the Development of Social Projects), both the opening of spaces for adolescents[72] , the organization of creative leisure activities[73] , and municipal programmes. The work of this institute is aimed at

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[70] Order of the Ministry of Education of the Russian Federation of 25 December 2018 № 340 "On the Coordination Council of the Ministry of Education of the Russian Federation for the development of psychological services in the education system" // Document Bank. Ministry of Education of the Russian Federation. URL: https://docs.edu.gov.ru/document/967be3e224ee3292b3a9c73f74f6369c/ (date of access: 02.04.2024).

[71] Bank of Effective Practices // RosPodros URL: https://rospodros.ru/bank (date of access: 02.04.2024).

[72] Anticafe "Klassnoe mesto" // RosPodros URL: https://rospodros.ru/anticafe (date of access: 02.04.2024).

[73] Project of the summer vocal school "Attic KOTOfonia" // RosPodros URL: https://rospodros.ru/kotofonya (date of access: 02.04.2024).

comprehensive protection of adolescents' well-being, increasing their "mental literacy" and encouraging them to seek psychological help from the institutions mentioned above.

- *Private sector of psychological services, including those provided to adolescents.* In the 2010-2022s there is a significant commercialization of the market of psychological services in Russia: for example, according to a joint study by the 2GIS company and the online psychological help service YouTalk, only in 2020-2022 the number of private organizations providing psychological services in Russian cities with a million inhabitants will increase by 36%[74] . Of course, adolescents can also be clients of these services. Current legislation sets the minimum age for children to see a psychiatrist without parental consent (15 years old)[75] , but there is currently no identical law for psychological help. The market of private psychological services in Russia is itself in an "amorphous" state, which does not allow, among other things, to assess the share of applications from adolescents, their requests to private specialists and the quality of the assistance provided[76] . This state of the sphere, which often includes not only qualified specialists, but also followers of esoteric and pseudoscientific practices, raises questions about the need for state regulation of this sector of services, especially with regard to underage clients. Proposals to regulate commercial services, standards of psychological work and psychological specialists in the Russian Federation, in particular, have been implemented in the draft federal law "On Psychological Assistance in the Russian Federation", compiled by specialists from Lomonosov Moscow State University and St. Petersburg State University[77] .

Thus, the system of psychological assistance to adolescents is represented by a whole complex of services of different organizational forms, areas of work and services provided in the sphere of protection of psychological well-being of adolescents. However,

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[74] The number of psychological aid organisations in Moscow has grown by 62% in two years // Forbes URL: https://www.forbes.ru/svoi-biznes/455341-cislo-organizacij-psihologiceskoj-pomosi-v-moskve-vyroslo-na-62-za-dva-goda (date of access: 02.04.2024).

[75] Law of the Russian Federation "On Amendments to the Law of the Russian Federation "On Psychiatric Care and Guarantees of the Rights of Citizens in its Provision" dated 04.08.2023 № 465 // Rossiyskaya Gazeta. 2023 г. № 175(9120).

[76] Kostromina S. N., Zinovieva E. V., Shaboltas A. V. Justification of the need to adopt a law on psychological assistance in St. Petersburg: analytical note // Vestnik of St. Petersburg University. Sociology. 2011. №4. P. 310.

[77] Project. Federal Law "On Psychological Assistance in the Russian Federation" // Psychological Newspaper URL: https://psy.su/content/files/zakonoproekt.pdf (date of access: 02.04.2024).

in addition to the descriptive characteristic and classification of the system, an important component of its analysis is the internal subjective assessment of its functioning. The mentioned institutes of psychological help are, first of all, specialists working in them and seeing their problems, demands and prospects of development of this system from inside. A significant contribution to the disclosure and analysis of their perspectives was made by a sociological study of specialists of Russian organizations working with adolescents, carried out within the framework of the above-mentioned research project "Teenagers 360°".

The purpose of this empirical study was to assess the availability and effectiveness of professional psychological assistance to adolescents in the regions of the Russian Federation. The author of this dissertation was also a member of the executors of the study, which was implemented in June-November 2022. The object of the study was employees of state and non-profit institutions providing psychological assistance to adolescents from 85 subjects of the Russian Federation. The research method was an online survey. The sample was spontaneous, filled in through targeted mailings, placing a link to the survey on the Internet resources of municipal and non-profit institutions, as well as by the "snowball" method within the community of specialists. The final sample totaled 3,995 respondents.

Since the results of the secondary sociological analysis are presented here, only the key results of the research, which are important for analyzing the system of psychological assistance to adolescents within the framework of this paragraph, are outlined. First of all, it was possible to assess the accessibility (the ease with which adolescents seek help) and efficiency (the effectiveness of adolescents' requests) of the professional assistance provided by the specialists of the institutions surveyed. According to the respondents, both criteria are slightly above average, but effectiveness is slightly inferior to accessibility: 6.56 points out of 10 for effectiveness and 6.79 out of 10 for accessibility. The distribution of organizations' efficiency scores is also presented in the heat map format in Figure 1 (grouping of the RF subjects by federal districts, the intensity of color reflects the increase in the level of efficiency of organizations).

Figure 1: Heat map of the effectiveness of professional psychological assistance to adolescents as assessed by specialists (N = 3,995, 85 subjects of the Russian Federation, online survey, 2022).

The distribution of "color load" demonstrates the presence of a territorial-medium factor of the quality of work of organizations providing psychological services to adolescents. Specialists from the Central and Ural Federal District assessed the availability and effectiveness of assistance provided in the regions as above average, while lower indicators were noted in the Far Eastern and North Caucasus Federal Districts. However, despite the existing gap in the quality of services, the overwhelming majority of respondents (76%) noted the development of a system of professional assistance to adolescents in their regions. The results of this assessment in the medium term (from 2020 to 2022) are presented in Figure 2.
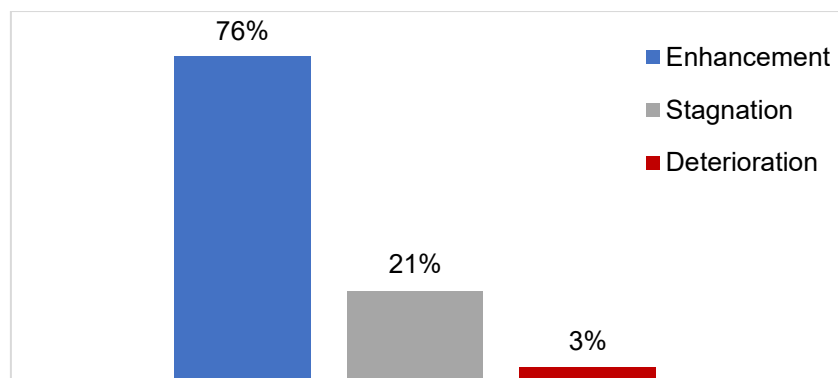

Figure 2: Dynamics of the development of the system of professional assistance to adolescents in the regions, as assessed by experts (N = 3,995, 85 subjects of the Russian Federation, online survey, 2022).

Among the key problems faced by the interviewed specialists, the most clearly traced was the shortage of colleagues - specialists in working with adolescents - in the

profession at the time of the study, as well as the shortage of adolescent centres to help adolescents belonging to vulnerable groups. Most often, according to the experience of specialists, teachers are the initiators of the teenager's request for psychological help, who draw attention to the difficulties experienced by the teenager before the teenager's parents. It is important to note that teenagers themselves, according to experts, apply for help less often or do not apply at all because they do not realize the need for professional psychological help.

Thus, in terms of the assessment of a number of questions in the questionnaire, the sphere of professional assistance to adolescents is experiencing a number of difficulties (the most acute of which is the lack of staff and resource sites). Specialists also noted that the most serious impact on work with adolescents, which primarily affects the effectiveness of assistance, is the lack of resources: both material and human. The reasons for the shortage of the latter resource - directly qualified specialists - can be explained both by the lack of a system for training specialists and by the uneven distribution of qualified personnel, who are concentrated, as a rule, within large cities and agglomerations. It is also impossible not to mention the problem of the lack of specialists' authority to work effectively with adolescents, which significantly limits the possibilities for a professional to provide assistance. According to respondents, the key to effective work that helps adolescents to achieve psychological well-being lies in the integrated efforts, co-operation of the actors of this system of social interaction: specialist, teacher and parents, as well as adolescents themselves and state and regional policy in general.

It is worth mentioning the information and methodological needs of the interviewed specialists: the results of the frequency analysis of this variable are presented in Fig. 3. In particular, the most pronounced need among professionals is the need to obtain up-to-date knowledge, modern approaches, and effective skills in issues related to working through the traumatic experiences of adolescents (59%). Understanding of these requests and the lack of competences among specialists themselves later became necessary in the factor analysis of actual requests from adolescents: an important condition for the functioning of the psychological counselling system is its ability to respond to the actual

requests of adolescents, in particular, those facing traumatic experiences. In general, the practice of psychological counselling requires the development of a scientifically based systematics of difficulties and problems in the lives of adolescents[78] . In addition, there is an information and methodological gap in working with other vulnerable groups of adolescents.

Thus, sociological research is one of the tools for comprehensive assessment of the system of psychological assistance to Russian adolescents. Their recommendations allow us to formulate key areas of work that can improve the effectiveness and quality of psychological services, both on the part of specialists and from the point of view of adolescents themselves, who are recipients of this help. The results of the author's study of adolescents' experience of seeking help and its key indicators are presented in detail in Chapter 3.
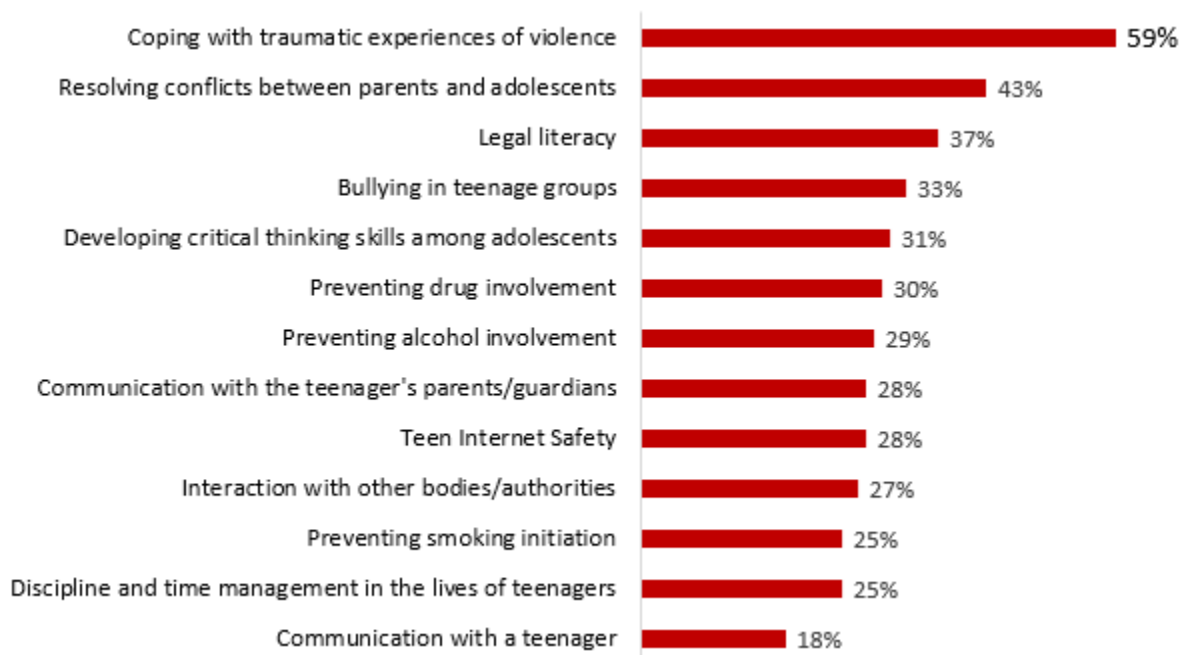
Figure 3: Information needs of specialists *("In your opinion, in what aspects of working with adolescents do you lack knowledge and skills?"*, N = 3,995, 85 regions of the Russian Federation, online survey, 2022).

At present, the normative and methodological analysis of psychological help to adolescents, their conceptualization as an object of methodological work and applied

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[78] Monina G. B. Psychological counselling of children and adolescents: textbook. St. Petersburg: Publishing house of St. Petersburg University of Management and Economics. 2011. P. 6.

research in the legal field of the Russian Federation, as well as the sociological analysis of this system from the perspective of specialists involved in its work, allow us to highlight the following conclusions necessary for conducting a sociological study of Russian adolescents' demand for professional psychological help:

- Professional psychological assistance to adolescents, whose age limits in the legal field of the Russian Federation are set in the range from 10 to 18 years, is currently an institutional priority. Both public policy efforts and private activities and the efforts of professionals working with adolescents are aimed at improving the psychological well-being of adolescents.

- The empirical boundaries of the object under study - Russian adolescents in the system of psychological help - seem to be important to establish within the boundaries of 14-17 years of age inclusive. Identical markers are also noticeable in institutional work with adolescents in the Russian Federation (in particular, within the framework of the strategic programme "Adolescents of Russia". In addition, the upper boundary of the object is determined by the age of majority and the entry into force of a different set of normative and legal mechanisms, while the lower boundary is determined by existing public initiatives, as well as normative regulation and ethical principles of minors' participation in sociological research.

- Despite the expressed federal priority, existing opportunities for adolescents to receive psychological help and the readiness of specialists to provide it, the perspective of adolescents themselves - their opinions, trust in mental health specialists and social patterns of seeking and receiving help - is not clear enough. The extent to which the system of psychological assistance in the Russian Federation as a whole meets the needs and demands of the target group is not fully understood. In addition, there is an urgent need to find measures and facilitators that can stimulate the demand for psychological help among Russian adolescents in need of it. In order to fill these gaps in understanding the place of adolescents in the existing system of psychological help, it is necessary to take a sociological look at the problem of adolescents seeking psychological help, including from the position of Russian adolescents themselves.

1.2 Conceptualizing adolescence and adolescents in sociological science

In this dissertation, the approach to the analysis of the central object of research - adolescents aged 14-17 - is implemented within the framework of the related branches of sociology of childhood and sociology of adolescence. For the purposes of this paragraph, it is important to distinguish between these disciplines and to identify the key possibilities of their application and limitations in the study of 14-17-year-old adolescents in Russia, the subject of which is their seeking professional psychological help. The meta-analysis of theoretical and methodological approaches to the study of adolescents presented below allows us to highlight the key features of the conceptualization of adolescents as a separate social group in sociological science. In addition, the review allows us to trace the genesis of this knowledge and the key stages of adolescent research in an interdisciplinary historical perspective.

According to the sociological dictionary by N. Abercrombie, S. Hill and B.S. Turner, the conceptualization of adolescents as a separate social group is a cultural product of the late nineteenth century[79] . The formation of the sociology of adolescence as an independent scientific field can be traced back to the first half of the twentieth century. This interdisciplinary branch focused on the biological, social, economic and psychological development of human beings between childhood and adulthood. The role of social scientists was to study the major aspects of adolescent development in the context of family and home, school, leisure and work activities, and interactions with peers and significant adults. Despite its proximity to psychological studies of adolescence, especially puberty, the sociological perspective occupied a niche in studying the macrostructures surrounding adolescents. Predominantly, this mission was to focus on the diverse social institutions that regulate adolescent behaviour in society: from society as a whole to individual functional institutions that perform educational, upbringing, preventive, socializing and health care functions. Thus, the study of

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[79] Abercrombie N., Hill S., Turner B. S. Sociological Dictionary: per. from Engl. M., 2004. P. 328-329

interaction between adolescents and the institute of psychological help also corresponds to the sociological tradition of research on young people.

Sociology of adolescence

J. Hall's 1904 interdisciplinary work[80] is considered to be the starting point that laid the foundations for an independent field of study of adolescence. Based on the German youthful idea of "Storm and Onslaught", J. Hall identified adolescence mainly with stress, risky behaviour and conflict[81] . The author paid special attention not so much to the psychological peculiarities of adolescent development as to the specifics of socialization experienced by the adolescent during the assimilation of social roles and learning, the first experience of growing up, and interaction with surrounding people. The ideas outlined by J. Hall were in many respects a convergence and consequence of the trends of his era, associated with the legislative separation of adolescent labour and education, as well as the separation of the period of childhood and adulthood in general. Hall's emphasis on the "problematic" nature of adolescence became the main trend in adolescent research throughout the 20th century.

However, the significance of the early stage of adolescent studies in the first half of the twentieth century also lies in the diversification of these emphases. In general, as a discrete stage in human life, adolescence finally stood out in the middle of the century, when the transition from childhood to adulthood became more transparent in socio-economic terms. Since the second half of the 1950s, scientists began to turn more often to the analysis not of education and labour, but of adolescents' free time - their leisure, cultural and socio-political activity. Nevertheless, the analysis of sociological studies of childhood in this historical period allows us to highlight their clear adult-dominant orientation and socio-political background in both domestic and foreign literature[82] .

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[80] Hall G. S. Adolescence: Its psychology and its relations to physiology, anthropology, sociology, sex, crime, religion and education. New York: D. Appleton, 1904. 615 p.

[81] Furstenberg F. F. The Sociology of Adolescence and Youth in the 1990s: A Critical Commentary // Journal of Marriage and Family. 2000. №62. P. 897.

[82] Filippova A. G. Childhood of the XXI century: socio-humanitarian thesaurus: thematic dictionary-guide / Ed. by S. N. Mayorova-Shcheglova. N. Mayorova-Shcheglova. Moscow: Izdvo ROS, 2018. P. 25.

The sociology of adolescence in the second half of the twentieth century in the primary analysis of its object was mainly based on the psychological works of E. Erikson, who demonstrated the key features of psychosocial development at this age and the formation of adolescent personality[83] . A prominent person of the sociological perspective in the study of adolescence was James Coleman. In his work "Society of Adolescents" he identified the specifics of their institutionalization as a separate social group in the educational process and stressed the importance of applied sociological research in solving the problem of educational inequality among adolescents[84] .

The relevance of adolescent research grew significantly in the 1980s against the backdrop of several trends at once. Firstly, a large-scale empirical study by O. Brim and J. Kagan, which demonstrated a weak correlation between early childhood experience and subsequent human development, had an indirect impact[85] . As a result, considerable attention of scientists turned to the adolescence period, which began to be regarded as an autonomous, independent stage in a person's life, rather than a continuation of early childhood and the attitudes and patterns of behaviour embedded in it. Secondly, the relevance of longitudinal sociological studies seeking to trace the influence of adolescence events on the subsequent social functioning of a person grew naturally. A pioneering work in this direction was the work of J. Elder, which proved the importance of considering separate age cohorts in studies of life trajectories[86] . The author managed to demonstrate not only the specificity of the genesis of values, life ideals and plans among adolescents of the 1930s, different from younger children, but also to emphasize the importance of the socio-historical perspective of studying adolescents, the significant role of the global historical context on their maturation and the success of their subsequent life.

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[83] E. Erikson E. Identity: Youth and Crisis = Identity: Youth and Crisis: translation from English / E. Erikson. Moscow: Progress, 1996. 344 с.

[84] Coleman J. S. The Adolescent Society: The Social Life of the Teenager and Its Impact on Education. New York: Free Press. 1961.

[85] Brim O. G. Jr., Kagan J. Constancy and change: A view of the issues. In Constancy and Change in Human Development, ed. O. G. Brim, Jr., J. Kagan. Cambridge, Mass: Harvard Univ. Press, 1980. 754 p.

[86] Elder G. H. Jr. Children of the Great Depression. Chicago: Univ. Chicago Press, 1974. 400 p.

Thirdly, a new direction of interdisciplinary research on adolescence emerged on the basis of the theory of ecological systems formed by Uri Bronfenbrenner, a child psychologist and foreign member of the Russian Academy of Education. His conceptual model, based on the ideas of Soviet scientist Lev Vygotsky, emphasized the importance of the ecological context - at the level of the micro-, meso- and exo-system - on the psychosocial development of the child[87] . The profound influence of this work led to the formation of an interdisciplinary field of study of child and, in particular, adolescent development, which integrated the results of psychological, pedagogical and sociological research. A key mission of the collaborative work has been to embrace the multifaceted social context in adolescent development, and to merge private social psychological approaches with structural approaches developed within sociological science[88] .

In particular, the result of extensive interdisciplinary research within the framework of the "ecology of human development" У. Bronfenbrenner's "ecology of human development" has resulted in a revision of the classic image of adolescence as an oppositional stage and culture. The established theses about the period of stress, storm, "storm and onslaught" traced in the works of J. Hall, Z. Freud and J. Coleman were often not reflected in the empirical reality of the 1980-1990s. In general, the harmony of family relationships surrounding adolescents began to be demonstrated by sociological studies more often than their conflictuality[89] . Thus, although patterns of adolescent conflict and problematic behaviour continued to dominate empirical research, their selective nature became evident, unsuitable for extrapolation to the entire sample of adolescents.

In the last decade of the twentieth century, research on adolescence reached its dawn, both in terms of the volume of empirical and theoretical work, and in the diversity of adolescent topics themselves, studied within sociology, demography and developmental psychology[90] . However, the most common position remained that of human development psychology in interdisciplinary research, later strengthened by the

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[87] Bronfenbrenner U. The Ecology of Human Development. Cambridge, Mass: Harvard Univ. Press, 1979. 352 p.

[88] Dornbusch S. M. The Sociology of Adolescence // Annual Review of Sociology. 1989. №15. P. 236.

[89] Conger J. Freedom and commitment. Families, youth, and social change // Am. Psychol. 1981. №36(1). P. 475-484.

[90] Furstenberg F. F. The Sociology of Adolescence and Youth in the 1990s: A Critical Commentary // Journal of Marriage and Family. 2000. №62. P. 896.

refined theory of W. Bronfenbrenner's "human ecology"[91] and J. Elder's "life course" paradigm[92] . As a result, the overwhelming majority of works of this period were interpreted more as psychological, studying the psychosocial development of adolescents in the context of the surrounding social systems[93] . In parallel with the increasing complexity of dynamic and multilevel models of adolescent development, the lack of methodological and empirical resources for data collection became apparent.

The need to cover private life trajectories of adolescents, or even individual cases that are difficult for quantitative sociological methods to reach, has led the latest research on adolescence in the twenty-first century to turn more often to qualitative and mixed methods. Such research projects, still conducted in the paradigm of human development and adolescent life trajectories, have gained popularity through successful integrated analyses of different contexts, longitudinal changes, and the ever-multiplying domains of adolescent life[94] . However, despite the significant role of sociologists in the holistic study of the role and life of adolescents in contemporary societies, it is observed that the rich tradition of sociology of adolescence has reached a methodological crossroads, if not a dead end[95] .

On the one hand, sociology's position in the study of adolescence in the new millennium is weakening against the backdrop of a changing scientific agenda in general. Questions about the relationship between human development and the growing digitalization and informatization of society, including at an early age, and the increasing complexity of human cognitive activity, are raising questions about the relevance of psychological and cognitive research. Such studies, in turn, may have a more appropriate methodological apparatus for studying primary changes in the lives of modern children and adolescents than classical sociological methods. On the other hand, sociology may

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[91] Bronfenbrenner U., Morris P. The ecology of developmental processes. In: Damon, W., Lerner, RM., editors. Handbook of Child Psychology. New York: Wiley; 1998. P. 993-1028.
[92] Elder G. H. Jr. The life course as developmental theory // Child Dev. 1998. №69. P. 1-12.
[93] Dornbusch S. M. The Sociology of Adolescence // Annual Review of Sociology. 1989. №15. P. 233.
[94] Giordano P. C., Longmore M. A., Manning W. D. Gender and the meanings of adolescent romantic relationships: a focus on boys // Am Sociol Rev. 2006. №71. P. 260-287.
[95] Crosnoe R., Johnson M. K. Research on Adolescence in the Twenty-First Century // Annu Rev Sociol. 2011. №37(4). P. 439-460.

retain a role in exploring the macro-social boundaries of these changes and the environmental conditions surrounding the dynamically changing lives of adolescents.

Moreover, since the beginning of the twenty-first century, the question has been raised as to whether the sociology of adolescence, increasingly merging with the psychology of adolescent development, is in principle fulfilling its applied mission. First, there has been a renewed interest in early childhood as a key stage of child development, which has led to a decline in scholarly interest in aspects of adolescent development. Second, the role of the sociological perspective in defining the very boundaries of adolescence is increasingly ambiguous. Still following the paradigm of developmental psychology, the sociological studies reviewed earlier often lacked any conceptualization of adolescence, its boundaries and theoretical and methodological foundations for studying adolescence as a separate object within the framework of sociological science. Thus, the boundaries of the object studied by sociologists were determined, if not by psychological tradition, then, rather, by institutional norms - categorization of "adolescents" in the legal field, educational and labour processes, programmes of social construction, etc. While maintaining a focus on "adolescent-oriented" theoretical models leads to withdrawal into the interdisciplinary or even psychological scientific field, it seems promising to focus on the theoretical and methodological foundations of modern sociology of childhood and sociology of youth.

Sociology of youth

In the context of the latter, it is worth mentioning the term "pre-adolescence", which traditionally refers to adolescents from 14-15 years old to the moment of coming of age. It was introduced by Russian sociologist Y. R. Vishnevsky, who, in his turn, was largely based on V. A. Yadov's ideas about the proximity of "age" studies and the ways of their separation[96] . On the one hand, Vishnevsky recognized the normative-institutional boundaries of childhood up to the age of 18, in particular, attempts to form a sociology

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[96] The Future of Sociological Knowledge and the Challenges of Social Transformations (on the 90th anniversary of V. A. Yadov's birth). [Electronic resource]. International scientific conference (Moscow, 28-30 November 2019). Collection of materials / Edited by M. K. Gorshkov; FNISC RAS. - M.: FNISTS RAN, 2019. P. 18.

of "teenagers" in foreign science[97] . On the other hand, this same age group has long been in the attention of youth theorists, as well as normative-legal acts of implementation of youth policy of the Russian Federation: for example, the "Fundamentals of the State Youth Policy of the Russian Federation for the period up to 2025" declare the established boundaries of youth from 14 to 30 years (in some cases - up to 35 years[98]) and 14-35 years - in the Federal Law "On Youth Policy of the Russian Federation"[99] . Therefore, according to Y. R. Vishnevsky, the attention of his colleagues to the social group of adolescents is quite justified and allows solving the problem of the gap between the sociology of childhood and the sociology of youth.

The significance of the social group of pre-adolescents, therefore, lies in their imminent entry into the "adult" youth population. There are a number of conditions for successful transition to adulthood. Of course, this stage in the life of adolescents is connected, first of all, with the process of socialization, assimilation of social norms, rules and skills. In addition, pre-school youth are already beginning to plan their educational and career trajectories. The importance of civic and political socialization of adolescents should be noted separately: their socially responsible behaviour and attitudes to pro-social activities are developing. The expected result of these processes is the formation of an intermediate age group, successfully prepared for adulthood and socially significant functions of youth in the social system.

The obvious similarity of this adult-dominant perspective to the early concepts of sociology of childhood, it should be noted, leads to the same ethical and legal dilemmas as J. Hall's sociological tradition. The primacy of structural functionalism relegates pre-school youth to a "subordinate" community, deprived of its own views, opinions, interests, "subjectivity" and once again becoming an object of socialization, preparation for adulthood and assimilation of the culture of the older generation of youth. Against the

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[97] Ibid.
[98] Order of the Government of the Russian Federation of 29.11.2014 N 2403-r "On Approval of the Fundamentals of the State Youth Policy of the Russian Federation for the period up to 2025" // Website of the Government of Russia. URL: http://government.ru/docs/all/93887/ (date of access: 02.04.2024
[99] Law of the Russian Federation "On Youth Policy in the Russian Federation" of 30.12.2020 № 489 // Rossiyskaya Gazeta. 2021 г. № 1(8352).

background of the spread of child-centred concepts in modern science, the development of juvenile legislation and the phenomena of expanding the boundaries of childhood, the concept of "pre-youth" may not withstand criticism from the more widespread, popular concepts and trends in the sociology of childhood. In addition, this concept is not reflected in related fields, such as demographic research or social work with young people, whose lower boundary is much more often defined by adulthood. Thus, Y. R. Vishnevsky himself recognized that researchers' interest in adolescents "entering adolescence" continues to be insufficient[100] .

Sociological theories of childhood

The classical paradigm of the sociological perspective on childhood is the categorization of children and adolescents as objects of socialization by adults. In other words, children are presented as objects of structural influence exerted by the social system rather than as its independent actors. In particular, such a focus of studying childhood originated and was traced in the sociological works of T. Parsons and S. Eisenstadt [101] . The departure from this tradition was a consequence of both the institutional transformation of childhood at the end of the 20th century, changes in the legal framework with regard to minors, and, probably, a consequence of the constructivist influence in sociology, the desire for an autonomous study of social groups, reconstruction of their role in the social structure of society. Domestic representatives of the sociocultural approach, represented by Igor Kon and Eleonora Kurulenko, also had a significant influence on the development of sociological theories of childhood. In particular, they focused on adolescent culture and subcultures that are autonomous and alien to adults[102,103] . In terms of cultural studies and sociological constructivism, the social culture of adolescents was created not by older generations, but by adolescents themselves: identities, practices, symbols, discourses, values, norms and social attitudes

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[100] Vishnevsky Y. R. Youth how many and what reference points of youth policy // Youth and Youth Policy. M.: Econ-Inform, 2019. P. 244.

[101] Sociology of Youth / Edited by Prof. V.T. Lisovsky. St. Petersburg: Publishing house of St. Petersburg University, 1996. 113 c.

[102] Con E. P. Childhood as a social phenomenon // Journal of Social Policy Research. 2004. № 2. P. 151-174.

[103] Kurulenko E. A. Childhood as a socio-cultural phenomenon // Izvestia Samara Scientific Centre of the Russian Academy of Sciences. Social, humanitarian, medico-biological sciences. 2012. № 2-3. P. 838-844.

that they construct. Thus, adolescent reality was becoming a new object of sociological interest, whose value did not lie in the study of "successful socialization" and the assimilation of structural norms necessary for adult functioning in the social system.

This direction of "constructing" childhood as an autonomous scientific field, for example, was also developed in the sociological theories of "disappearance of childhood"[104] and "childhood without childhood" (N. Postman). In the authors' works, "childhood" as the initial period of human life is constructed not by clear age boundaries, but by the older generation. Adolescents, in their turn, become an intermediate quasi-group between children facing "early adulthood" and adults, increasingly experiencing infantilization after coming of age. S. N. Mayorova-Scheglova has been actively engaged in testing these approaches in the Russian sociology of childhood. N. Mayorova-Shcheglova and S. Yu. Yu. Mitrofanova[105] , who established a similar paradox of the blurring of the boundaries of childhood in Russian society[106] .

However, an indirect result of this deconstruction of the social boundaries of childhood and adolescence may also be expressed in doubts about the very social nature of the adolescent community and its in-group integrity. The growing diversity of adolescent practices and subcultures, as well as the stretching social boundaries and distances between adolescents and, for example, pre-adolescent adults and children, could lead to a similar methodological crisis, which was previously addressed in the review of sociological and psychological theories of adolescence. Thus, the only valid instruments for the institutionalization of adolescence appear once again to be the normative legal acts and methodological dispositions created within the framework of social policies and work with children of this age. Nevertheless, this trend does not lead to a devaluation of sociology's role in the study of childhood and adolescence, but to a transformation of its theoretical and methodological principles. While the boundaries of the social object under study are indeed set mainly by institutional and normative factors, the mission of

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[104] Postman N. The Disappearance of Childhood. New York: Vintage Books, A Division of Random Houses, 1994. 177 p.

[105] Mayorova-Shcheglova S. N., Mitrofanova S. Yu. Early adulthood or infantilisation: the paradox of events of modern childhood // Vestnik of St. Petersburg University. Sociology. 2020. № 1 (13). P. 25-39.

[106] Mitrofanova S. Yu. Paradoxes of the space of childhood // Samara University Herald. History. Pedagogy. Philology. 2007. № 1 (51). P. 32-40.

sociologists has become to interpret the phenomena of childhood and adolescence comprehensively, to emancipate this life stage as a separate object of interest for science and society, and to develop applied recommendations reflecting the interests and needs of children and adolescents themselves.

These tasks became the basis of the "new sociology of childhood" - a branch of sociology that "introduces an explanation of the phenomenon of childhood as an important part of the social structure of society, and of children as a group included in a system of social relations, participating in organized activities and interacting with other communities"[107] . The originators of the paradigm of the new sociology of childhood are James Garbarino and Jens Kvortrup. J. Garbarino's ideas created opposition to the traditional structural-functional approach to childhood, which views it mainly as a stage of ongoing socialization and preparation for adulthood[108] . Despite the fact that in the classical "agent-structure" dichotomy the actorness of minors was limited, G. Garbarino called for "scientific" emancipation of this social group and facilitation of the study of its own interests and needs in isolation from the demands and frames dictated by the institutions of family, education, the state as a whole, etc. Й. Kvortrup, in turn, expanded the understanding and recognition of children as separate actors of the social system, interacting with other agents carrying out their own practices. Thus, and the phenomenon of socialization, previously presented as a one-way structural influence, needs to be seen as a mutual complex process, without forgetting the importance of studying the children's perspective[109] .

Perhaps one of the main methodological achievements of the new sociology of childhood can be considered to be the application of a "participatory"/participatory approach to sociological research[110] . Its significance lies in the active involvement of the

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[107] Childhood of the XXI century: socio-humanitarian thesaurus: [thematic dictionary-reference book] [Electronic resource] / Ed. by S. N. Mayorova-Shcheglova. N. Mayorova-Shcheglova. Moscow: Izd-vo ROS, 2018. P. 18.
[108] Garbarino J. Can American families afford the luxury of childhood? // Child Welfare: Journal of Policy, Practice, and Programme. 1986. №65(2). P. 119-128.
[109] Qvortrup J. Childhood as a Social Phenomenon an Introduction to a Series of National Reports // Eurosocial report. 1991. 36 p.
[110] Childhood of the XXI century: socio-humanitarian thesaurus: [thematic dictionary-reference book] [Electronic resource] / Ed. by S. N. Mayorova-Shcheglova. N. Mayorova-Shcheglova. Moscow: Izd-vo ROS, 2018. P. 56.

perspective of children and adolescents themselves in the development of research design and methodologies, recognizing them as an important social subject for both research in the sociology of childhood and for changing social reality. This focus, which has found its application in other branches of sociology, closely echoes the theories of key sociologists of the turn of the XX-XXI century: J. Habermas' theory of communicative action[111] , P. Sztompka's theory of social change[112] , the conceptual role of "public sociology" in the ideas of M. Burawoy[113] . As a result, the use of "children's optics" in applied sociological research has come to be regarded as one of the main vectors of the new sociology of childhood, aimed at "emancipating" the voice of children and adolescents in contemporary institutional transformations, affecting, above all, their own interests, needs and markers of social well-being.

The active use of the participatory approach has also contributed to the development of specific methods and tools for sociological research. In particular, mechanisms for involving children in the development of quantitative tools and metrics, exploratory qualitative research of target groups of children and adolescents through interviews and focus groups have been improved. With the development of Internet-based questionnaire methods and their growing popularity, a promising embodiment of the participatory approach is the programming of tools "in the language of the respondents", the use of child-friendly and child-friendly questionnaire language, visual methods of communication with respondents and other techniques for reducing "respondent fatigue" aimed at ensuring comfortable, child-centred participation in research[114] . These trends have become means of increasing not only the loyalty of interviewees and taking into account their characteristics, but also the quality and validity of the data, and reducing the communication gap between children and the researcher.

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[111] Habermas J. Cognition and interest // Philosophical Sciences. 1990. № 1. P. 90- 97.
[112] Stompka P. Sociology of Social Change / Translated from English, ed. by V.A.Yadov. Moscow: Aspect Press. 1996. 416 c.
[113] Burawoy M. For Public Sociology // The Public Role of Sociology / edited by P. Romanov and E. Yarskaya-Smirnova. M.: OOO "Variant", TsPGI. 2008. P. 8-51.
[114] Childhood of the XXI century: socio-humanitarian thesaurus: [thematic dictionary-reference book] [Electronic resource] / Ed. by S. N. Mayorova-Shcheglova. N. Mayorova-Shcheglova. Moscow: Izd-vo ROS, 2018. P. 21.

It should also be noted that the paradigm of the new sociology of childhood, as well as the principles of the participatory approach, are among the most relevant and in demand in the contemporary Russian scientific environment. Perhaps the key Russian sociologist actively adapting these approaches is S. N. Mayorova-Shcheglova[115] , in whose works the use of the principles of the new sociology of childhood is a kind of mission of the researcher to facilitate the rights and voice of the child as a significant social subject[116] . Adherence to these principles can also be traced in the works of her colleagues: S. Y. Mitrofanova[117] , A. G. Filipova[118] , E. A. Kolosova[119] , M. M. Rusakova[120] , E. V. Shtifanova[121] , N. E. Rakitina[122] and others. The accumulated experience of applying the participatory approach in the Russian context increases both its research significance, consisting in the testing and development of a new perspective on the sociological study of the lives of children and adolescents, and its social and applied role in the development of institutional, legal and methodological changes that directly affect the interests, rights and well-being of children.

Thus, the above review of sociological approaches to the conceptualization and study of childhood and adolescence allows us to conclude that the most promising vector for the author's dissertation research is the paradigm of the new sociology of childhood. Firstly, its application - unlike earlier concepts within the sociology of adolescence - levelled out the weakness of defining the boundaries of the object under study from a

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[115] Shcheglova S. N. Sociology of Childhood. Moscow: Sotsium, 1996. 127 с.

[116] Mayorova-Shcheglova S. N. Children's rights to active participation in society: how a child can implement it through collective action // Proceedings of the interregional conference "Collective Action in Education" 7-8 April 2017, Samara. URL: http://

[117] Mitrofanova S. Yu. (Raz)fascination with the "participating" perspective of the sociology of childhood: the participating approach in the study of childhood and its critical reflection // Vestnik of N.I. Lobachevsky Nizhny Novgorod University. Series: Social Sciences. 2016. № 4(44). P. 167-177.

[118] Filipova A. G., Kupryashkina E., Mitrofanova S. Yu. Participatory research principle and field sociology for children // Universum: Social Sciences. 2016. №10 (28). P. 22-24.

[119] Kolosova E. A. Consumer behaviour of children of generation Z: age and territorial characteristics // Geography of childhood: interdisciplinary synthesis of research approaches and practices Materials of the international youth scientific school-conference. Editor-in-chief A.G. Filipova. 2018. C.118-122.

[120] Rusakova M.M., Odinokova V.A., Zakharova Y.P. Well-being and respect for the rights of orphans: a guide to conducting a survey of children and a report on a pilot study. St. Petersburg: ROO SPSBN "Stellit", 2015. 124 с.

[121] Mitrofanova S. Yu., Shtifanova, E. A. The role of information technologies and gadgets in the socialisation of children // Economics and Sociology. 2015. № 1. P. 18-24.

[122] Filipova A. G., Rakitina N. E. Urban "friendliness" to children: from inequality to participatory design of urban environment (on the materials of the cities of the south of the Far East): monograph. Vladivostok: Izd. of Far Eastern Federal University, 2017. 188 с.

sociological perspective and did not transfer it to the psychological plane. Leaving the definition of the boundaries of adolescence to normative and methodological dispositions, the new sociology of childhood, on the contrary, focuses mainly on empirical mechanisms of ensuring the "subjectivity" of adolescents in sociological research. Second, the implementation of the principles of the new sociology of childhood and the participatory approach ensures the novelty of the research, increased relevance and applied significance of the results. The methodological advantages of this paradigm, described earlier, allow us to take into account the opinions and needs of adolescents themselves at the stage of developing the tools, and the data collected can be used, among other things, to critically rethink the existing processes of providing professional psychological help to adolescents.

Third, the paradigm of the new sociology of childhood can serve as an umbrella for interdisciplinary research aimed at developing meta-disciplinary knowledge about childhood and adolescence. At present, childhood is recognized as a complex, multidimensional, biosocial phenomenon, inevitably affecting processes and phenomena belonging to related disciplines - sociology, psychology, pedagogy, epidemiology, etc.[123] . The role of the new sociology of childhood, therefore, is to accumulate methodological concepts and approaches for studying and interpreting the actual phenomena of childhood and adolescence from a "sociological perspective" [124] . Although the practices of adolescents seeking psychological help may look like the subject of psychological research, the new sociology of childhood - as well as the tradition of the sociology of mental health discussed earlier - occupies its own niche, quite specific and justified, in the architecture of knowledge on the problems of adolescent mental health. Fourth, the principles of the new sociology of childhood have already been reflected and recognized in contemporary Russian research on children and adolescents. Thus, it seems important both to ensure the continuity of Russian research in this paradigm and to further develop the sociology of mental health and to test its methods within the framework of new

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[123] Childhood of the XXI century: socio-humanitarian thesaurus: [thematic dictionary-reference book] [Electronic resource] / Ed. by S. N. Mayorova-Shcheglova. N. Mayorova-Shcheglova. Moscow: Izd-vo ROS, 2018. P. 14.
[124] Con E. P. Child and Society: Textbook for students of higher educational institutions. Moscow: Academy, 2003. C 68.

research fields: one of them is the sociological view of Russian adolescents' seeking professional psychological help.

Chapter 2: THEORETICAL AND METHODOLOGICAL BASIS IN STUDIES OF PSYCHOLOGICAL HELP-SEEKING

2.1 The role of sociology in studies of mental health

The sociological tradition of studying the use of psychological services by the population is based on the achievements, concepts and experience of a more extensive, absorbing branch - the sociology of mental health. Its key approaches, formed mainly in the second half of the 20th century, share the idea that mental health is not only a personal attribute of an individual, but a group quality, differentiated among social groups of different historical periods and societies. As a result, fundamental questions were raised about the relationship of various in-group attributes (sex and age, class, norms and values, culture in general) to the likelihood of both experiencing mental disorders and receiving some form of specialized care. A key mission of sociological research has been to show that a person's psychological and mental well-being is inextricably linked to more general aspects of their social life.

These include, in particular, the degree of social integration and inequality in society, systems of significant collective beliefs, and a person's belonging to certain social strata and strata. These research questions and hypotheses predetermined the emergence and mainstreaming of the structuralist approach, which presents mental health as dependent on the configurations of a particular social system. Emile Durkheim's Suicide[125] is recognized as the originator of this tradition - and of the sociology of mental health in general. Extensive empirical research of suicide rate in Europe at the end of XIX century allowed to formulate the first thesis that this phenomenon (as an extreme degree of manifestation of psychological distress) can be explained not only in psychological interpretations of its genesis, but also in sociological ones - in this case, by the nature of structural connections of a person with social processes and institutions of society. The

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[125] Durkheim E. Suicide: A Sociological Study / Per, from Fr. with an abridgment; Ed. by V. A. Bazarov. A. Bazarov. M.: Mysl, 1994.- 399 p.

work of E. Durkheim can be considered the first successful attempt to take the discussion of the problem of mental health of the population beyond the issues of psychology and psychiatry.

The subsequent "anti-psychiatric" movement for the formation of the sociology of mental health as a separate discipline of scientific knowledge developed already in the 1960s and 1970s. Thus, the works of Michel Foucault[126] , Erving Goffman[127] , Thomas Scheff[128] and Thomas Sass[129] gave impetus to the deconstruction of "mental disorders" as such, rejecting the biomedical model of understanding mental health and mental deviance, raising fundamental questions about their social genesis. Partly in contrast to the structuralist tradition of E. Durkheim, this milestone in qualitative constructivist research was characterized by a desire to hear the voice of the 'actors' of the social system. The role of the central object of research could be taken up both by individuals and social groups "labelling mental disorders" and by people suffering from various mental health problems. Perhaps the key significance of the constructivist tradition, inspired by the social construction of reality paradigm of P. Berger and T. Luckmann, lies in further strengthening the self-sufficiency of the sociology of mental health as a separate discipline that does not accept biological and psychiatric knowledge as proper[130] .

A compromise theoretical approach that combines recognition of the biological, objective nature of many mental disorders with moderate limits to social constructivism was developed by A. Horwitz and J. Wakefield and has been called harmful dysfunction (HD). Detailed in their book The Loss of Sadness: How Psychiatry Turned Ordinary Sadness into a Depressive Disorder, sociologists reaffirm the importance of social constructivism of mental disorders[131] . The same "sadness", which is considered by

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[126] Foucault M. History of madness in the classical era / Michel Foucault; per. from Fr. I.K. Staf. M.: ACT: ACT MOSCOW, 2010. 698 c.

[127] Goffman, E. Total Institutions: Essays on the Social Situation of Mentally Ill Patients and Other Inmates of Closed Institutions. Translated from English by A. Salin; ed. by A. Korbut. Moscow: Elementary Forms, 2019. 464 c.

[128] Scheff T. J. Being mentally ill: A sociological theory. Chicago: Aldine, 1966. 220 p.

[129] Szasz T. S. The myth of mental illness: Foundations of a theory of personal behaviour, 1961. New York: Hoeber-Harper. 337 p.

[130] Berger P., Lukman T. The Social Construction of Reality. A Treatise on the Sociology of Knowledge. Moscow: Medium. 1995. 323 c.

[131] Horwitz A. V., Wakefield J. C.. The loss of sadness: How psychiatry transformed normal sorrow into depressive disorder. New York: Oxford University Press, 2007. 287 p.

scientists in the most targeted way, is not initially something pathological and only becomes a category of "mental disorders" when the social environment and the system of norms recognize the manifestation of this feeling as inappropriate, abnormal or completely devalues and challenges its function in certain social situations[132] . However, what distinguishes the HD approach from early constructivism in the sociology of mental health is the impossibility of recognizing anything that is interpreted by society as pathology and unhealthy antisocial behaviour as a "mental disorder".

By the 2000s, the sociology of mental health was emancipated as a separate field of study of various issues in the field of psychological and mental health problems. The schematic position of this scientific knowledge, particularly that developed in this thesis, in relation to other scientific disciplines is depicted in Figure 4.
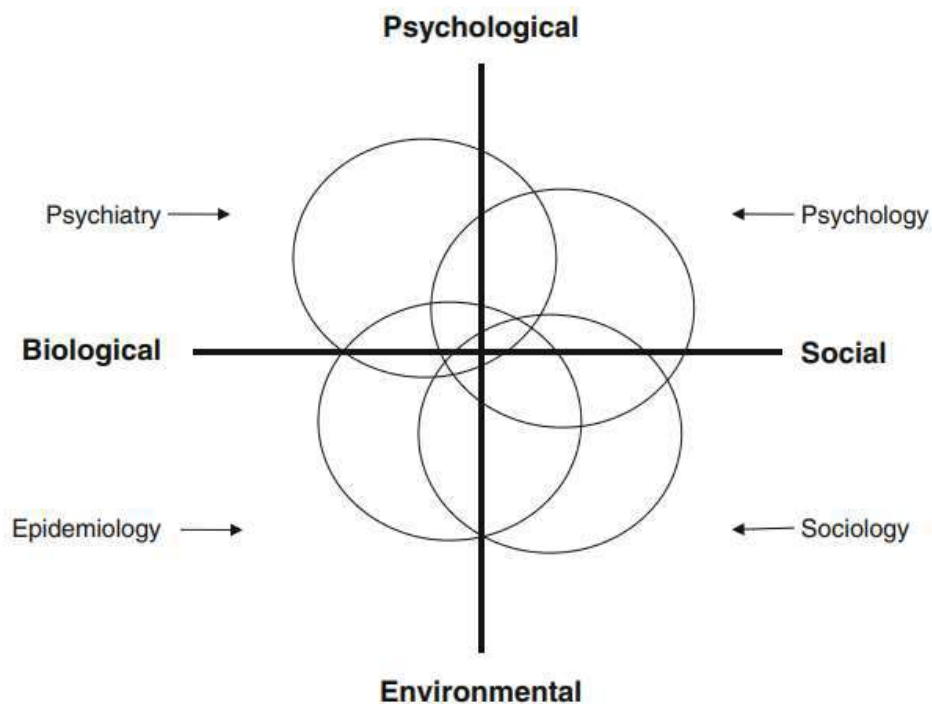
Figure 4. Main scientific disciplines studying mental health issues (biological, psychological, social, environmental)[133]

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[132] Wakefield J. C. The concept of mental disorder: On the boundary between biological facts and social values // American Psychologist. 1992. №47. P. 373-388.
[133] Aneshensel C. S. Mental Illness as a Career: Sociological Perspectives. In: Aneshensel C.S., Phelan J.C., Bierman,A. (eds). Handbook of the Sociology of Mental Health. Springer, Dordrecht, 2013. P. 117.

The significant role of sociology in the study of mental health and diseases of the population lies in the empirical study of social and environmental factors and phenomena of mental health, which are not covered by the methodological apparatus of other disciplines. Extensive sociological work in this direction is thus capable of both complementing the results of medical and psychological research and contradicting their conclusions. However, it is also possible to present independent, autonomous knowledge about mental health solely from a sociological point of view. In this case, it is important to take into account that not only the causes, but also the very nature of mental disorders and their experiences and treatment have an inherent socio-cultural specificity.

The genesis of the sociology of mental health is inextricably linked to the achievements of interdisciplinary research, which does not detract from the contribution of related sciences to the formation of its modern appearance. In addition to the legacy of Western research noted above, it is worth emphasizing the importance of the Russian scientific school in the development of sociology of health, particularly mental health. First of all, it is worth noting here the contribution of the St. Petersburg school of "social psychology of health" by I. N. Gurvich, established in the late 1990s of the XX century and developed within the framework of the sector of sociology of deviance and social control of the Sociological Institute of the Russian Academy of Sciences and the Department of Psychology of St. Petersburg State University [134]. Thus, under the leadership of I.N. Gurvich and a whole plead of his associates (M.M. Rusakova[135], V.A. Odinokova [136], R.G. Dubrovsky, N.A. Antonova [137], K.Y. Eritsyan [138], A.A. Yakovleva[139], etc.) the research of socio-psychological and social control was carried

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[134] Gurvich I. N. Social Psychology of Health: Monograph. SPb, 1999. 1024 c.

[135] Gurvich I. N., Rusakova M. M., Malakhov Y. K., Bocharov A. V., Antonova N. A. Scale of Comprehensive Assessment of Mental State: Methodological Guide. SPb: Izd-vo SPbSU, 2003. 60 c.

[136] Influence of drug use on HIV treatment demand in St. Petersburg and Orenburg / O. S. Levina, A. A. Yakovleva, V. A. Odinokova, I. N. Gurvich // HIV-infection and immunosuppression. 2010. T. 2, № 1. P. 78-86.

[137] Gurvich I. N., Antonova N. A., Dubrovsky R. G. Diagnosis and prediction of deviant behaviour of adolescents in the educational environment: Educational and methodological manual. MOSCOW: RBF NAN, 2012. 144 c.

[138] Tsvetkova L. A. Methodology of development of preventive projects in the field of health: a textbook / L. A. Tsvetkova, N. A. Antonova, K. Y. Eritsyan. - St. Petersburg: Publishing House of St. Petersburg State University, 2013. 55 c.

[139] Smolskaya T. T. T., Tretyakova V. I., Ogurtsova S. V. V., Shilova E. A., Yakovleva A. A., Gurvich I. N., Rusakova M. M. Epidemiological surveillance of HIV infection: organisation and content of comprehensive seroepidemiological and behavioural studies in vulnerable populations: methodological recommendations. St. Petersburg: St. Petersburg Research Institute named after Pasteur, 2009. 76 c.

out.) researched socio-psychological and bio-behavioural phenomena related to health issues - mainly drug use, other manifestations of self-destruction and the HIV epidemic - in the Russian context. In addition, standardized methods of social-psychological health measurement were adapted and applied, in particular, the "neuropsychological adaptation test", which is necessary for identifying people with mental health problems and in need of psychotherapeutic help [140] . In parallel with this, the application of sociological perspective in domestic interdisciplinary studies of the health of Russians, including mental health, has been actively developing. In addition to M.M. Rusakova and V.A. Odinova mentioned above, a significant role in the formation of the St. Petersburg centre for the study of sociology of health belongs to V.I. Dudina, whose work shaped the principles of applied sociological research into the health of vulnerable groups of the population[141] . In addition, E.V. Dmitrieva[142] , R.A. Zobov, I.V. Zhuravleva[143] , N.A. Lebedeva-Nesevrya[144] and other Russian sociologists had a significant influence on the formation and spread of the national tradition of sociology of health.

Formation of sociological models of help-seeking behaviour

The key prerequisite for the identification of "psychological help-seeking" as a separate subject of interdisciplinary study of sociology, psychology and psychiatry was the wide coverage of the problem of "treatment gap". The development of this concept began in sociological studies of mental health in 1970-1980 with the work of L. Srole and A. Fischer, who used the metaphor of the "tip of the iceberg" to refer to the small proportion of people with mental disorders who sought help from a specialist and were in contact with a health care institution[145] . This phase of research has also shown that seeking help from a mental health professional is a much more complex social process. The earliest conceptualization of seeking psychological help as a social practice was

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[140] Gurvich I. N. Test of neuropsychic adaptation // Bulletin of Hypnology and Psychotherapy. 1992. № 3. P. 46-53.
[141] Dudina V. I. Health and social inequality: models of explanation // Vestnik of SPbSU. Ser. 12. 2010. Vyp. 3. P. 309 - 315.
[142] Dmitrieva E. V. Sociology of Health: Methodological Approaches and Communication Programmes. Moscow: Centre, 2002. 223 c.
[143] Zhuravleva I.V. Relation to health of an individual and society. Moscow: Nauka, 2010. 238 c.
[144] Lebedeva-Nesevrya N. A. Sociology of health: textbook for students of universities. Perm: Perm State National Research University. , 2011. 238 c.
[145] Srole L., Fischer A. K. (Editors). Mental health in the metropolis: The Midtown Manhattan Study. New York: McGraw-Hill, 1975. P. 209.

carried out within the framework of biomedical models of "illness behaviour" proposed in the second half of the 20th century by D. Mechanic, I. Sackman, L. Adam and R. Andersen, D. Field and other specialists in medical psychology and sociology[146] . This approach placed the presence and nature of mental illness as a key determinant of a person's seeking help.

An alternative methodological framework, formed during the identical period of development of mental health sociology, was a whole range of theories of stigmatization and "labelling". Their central component was the phenomenon of "social control", which determines a person's behaviour in caring for his or her own mental health[147] . Their sociological basis was T. Parsons' ideas about the structural-functional, controlling role of the health care institution and E. Goffman's theory of stigmatization. By the 1990s, social control models were criticized against the backdrop of a decline in the prevalence of forced hospitalization, its "social selectivity" and the popularity of voluntary care-seeking. Nevertheless, their critical approach to assessing the severity of mental disorders requiring social control in the form of care/therapy contributed to the development of a constructivist tradition in psychological help-seeking research.

Later, with the beginning of the 2000s, against the backdrop of criticism of biomedical models of public health in general and psychological interventions in particular, there was a shift away from accepting the 'morbidity' of this behaviour. Instead, seeking psychological help began to be perceived as an active social process in the psychological and social sciences[148] . The development of the sociological perspective in this subject field has taken place under the auspices of social network theories. In the most general view, a person's seeking help was explained, among other things, by the configuration of social networks in which he or she was included. Specific social network communities could include family members, friends, neighbours, health and law

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[146] Mechanic D. Students Under Stress: A Study of the Social Psychology of Adaptation. New York, NY: Free Press, 1962. 352 p.

[147] Scheff T. J. Being mentally ill: A sociological theory. Chicago: Aldine, 1966. 220 p.

[148] Rickwood D., Deane F. P., Wilson C. J., Ciarrochi, J. Young people's help-seeking for mental health problems // Australian E-Journal for the Advancement of Mental Health. 2005. №4(3). P. 222.

enforcement officials, alternative or folk medicine practitioners, government agencies, non-profit organizations, or, for example, the urban social network as a whole.

The addition of social network theory within the sociology of mental health has allowed not only to significantly expand the list of investigated sources and ways of receiving psychological help, but also to identify a person's social environment as a significant predictor of his or her seeking help. However, empirical studies that verified this hypothesis differed considerably in their assessment of the directionality of this correlation. Thus, in the work of C. Kadushin "Friends and supporters of psychotherapy" close social ties act as a facilitator of initial contact with a specialist in the field of mental health[149] . In contrast, studies of "closed" social networks - for example, those with strong intra-family and friendship ties, isolated from the rest of society - have shown them to be a barrier to professional psychological help[150] . The ambivalent role of social networks in shaping psychological help-seeking trajectories was later accounted for in the Network Episodes Model (NEM) developed by sociologist B. Percosolido[151] .

The development of the network approach in the research of the population's seeking psychological help also led to the trend of shifting the sociological focus from the respondent's socio-demographic characteristics to the social networks surrounding him/her. Thus, the previously mentioned studies by A. Horwitz and C. Kadushin challenged the significance of the "social class" variable in the person's seeking help, conditioning its indirect influence on the person's behaviour on the corresponding "class" social networks[152] . Subsequent studies by B. Percosolido also revealed the decreasing explanatory power of socio-demographic indicators, which remained significant in closed, traditional societies rather than in modern social systems[153] . Thus, the application

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[149] Kadushin C. Why people go to psychiatrists. New York: Athenon, 1969. 382 p.

[150] Pescosolido B. A., McLeod J. D., Alegria M. Confronting the second social contract: The place of medical sociology in research and policy for the twenty-first century. In C. E. Bird, P. Conrad & A. M. Fremont (Eds.), Handbook of medical sociology (pp. 399-426). Upper Saddle River, NJ: Prentice-Hall, 2000. 512 p.

[151] Pescosolido B. A. Illness careers and network ties: A conceptual model of utilisation and compliance. In G. Albrecht & J. Levy (Eds.), Advances in medical sociology, (pp.164-181). New York: JAI Press, 1991.

[152] Horwitz A. V. The economy and social pathology // Annual Review of Sociology. 1984. №10. P. 95-119.

[153] Pescosolido B. A. Organizing the sociological landscape for the next decades of health and health care research: The network episode model III-R as cartographic subfield guide. In B. A. Pescosolido, J. K. Martin, J. D. McLeod, & A. Rogers (Eds.), Handbook of the sociology of health, illness, and healing: A blueprint for the 21st century (pp. 39-66). New York: Springer, 2011. 563 p.

of the network approach makes it possible to present human help-seeking as a dynamic process - a situation of making a decision to turn to a specialist, which is influenced by different social contacts and networks with different vectors and effectiveness. Moreover, the theory of social networks, integrated into the problem of mental health, once again demonstrates that mental health care can be considered as a complex social reaction and social practice, shaped not only by the individual, but also by the social organization of life.

As a result of the historical review of the problems of seeking psychological help in the world sociological literature, the following conclusions can be drawn. Firstly, despite the traditions of research of social reactions to mental health problems, established as early as in the 1950s-1960s, seeking psychological help seems to be a relatively new and relevant subject of sociological research. In the Russian bibliography, "seeking psychological help" became an independent subject of empirical research in the 2010s[154] . At that time there was also a special interest in the factors of adolescent appeal: in particular, to the "Children's Helpline"[155] . Nevertheless, a clear increase in attention to the problem of seeking psychological help became noticeable in 2020. 2022 became a landmark year in terms of the number of papers published in the database of the Russian Science Citation Index (see Fig. 5). Thus, despite the insufficient study of the problem of seeking psychological help and the limited amount of bibliography on the topic, the prospects for further research, outlined in 2021-2022, are obvious.

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[154] Avtonomov D. A. Debt problems, circumstances of crisis and motivation to seek professional help in patients suffering from pathological tendency to gambling // Narcology. 2012. №7. P. 66-74.

[155] Ivantsov O. V., Kirakosyan E. P. Reasons of teenagers' appeals for psychological help by means of remote counselling // Helpline as a means of psychological help to children, parents, teachers: Materials of the All-Russian scientific-practical conference. / Edited by A.Yu. Kodzhaspirov - Moscow: MGPPU, 2010. - 221 c.
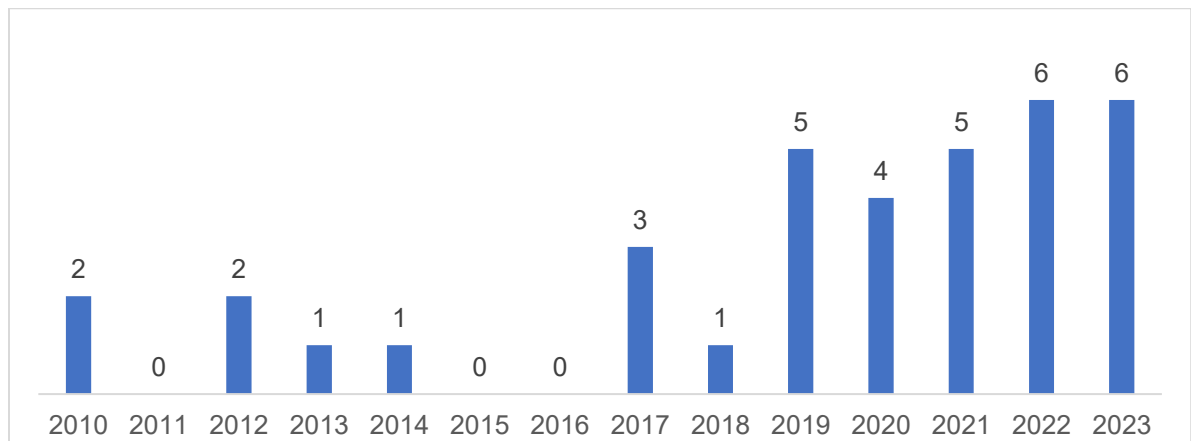
Figure 5: Volume of publications on the topic of seeking help/application for psychological help in the Russian bibliography, 2010-2023 (search query: "help-seeking" OR "seeking help" in the title/annotation of the paper)

Secondly, an important feature of the formation of knowledge about the demand for psychological help is the dominant focus on applied empirical research. In many respects, this mission was dictated by the actual needs of national systems and institutions of psychological services, the necessity to increase the demand for professional help as a tool for prevention of disorders, prevention of their chronicization, protection of psychological well-being of the population as a whole[156]. However, the sociological perspective offered an alternative vision of the problematic situation, in which the system of psychological help does not protect the health of the population as a whole, but only eliminates the consequences of mental disorders. A person's seeking professional help, thus, appears to be rather the result of his or her social conditions, social organization of life, rather than the presence of symptoms of psychological distress or specific mental disorders.

Being an interdisciplinary task, the comprehensive study of seeking psychological help has accumulated a significant empirical base. Based on the sample of Russian publications, it is possible to assert the predominance of psychological works within this field, to a much lesser extent - works written by specialists in the field of clinical psychiatry. Among 36 Russian studies conducted in 2010-2023, only 5 of them were

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[156] Bienvenu O. J., Ginsburg G. S. Prevention of anxiety disorders // International Review of Psychiatry. 2007. №19(6). P. 647-654.

carried out by sociological researchers, including E.A. Mikhailova[157] , M.E. Esipova[158] , V.N. and T.S. Buzinykh[159] . It is noteworthy that almost all sociological articles were written on the basis of combined and quantitative studies, which did not have a clearly defined theoretical framework, standardized methodology and a starting definition of "seeking psychological help". This does not detract from their practical significance, but shows the insufficient level of theoretical elaboration of the topic with an extensive array of applied research.

Conceptualization of psychological help-seeking

The World Health Organization's definition of "help-seeking", which is a contextualization of the different types, scenarios and outcomes of seeking psychological help, was formulated by experts from the World Health Organization in the context of adolescent psychological health. According to it, seeking psychological help is "any action or activity of a person who considers him/herself in need of personal, psychological, affective help or health or social services, with the aim of meeting this need"[160] . Separately, the definition discloses:

- Sources of psychological help: formal, official services (clinics, counsellors, psychologists, medical personnel, folk healers, religious representatives, participants in special public programmes and organizations) as well as informal sources (peers, friends, relatives, social environment in general).

- Type of psychological care: service (counselling, clinical care, medical treatment), referral for follow-up professional services, and informal communication with others who do not provide psychological services.

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[157] Mikhailova E. A. Helplines as a tool for the prevention of social disadvantage // Monitoring of Public Opinion. 2013. №1(113). P. 109-113.

[158] Yesipov M. A. Social representations of young people about psychological help: theoretical foundations of the study // ANI: Pedagogy and Psychology. 2021. №35(2). P. 354-357.

[159] Buzin V. N. N., Buzina T. S. Population assessment of the availability of psychological help: a sociological study // Social aspects of public health [online edition]. 2022. № 68(1). URL: http://vestnik.mednet.ru/content/view/1347/30/lang,ru/

[160] Barker G. Adolescents, Social Support and Help-seeking Behaviour: An International Literature Review and Programme Consultation with Recommendations for Action. Geneva, Switzerland: World Health Organisation, 2007. 56 p.

Being deprived of theoretical conceptualization, this definition has become a subject of discussions in the world science. Despite the general understanding of "seeking psychological help" as an active social process, there is a lack of generalized approach to the interpretation of this phenomenon. Key contradictions are caused by the characteristics of the "process", the stage of which is seeking psychological help. In particular, A. Shirom and Z. Sperling conceptualize seeking psychological help as "the first stage of the social support process, in which a person proactively enters into communication with others to obtain any kind of help, including affective, value or instrumental"[161] .

A. Zartaloudi and M. Madianos, who investigated seeking psychological help in the context of I. Goffman's social stigma, give it a brief definition of "active search for resources needed to resolve psychological problems"[162] . A minimal conceptualization of the term has also been presented by L. Lynch, M. Long and A. Moorhead as "an intentional action consisting of awareness and recognition of a psychological problem"[163] . Й. Unrau, R. Grinnell, V. K. Loseva, and A. I. Lunkov associated referral not with a process, but with "a request by which the patient formulates his difficulties and in the resolution of which he expects to find help from a psychologist"[164,165] .

The most widespread in the world science is the definition of D. Rickwood and K. Thomas, according to which the turnability is "an adaptive coping mechanism, which is an attempt to receive external assistance in coping with a problem related to mental health"[166] . At the same time, the authors themselves formulate this definition on the basis of a database of 316 English-language works on the subject, recognizing that in 46% of

[161] Shirom A., Shperling Z. Missile stress, help-seeking behaviour, and psychological reaction to the Gulf war // J Appl Soc Psychol. 1996. №26. P. 563-576.
[162] Zartaloudi A., Madianos M. Stigma related to help-seeking from a mental health professional // Health Science Journal. 2010. № 4. P. 77-83.
[163] Lynch L., Long M., Moorhead A. Young Men, Help-Seeking, and Mental Health Services: Exploring Barriers and Solutions // American journal of men's health. 2018. №12(1). P. 138-149.
[164] Unrau Y. A., Grinnell R. M. Exploring out-of-home placement as a moderator of help-seeking behaviour among adolescents who are high risk // Research on Social Work Practice. 2005. №15. P. 516-530.
[165] Loseva V. K., Lunkov A. I. Consider the problem...: Diagnostics of children's and adults' experiences by their speech and drawings. M.: A.P.O., 1995. 48 c.
[166] Kazantseva T. V., Antonova N. A., Eritsyan K. Y. Appeal for professional help in the field of mental health: conceptualisation of the concept and analysis of predictors // St. Petersburg Psychological Journal. 2019. № 28. P. 88-117.

them researchers do not provide a definition of "seeking psychological help", which they study[167] . A similar tendency is observed in the Russian bibliography: in 25 out of 36 works (devoted to the problematics of seeking psychological help, published as of 2023) there are also no attempts to conceptualize "seeking psychological help" as a separate object of interdisciplinary research. Thus, both in the world and domestic literature there is a lack of basic conceptualization and pluralism of available interpretations of "seeking psychological help" within the framework of existing theoretical approaches. It is obvious that there is an increase in scientific knowledge on the problem of appeal and requests for psychological help. However, these efforts may be deprived of heuristic potential without a clear separation of these terms, which is often ignored in empirical studies.

The considered theoretical interpretations allow us to perform a basic conceptualization of the concept of "seeking psychological help" within the framework of sociological science and its terminology. The author's conceptual model presented in Figure 6 consists of three components systematized in a deductive-inductive logic of study, similar to the methodological "matryoshka doll" in sociology.
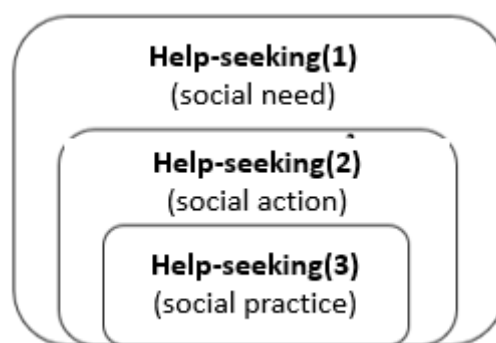
Figure 6: Three-component model of psychological help-seeking

The first component of seeking psychological help as a dynamic process is a specific social need that forms a request and determines a person's decision to seek help from a specialist in the field of mental health. This interpretation is based on the related definitions of J. Unrau, R. Grinnell, V. K. Loseva and A. I. Lunkov. Social need is

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[167] Rickwood D., Thomas K. Conceptual measurement framework for help-seeking for mental health problems // Psychol Res Behav Manag. 2012. №5. P. 175.

understood in T. A. Marchenko's definition as "a contradiction between a social subject and the objective condition of its life activity, which is resolved and reproduced in the process of conscious activity subjective-objective interaction"[168] . Seeking help from a specialist is a necessary condition for overcoming psycho-emotional difficulties, achieving psychological well-being and "further development" of the subject[169] .

Satisfaction of this social need is realized through the second component - seeking professional psychological help as a "social action". [170]It is noteworthy that in M. Weber's classification by decreasing degree of rationality, seeking psychological help is considered from the position of different types depending on the cases under consideration: as a goal-rational action (in case of a clearly formulated request to a psychologist and expectation of its resolution), value-rational (turning to a psychologist becomes a volitional act dictated by other values and needs), affective (in case of a critical state and despair, stimulating the search for psychological support in the psychologist's office), affective (in case of a critical state and despair, stimulating the search for psychological support in the psychologist's office).

In P. Sorokin's understanding, social actions become a tangible embodiment of social systems of interaction: in this logic, a person's request for help from a specialist acts as an elementary empirical unit of functioning of the psychological help system of any society[171] . A similar treatment of seeking psychological help as a basic unit of sociological analysis has the right to exist within the framework of T. Parsons' theory of social action[172] . In this paradigm, seeking psychological help is interpreted as a motivated action of an actor-subject, performed in two axes of orientation: internal-external (in the context of addressability, as a social action of internal orientation, aimed at solving one's own psychoemotional problems) and instrumental-consumatory axis (capable of being performed both for achieving a short-term effect of psychological help and for long-term therapy and personal development). In addition, the categorization of social action

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[168] Marchenko T. A. Need as a social phenomenon. Moscow: Higher School of Economics, 2009. P. 18.
[169] Sociologist's Workbook / Edited by G. V. Osipov. 5th ed. Moscow: LIBROCOM Book House, 2009. P. 46.
[170] Weber M. Basic Sociological Concepts. Selected works. Moscow: Progress, 1990. 808 c.
[171] Sorokin P. A. Social and Cultural Dynamics. Moscow: Astrel, 2006. 1176 c.
[172] Parsons T. On the Structure of Social Action, 2nd ed. Moscow: Academic Project, 2002. 880 c.

subsystems proposed by T. Parsons is still relevant. Parsons and can also categories the factors of seeking professional psychological help. Thus, "behavioural" (at the level of biological predictors of seeking help), "cultural" (the system of norms in relation to psychological help), "personal" (individual-psychological factors of seeking psychological help) and "social" factors (features of communication, interaction and influence of socio-structural factors when seeking help of a specialist"), considered in each of the subsystems, are naturally distinguished. It can be argued that it is the aspect of "social action" that acts as a central and connecting element of the sociological analysis of psychological help seeking. Being also a basic empirical indicator, the measurement of the phenomenon of turnover as a primary contact, interaction between a person and the system of psychological help has become the dominant focus of applied sociological and psychological research.

Within the framework of the third component, seeking psychological help is characterized as a complex dynamic process of searching for external sources of help and accepting it to solve one's own psychological problems. Such a collective conceptualization of "addressability" was proposed by most of the authors reviewed, including within the generalized definition of D. Rickwood and K. Thomas. In sociological science, it is appropriate to treat this phenomenon as "social practice", which is studied in this paper from the perspective of E. Giddens' theory of structuration and P. Bourdieu's structural constructivism. E. Giddens considers social practice as an integral reflexive activity that takes place in the conditions of the "duality" of the agent/actor and structure. The structure, despite the apparent opposition between "agent and structure", "man and society", is an internal condition of human activity rather than an external one[173]. The development of this idea, overcoming the classical contradiction of subjectivism and objectivism in social sciences, can be traced in the works of P. Bourdieu as the concept of "habitus" - a structure incorporated in the consciousness of a particular agent[174]. In relation to our subject of study, the structural factors of human social space,

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[173] Giddens E. The Structuring of Society. An Outline of the Theory of Structuration. Moscow: Academic Project, 2003. 525 c.

[174] Bourdieu P. Sociology of Social Space. SPb.: Aleteia, 2005. 288 c.

internalized in habitus, order and indirectly determine his social practices, which are temporally immanent, complex and not always conscious [175] . In conclusion, it is important to recall that the dual paradigm of P. Bourdieu and E. Giddens can serve as a basis for current research within the sociology of mental health, which is in search of a methodological compromise between the structuralist and constructivist traditions.

Thus, the metatheories of E. Giddens and P. Bourdieu allow us not only to categorize "psychological help-seeking" as a multifaceted social practice, but also to formulate its key characteristics within the framework of modern sociology of mental health. Firstly, seeking psychological help is a consistent, stable in time and cyclical, dynamic process, which differentiates it from a single application for psychological help (as a social action) and elevates it to the category of everyday experience. Secondly, the practice of treatment becomes ambivalent in its consciousness and rationality: applying M. Weber's typology, we can assert the complex character of "treatment" as a simultaneously rational, affective and traditional activity performed by the subject. Thirdly, the genesis of the social practice of seeking psychological help justifies the multilevel nature of its determinants and factors that order the scenarios of seeking psychological help. Thus, the predominant role of the internal, rational motivation of a person to seek psychological help is challenged by the influence of penetrating structural factors: the focus of the researcher's attention is on factors of social nature - social experience, environment, roles of the subject, as well as norms prevailing in social space.

The above-mentioned features endow the social practice of seeking psychological help with the greatest heuristic complexity of cognition and empirical measurement. However, the same interpretation of the research subject explains the scientific novelty and significance of the empirical study within the framework of the sociology of mental health. This conceptualization of "addressability" not only corresponds to the tradition of sociological research of public reactions to mental health problems, but also contributes to the development of a new stage in its dynamics. Previously, the classical subject of

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[175] Bourdieu P. Practical sense. SPb.: Aleteia, 2001. 562 с.

sociological research was the primary contact of a person with the system of psychological help. Now, the increment of psychological knowledge about "help-seeking" and its conceptualization as a social practice can expand the possibilities of the sociology of mental health in the context of the modern transformation of the institution of psychological help

2.2 Psychological help-seeking: an interdisciplinary analysis of methodological approaches

Taking into account the impressive amount of literature on this topic accumulated in the world science, by 2024 dozens of systematic reviews (most of them - within the framework of PRISMA methodology) were conducted: two of them generalize information about the general problematics of studying the applicability of psychological help[176,177] , while the rest systematized various aspects and spheres of studying this phenomenon. The key significance of most of the above-mentioned works for the development of the problematic under study is the recognition of the methodological gap between the growing attention of the authors in 2010-2020s to the problem of the population's demand for psychological services and its weak theoretical and methodological basis. The vast majority of studies included in the meta-analysis samples lacked a conceptualization of "help-seeking", a formulated research methodology and basic operationalization of specific factors and indicators of the central dependent variable. On the one hand, there is a weakness of theoretical and methodological elaboration of this issue, explaining the interpretation of the collected data on psychological help-seeking and the measurement instruments used.

On the other hand, there is a selective application of certain conceptual models and corresponding assessment tools - mainly psychological - to study predictors of

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[176] Rickwood D., Thomas K. Conceptual measurement framework for help-seeking for mental health problems // Psychol Res Behav Manag. 2012. №5. P. 173-183.
[177] Kazantseva T. V., Antonova N. A., Eritsyan K. Y. Appeal for professional help in the field of mental health: conceptualisation of the concept and analysis of predictors // St. Petersburg Psychological Journal. 2019. № 28. P. 88-117.

psychological help-seeking: the dominant focus on the individual and socio-psychological level of analysis is coupled with frequent neglect of macro factors of help-seeking in the broader socio-cultural context, which is the central interest of the sociology of mental health. The application of specific theoretical models and standardized methodologies necessary for consolidating knowledge on psychological help-seeking is limited and fragmented.

The most frequently used conceptual framework for research on seeking psychological help remains the traditional psychological behavioural models of planned behaviour (TPB) and reasoned action (TRA) developed by I. Eisen and M. Fishbein[178]. According to them, the intention, and with it the behaviour of a person in the sphere of seeking and receiving psychological help, is determined by three components: subjective attitudes (attitudes), norms and perceived behavioural control[179]. Thus, other groups of predictors (individual-psychological, socio-cultural, socio-demographic, etc.) are indirect and act as factors of correlation of these three components with the person's seeking psychological help. Despite the stability and long experience of application of these models in the world science, at the moment their wide spread is criticized in the field of studying the demand for psychological help. First of all, the axiomatic "rationality" of seeking help from a psychologist is challenged, which, at the same time, can be provoked by emotional preconditions or irrational habits and external mechanisms that can endow this social action - seeking help from a specialist - with an affective or traditional character in M. Weber's typology. In addition, the experience of applying these models demonstrates insufficient attention of researchers to the role of implicit factors and structural factors of social norms and perceived behavioural control[180]. Thus, the decision of a person to seek psychological help was more often considered as a derivative of his internal, individual-psychological attitudes and the result of "actor independence", which

[178] Rickwood D., Thomas K. Conceptual measurement framework for help-seeking for mental health problems // Psychol Res Behav Manag. 2012. №5. P. 176.

[179] Fishbein M., Ajzen I. Predicting and Changing Behaviour: The Reasoned Action Approach. New York, NY: Psychology Press (Taylor and Francis), 2010. 538 p.

[180] Chernozub O. L. Two-component model of behavioural factors: do implicit factors of the theory of planned behaviour need? // Monitoring of public opinion: economic and social changes. 2022. №3 P. 28-44.

puts forward the hypothesis contested by sociologists about the primacy of endogenous explicit factors over macro-factors at the level of the social structure of society.

The most popular instrument for measuring turnover is the Attitude Towards Seeking Professional Psychological Help Scale (ATSPPHS), developed by E. Fisher and J. Turner in 1970. Fisher and J. Turner in 1970. This methodology consists of 29 attitude scales grouped under four factors: awareness of personal need for psychological help, perception of stigma regarding psychological help, interpersonal openness regarding one's problems, trust in mental health professionals[181] . In 1995, the scale gained its 10-item shortened version, retaining the original factorization[182] . Despite the impressive coverage of indicators of seeking psychological help, over time there was observed the obsolescence of both the language of the questionnaire and the set of considered factors, which stimulated the creation of new standardized methods.

A new evolutionary stage in the measurement of psychological help-seeking is considered to be the IASMHS (IASMHS), developed by a team of authors led by C. Mackenzie[183] . In comparison with ATSPPHS, this scale was much more significantly based on the theory of planned behaviour, treating attitudes to seeking psychological help as attitudes - learned predisposition of a person to react in one or another way, forming his intentions and behaviour in the sphere of psychological health. Thus, sections assessing perceptions of norms and behavioural control appeared in the methodology. The final grouping of all 24 items of the methodology included three sections - psychological openness, perception of stigma, and propensity to seek psychological help. The adaptation of this methodology into Russian was done by S. B. Weinstein, M. V. Burdina and E. Yu. Y. Shabalina[184] . Subsequently, the Russified IASMHS scale became the most widespread standardized methodology for assessing turnover in the Russian

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[181] Fischer E. H., Turner J. I. Orientations to seeking professional help: development and research utility of an attitude scale // J Consult Clin Psychol. 1970. №35. P. 79-90.
[182] Ibid.
[183] Mackenzie C. S.' Knox V. J.' Gekoski W. L.' Macaulay H. An adaptation and extension of the attitudes towards seeking professional psychological help scale // Journal of Applied Social Psychology. 2004. №34. P. 2410-2433.
[184] Weinstein S. V., Burdin M. V., Shabalin E. Yu. The attitude questionnaire for seeking mental health services (IASMHS): results of psychometric analysis of the Russian version // Vestnik of Perm University. Philosophy. Psychology. Sociology, №23(3). P. 81-96.

literature. However, the authors of the adaptation themselves found that the factor structure of the IASMHS could not be fully replicated in the Russian context, and the empirical data themselves rather referred to E. Fisher's ATSPPHS model[185] . The research hypotheses about the presence of other latent variables that are not included in the IASMHS toolkit and the adaptation of the model of planned behaviour in general, justify subsequent adjustments to the methods of measuring the demand for psychological help on the basis of other theoretical and methodological models.

Among less common methods, in which there is a departure from the traditional model of planned behaviour when seeking psychological help, it is worth mentioning separately the questionnaire of propensity to seek psychological help by B. Cohen (WSHQ) and the General questionnaire of seeking psychological help (GHSQ).

Summarizing the analysis of the above-mentioned methodologies for measuring seeking psychological help, two key trends can be highlighted. Firstly, the overwhelming part of methods does not go deep into operationalization of the phenomenon of "seeking psychological help". The specifics of this indicator are often to be deduced from the wording of the questionnaire question itself, aimed at measuring this category. In general, it is possible to distinguish several dimensions within the framework of which researchers formulate the question about seeking psychological help. Perhaps, the dominant question is the question about the actual experience of the respondent's applying for professional psychological help (approximate wording - "Have you ever applied for psychological help to a specialist or not?"). In this case, such formulation refers to the category of "question about the fact" of committing a certain social action, which, in particular, often acts as an objective indicator of assessing the work of the system of psychological help. Further, the operationalization of "addressability" in the context of the intention/request to receive professional psychological help and its demand for the respondent ("Would you like to seek the help of a psychologist?") is widespread, which rather indicates the presence of the respondent's subjective need for professional psychological help. Thirdly,

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[185] Weinstein S. V., Burdin M. V., Shabalin E. Yu. The attitude questionnaire for seeking mental health services (IASMHS): results of psychometric analysis of the Russian version // Vestnik of Perm University. Philosophy. Psychology. Sociology. №23(3). P. 90.

there is a pluralism in operationalization of "seeking psychological help" as a certain psychological readiness to adopt a sustainable coping strategy for solving personal emotional and psychological problems. In this case, it may refer to the respondent's intentions/intentions/attitudes/orientations in the conceptual apparatus of psychological cognitive-behavioural models - in particular, TPB ("Are you ready to turn to a psychologist in case of psychological difficulties?"[186] . Fourthly, the wording of the question can also work to reveal the very behaviour of "turning", in which the respondent already uses the coping mechanism under study and implements it as a social practice on a par with alternative sources/opportunities for psychological help ("Do you turn to a psychologist to solve your own psycho-emotional problems or not?"). Returning to the author's conceptualization of "seeking psychological help" within the framework of three sociological components (social need, social action, social practice), it seems necessary to develop an instrument that synthesizes the experience of previous research in this area and measures seeking help in the context of three interrelated questions of the questionnaire: the respondent's actual need for psychological help, actual experience of seeking psychologist's services, and sustainable practice of seeking help as a social practice.

The second key feature of the analyzed methods and models is their dominant factor (mono- or multifactor) structure. The study and measurement of psychological help seeking, pursuing the goals of social design in the sphere of mental health of the population, is of applied significance for researchers mainly in the case of identification and measurement of specific barriers and facilitators of psychological help seeking, the knowledge of which can be subsequently converted into specific decisions and policies of psychological specialists. These factors, in turn, become markers of work to increase the target groups' access to psychological help and, consequently, to prevent the spread of mental illness in society and mortality from suicidal or socially dangerous behaviour. The diversity of the studied factors of turnover is conditioned by the specific applied tasks

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[186] Kazantseva T. V., Antonova N. A., Eritsyan K. Y. Appeal for professional help in the field of mental health: conceptualization of the concept and analysis of predictors // St. Petersburg Psychological Journal. 2019. № 28. P. 99.

of the researchers. [187][188][189]In addition to the factors considered in the previous methods and conceptual models, popular in the world and domestic literature are also enlarged groups of socio-demographic indicators (for example, male sex [190]), awareness of psychological help and opportunities to receive it[191] , factors of infrastructural availability of psychological help in the territory of the respondent's residence[192] , positive experience of the social environment[193] , socio-cultural factors (in particular, normative and socio-cultural factors).

2.3 Features of psychological help-seeking among adolescents

According to the conceptualization of D. Rickwood and K. Thomas, one of the basic stages of categorization of psychological help is the separation of its formal and informal sources. The results of a number of empirical studies demonstrate the prevalence of informal channels of receiving psychological help in the lives of adolescents aged 14-17.[194] In particular, the closest family members (parents) and friends/peers who are able to provide psychological and moral support are considered to be stable sources[195] . With the process of deep digitalization taking root in modern societies, a new source of psychological informal help for adolescents becomes the Internet and online space, offering a lower threshold of access for receiving social and emotional support from a

[187] Chumicheva I. V. Interrelation of factors of multicultural environment and readiness to seek psychological help for adolescents of different nationalities and their parents // Human Capital. 2019. №132(2). P. 304-308.

[188] Shumkova S. V. Unpreparedness of citizens to receive psychological help as a potential threat to the safety of the individual and his immediate environment // Bulletin of Prikamsky Social Institute. 2017. №78(3). P. 118-122.

[189] Olifirovich N. I. Readiness of student youth to seek psychological help / Scientific works of the Republican Institute of Higher School. Historical and psychological-pedagogical sciences. Minsk: RIVSH, 2012. P. 179-186.

[190] Shapovalov R. A. Psychological factors of men seeking professional psychological help // Psychological Studies. 2022. № 15(81). P. 2.

[191] Petrov V. E., Maltseva T. V. The problem of the demand for psychological services among employees of internal affairs bodies and the population // Applied Psychology and Pedagogy. 2017. №3. P. 37-43.

[192] Gatin F. F., Orlov F. V., Alekseeva I. N. Clinical and social characteristics of patients seeking psychotherapeutic help // Kazan Medical Journal. 2018. № 99 (4). P. 691-696.

[193] Antonova N. A., Dubrovsky R. G., Eritsyan K. Y. Factors of demand for psychological help service by students in higher education // Education of the individual. 2021. № 3(4). P. 86-94.

[194] Rickwood D., Deane F. P., Wilson C. J., Ciarrochi, J. Young people's help-seeking for mental health problems // Australian E-Journal for the Advancement of Mental Health. 2005. №4(3). P. 218-251.

[195] Cakar F. S., Savi S. An exploratory study of adolescent's help-seeking sources // Proced. Soc. Behv. Sci. 2014. №159. P. 610-614.

wide range of network participants[196] . In general, it can be observed that the range of possible informal sources of psychological help for adolescents is constantly expanding, gradually including in the analysis such categories as teachers and mentors, religious and spiritual guides, other groups of significant adults, sources in the form of various mobile applications and artificial intelligence, etc. Nevertheless, in the overall body of literature, informal sources of help seem under-researched (only 2% of the body of empirical research by 2012)[197] .

On the contrary, the dominant focus in the world science is directed to the study of formal sources of psychological help for adolescents, which are understood as services of mental health professionals (psychologists, psychotherapists, psychiatrists), persons acting as a "semi-formal" link in the contact between adolescents and psychological services (mainly teachers, coaches, academic mentors and supervisors, social workers), as well as resources and tools of psychological self-help. Formal assistance also refers to new forms of online psychological interventions available to adolescents through online chats, text and video consultations with specialists, online psychological self-help resources, etc.[198] . Appeal for professional (formal) psychological help is also the subject of this study: assuming the provision of qualified psychological help within the framework of verified methods and standards of counselling and therapy, professional help is an effective tool for early prevention, diagnosis, treatment and rehabilitation of adolescents' psychological health.

Previous attempts to measure adolescents' seeking professional psychological help have demonstrated a considerable variation in the indicators. The most common statistic is that of approximately 25% of adolescents seeking professional help: the readiness of Russian schoolchildren to seek professional help is estimated at approximately the same

[196] Best P., Gil-Rodriguez E., Manktelow R., Taylor B. J. Seeking help from everyone and no-one: Conceptualizing the online help-seeking process among adolescent males // Qual. Health Res. 2016. №26. P. 1067-1077.

[197] Rickwood D., Thomas K. Conceptual measurement framework for help-seeking for mental health problems // Psychol Res Behav Manag. 2012. №5. P. 181.

[198] Best P., Gil-Rodriguez E., Manktelow R., Taylor B. J. Seeking help from everyone and no-one: Conceptualizing the online help-seeking process among adolescent males // Qual. Health Res. 2016. №26. P. 1067-1077.

level (20%)[199] . Despite the fluctuations of the indicator in the range of 15-36% caused by different samples, socio-cultural context and the chronology of empirical research, the consensual conclusion seems to be that adolescents' referral rate is inversely proportional to the severity of psychological problems and difficulties they face[200] . Thus, the question is raised as to what extent the level of adolescents' help-seeking corresponds to the acuteness of their objective and subjective need.

Factors of psychological help-seeking among adolescents

The most frequently cited barrier to adolescents seeking psychological help is social stigma, also operationalized in the terms "fear of stigma", "self-stigma", "perceived stigma"[201] . Being influenced by stigmatizing attitudes, adolescents associate seeking help from a psychologist with the risks of self-disclosure and subsequent social discrimination on the basis of mental health[202] . The phenomenon of self-stigmatization, in turn, testifies to the internalization of negative attitudes towards professional psychological help in the concept of habitus, in which the adolescent begins to perceive turning to a specialist as "shameful" behaviour [203] . Nevertheless, as a socially constructed phenomenon, the stigmatization of psychological help is levelled by the efforts of applied programmes and initiatives. Effective tools of destigmatization include educational activities, increasing the level of "psychoeducation" of adolescents and their literacy in the field of human mental health[204] . Metaprocesses of in-depth digitalization and mediatization offer other opportunities to deconstruct stigmatized attitudes among adolescents. In particular, low-threshold, remote psychological services are being actively developed, offering

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[199] Savina E. A., Esterle A. E. E., Savenkova I. A., Ovsyanikova E. A., Khudaeva M. Y. Study of psychological problems and the need for counselling of an educational psychologist in schoolchildren of 7th, 9th and 11th grades // Psychological Science and Education. 2019. № 4 (24). P. 100.

[200] Health of adolescents and youth // World Health Organisation. URL: https://www.who.int/ru/news-room/fact-sheets/detail/adolescents-health-risks-and-solutions (date of reference: 02.04.2024).

[201] Aguirre Velasco A., Cruz I. S. S., Billings J., Jimenez M., Rowe S. What are the barriers, facilitators and interventions targeting help-seeking behaviours for common mental health problems in adolescents? A systematic review // BMC Psychiatry. 2020. №20 (1). P. 14.

[202] Schnyder N., Panczak R., Groth N., Schultze-Lutter F. Association between mental health-related stigma and active help-seeking: Systematic review and meta-analysis // The British Journal of Psychiatry. - 2017. №210(4). P. 261-268.

[203] Corrigan P. W., Watson A. C., Barr L. The self-stigma of mental illness: Implications for self-esteem and self-efficacy // J. Soc. Soc. Clin. Psychol. 2006. №25. P. 875-884.

[204] Mittal D., Sullivan G., Chekuri L., Allee E., Corrigan P. W. Empirical Studies of Self-Stigma Reduction Strategies: A critical review of the literature // Psychiatr. Serv. 2012. №63. P. 974-981.

adolescents, who are more vulnerable to the negative impact of stigma, lower risks of disclosure and de-anonymization online[205]. Social networks and media, which are widespread among adolescents, also seem to be a promising tool: they can serve both as a new coping strategy, opening up the possibility to freely express their problems and experiences, and as an open public space where people share their experience of seeking professional help, relevant contacts and advice, raise awareness of mental health in general, and thus collectively deconstruct the stigma of professional psychological help[206].

Another barrier, widely considered in the literature on adolescents' seeking psychological help, is the attitudes and beliefs of the adolescent's family[207]. Parental/significant adult beliefs, narratives, stereotypes about psychological help and their own experience of seeking it can lead to its stigmatization and self-stigmatization in the adolescent's mind. In addition, acting as an agent of the child's primary socialization, the family is capable of transmitting the parents' socio-cultural norms (ethnic, religious, professional, etc.), which also form the adolescent's basic attitude to the system of professional psychological help. It is important to emphasize that such intra-family norms in relation to psychological help act as an ambivalent factor of treatment. On the one hand, the attitudes of "hiding psychological problems within the family" can be associated with the adolescent's active use of the source of informal psychological help in the person of parents and significant relatives, building trusting relationships in a more effective resolution of the adolescent's psychological difficulties in the family circle. On the other hand, these social attitudes dominating within the family, coupled with unsatisfactory child-parent relations may deprive the adolescent of an important and possibly the only available source of help in the person of a psychologist, as a result of which the adolescent

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[205] Best P., Gil-Rodriguez E., Manktelow R., Taylor B. J. Seeking help from everyone and no-one: Conceptualizing the online help-seeking process among adolescent males // Qual. Health Res. 2016. №26. P. 1067-1077.
[206] Vannucci A., Flannery K. M., Ohannessian C. M. Social media use and anxiety in emerging adults // Journal of affective disorders. 2017. №207. P. 163-166.
[207] Aguirre Velasco A., Cruz I. S. S., Billings J., Jimenez M., Rowe S. What are the barriers, facilitators and interventions targeting help-seeking behaviours for common mental health problems in adolescents? A systematic review // BMC Psychiatry. 2020. №20 (1). P. 14.

is forced to choose a coping strategy of independent resolution of psychological disorders and increases the risks of their progression[208] .

Mental health literacy, which refers to the ability of adolescents to use this information to recognize, resolve, prevent and manage psychological problems and disorders, is also among the three most frequently cited factors in adolescents' seeking psychological help[209] . In addition to the knowledge itself, mental health literacy involves the ability to find reliable information on mental health issues, awareness of risk factors and causes of specific diseases, as well as available sources of professional psychological help[210] . Despite the fact that this factor is also applicable to the analysis of seeking psychological help of the adult population, children and adolescents are considered to be social groups more vulnerable to the barrier of "low literacy"[211] . This trend is explained by the dependence of the level of mental health literacy on the level of education in general, academic achievement, developed cognitive abilities to find, analyze, compare information, as well as life experience.

The majority of facilitators of seeking professional psychological help among adolescents considered in the literature constitute dichotomous pairs of the barriers already considered. In particular, one of the key facilitators may be a high level of adolescents' mental health literacy: this factor has a complex impact on adolescents' ability to diagnose and recognize psychological difficulties in a timely manner, assessment of the positive effect of help from a qualified specialist in this area, and skills in searching for necessary information and available services. In addition, improving mental health literacy contributes to the destigmatization of the studied social practice in the minds of adolescents, recognition of psychological disorders as an important social problem that requires not public censure, but increased attention, tolerance and people's

[208] Eigenhuis E., Waumans R. C., Muntingh A. D. T., Westerman M. J., van Meijel M., et al. Facilitating factors and barriers in helping-seeking behaviour in adolescents and young adults with depressive symptoms: A qualitative study // PLOS ONE. 2021. №16(3).

[209] Rezun E. V., Slobodskaya E. R. R., Semenova N. B., Rippinen T. O. Mental health problems and help-seeking among adolescents // Siberian Psychological Journal. 2021. № 79. P. 197.

[210] Jorm A. F. Why we need the concept of "mental health literacy" // Health Commun. 2015. №30. P. 1166-1168.

[211] Georgakakou-Koutsonikou N., Williams J. M. Children and young people's conceptualisations of depression: a systematic review and narrative meta-synthesis // Child Care Health Dev. 2017. №43(2). P. 161-181.

readiness to receive quality help from psychological specialists. Thus, the "mental literacy" of adolescents acts as an important object of educational campaigns with proven effectiveness in increasing treatment and general preventive role in combating crisis phenomena in the psychological well-being of the population.

As a counterbalance to the barrier of "negative experience of treatment", the positive experience of adolescents committing this social action is suggested[212] . It is observed that a successful experience of visiting a psychologist cancels out the effect of unformed expectations, in which adolescents may question the effectiveness, comfort, safety and confidentiality of contacting a specialist. The experience of actual treatment tends to destroy these negative attitudes, to increase adolescents' trust in specialists and the system of psychological help in general, and to accept this practice as a normal, accessible, effective form of taking care of their own psychological well-being[213] . At the same time, an accompanying tool for mitigating the factor of negative expectations, in addition to direct experience, can be the work of psychological services to create an adolescent-oriented, welcoming environment, preventively reducing the unreasonable risks of adolescents visiting a psychologist.

Another facilitator of adolescents' treatment is their social environment, which contributes to the formation of a positive attitude towards receiving psychological help, the institution of psychological help and its specific services, and information in the field of mental health. Agents of such socialization, for example, can be parents who demonstrate authority for the adolescent and positive patterns of upbringing, school environment represented by peers and teachers, the presence of other significant adults both within the family and educational space, and outside them[214] .

Socio-demographic indicators can and do act as independent variables of adolescents' seeking psychological help. For example, seeking professional psychological

[212] Watsford C., Rickwood D. Young people's therapy expectations // Clinical Psychologist. 2014. №18. P. 43-51.

[213] Lindsey M. A., Korr W. S., Broitman M., Bone L., Green A., Leaf P. J. Help-seeking behaviours and depression among African American adolescent boys // Soc Work. 2006. №51(1). P. 49-58.

[214] Maiuolo M., Deane F. P., Ciarrochi J. Parental Authoritativeness, Social Support and Help-seeking for Mental Health Problems in Adolescents // Journal of youth and adolescence. 2019. №48(6). P. 1056-1067.

help is more typical for adolescent girls than for boys, due to better skills in recognizing psychological problems and awareness of available psychological services[215]. The specific age of an adolescent in the range of 13-18 years seems to be an important predictor: nevertheless, in this case age is not a final variable, demonstrating rather different attitudes of adolescents towards the system of psychological help depending on the level of their psychosocial development[216]. The differentiation of adolescents' seeking psychological help can also be explained by the factor of the type of locality, as a result of which the coping strategy of seeking help from a psychologist is more common among adolescents in urban settlements than in rural ones. Such a trend, in turn, can be explained both by the factor of inaccessibility of psychological services in sparsely populated rural settlements[217], and by cultural differences in the perception of psychological problems: in particular, qualitative studies demonstrate narratives voiced by adolescents, according to which seeking the help of a psychologist is stigmatized as a weakness unacceptable for rural life[218]. Given the spread of programmes of accessible psychological help for adolescents, the factor of adolescent income and family affluence is rarely considered by researchers as a predictor of seeking psychological help.

In general, it can be argued that the explanatory power of socio-demographic factors of adolescents' seeking psychological help hides other latent variables: perceptions of stigma, cultural attitudes and normative expectations related to adolescents' concern for their own psychological health. Nevertheless, as visible indicators, they can be important tools for segmenting beneficiaries of programmes aimed at increasing professional help-seeking among targeted vulnerable groups of adolescents - in particular, young men, residents of rural settlements, or adolescents from low-income, disadvantaged families.

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[215] Haavik L., Joa I., Hatloy K., Stain H. J., Langeveld J. Help seeking for mental health problems in an adolescent population: the effect of gender // Journal of mental health. 2019. №28(5). P. 467-474.

[216] Divin N., Harper P., Curran E., Corry D., Leavey G. Help-seeking measures and their use in adolescents: a systematic review // Adolesc Res Rev. 2018. №3(1). P. 119.

[217] Mackenzie C. S., Erickson J., Deane F. P., Wright M. Changes in attitudes towards seeking mental health services: a 40-year cross-temporal meta-analysis // Clinical psychology review. 2014. №34(2). P. 99-106.

[218] Nozdrina N. A., Dokueva H. A. Possibilities of providing psychological help to adolescents with the help of telemedicine tools // Psychology. Historical and critical reviews and modern research. 2022. №5(11). P. 316.

Conceptual models for studying adolescent referrals

In general, it should be noted that research models of psychological help-seeking focused on different target groups of adolescents are very rare at the moment. Three models of different sociological paradigms, tested on relevant samples and most frequently found in the literature, will be discussed below.

The first such research framework proposed is the Revised Network Episodes Model (REV NEM) developed in 2013[219] . A translation of the original image of the model is presented in Figure 7. The approach is naturally based on the previously discussed Network Episodes Model (NEV) by B. Percosolido, according to which the process of seeking and receiving psychological help is associated not with individual actions, characteristics and predisposing risk factors, but rather with the social networks in which a person lives[220] . The initial points of the model under consideration reflect the content of the third, evolved model of network episodes of B. Percosolido (REV III), revised by the author in 2011[221] .

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[219] Boydell K., Volpe T., Gladstone B., Stasiulis E., Addington J. Youth at ultra high risk for psychosis: Using the Revised Network Episode Model to examine pathways to mental health care // Early intervention in psychiatry. 2013. №7(10). P. 170-186.

[220] Pescosolido B. A. Beyond rational choice: the social dynamics of how people seek help // Am J Sociol. 1992. №97. P. 1096-1138.

[221] Pescosolido B. A. Organizing the sociological landscape for the next decades of health and health care research: The network episode model III-R as cartographic sub fi eld guide. In B. A. Pescosolido, J. K. Martin, J. D. McLeod, & A. Rogers (Eds.), Handbook of the sociology of health, illness, and healing: A blueprint for the 21st century (pp. 39-66). New York: Springer, 2011. 563 p.

& A. Rogers (Eds.), Handbook of the sociology of health, illness, and healing: A blueprint for the 21st century

(pp. 39-66). New York: Springer.
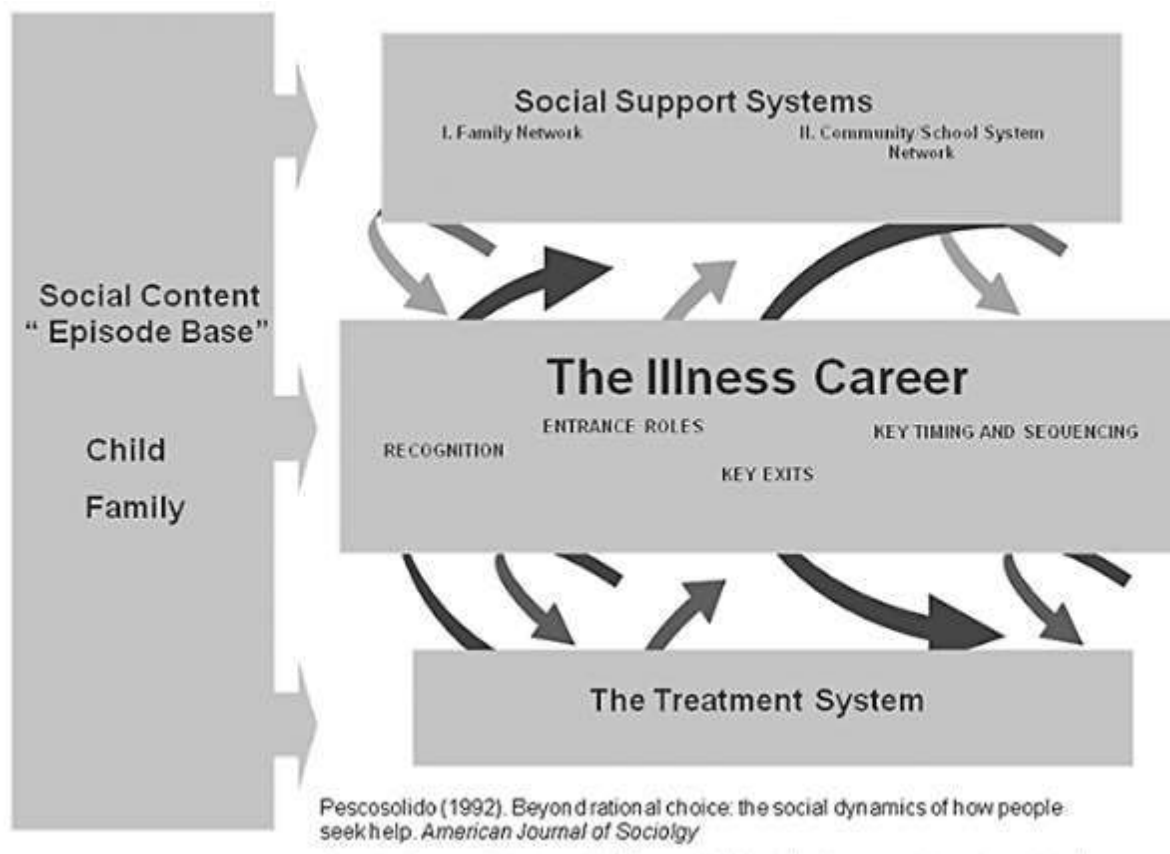
Figure 7: Revised network episode model for children and adolescents (REV NEV)

As in B. Percosolido's model. Percosolido's model, the sociologist focuses on four research fields. The *social content of a network episode* is a set of variables reflecting the social experience of an adolescent in a situation of needing help, namely:

- socio-demographic predictors (sex, age, place of residence, marital and labour status, education and income);
- personal tools and mechanisms for taking care of their own mental health (availability of health insurance, coping strategies);
- the nature of the episode requiring external care (diagnosability, severity, duration of the disorder, and factors of accessibility, organization and funding of the care/care required).

The *systems of social support* and *professional treatment* are considered in terms of three components: their network structure, content and functions performed. Thus, common structural indicators for both systems are the size, density, composition, duration of existence and strength of connections within the respective social networks.

The functions of social support and professional assistance systems for adolescents are also considered identical: they can be a source of information, advice, expressive (emotional) and material (practical) assistance to adolescents, as well as tools for regulating their behaviour. A different set of indicators is highlighted at the level of the structural content of one or another system:

- The key content of the social support system (family and community/school) - social norms, beliefs and attitudes of members of these social networks in relation to the system of professional psychological and psychiatric assistance. The study of these indicators also makes it possible to establish the *perceived (subjective) effectiveness of* professional help provided to adolescents.

- The content of the professional care system is considered in the context of the effectiveness and technology of diagnosing mental disorders, the modality of the system itself, and the attitudes of professionals towards clients/patients, mental health and the organization of the care system as a whole.

The *career* trajectory of an adolescent's *illness*, represented in the REV NEV model, is the result of a long evolution of T. Parsons' idea, originally proposed by him in his work "The System of Modern Societies"[222] . His understanding of the role of a "sick person" with corresponding rights and duties (among which is seeking help) and the main stages of its implementation became the first sociological scheme for interpreting the behaviour of a person suffering from a disorder/disease. The adaptation of this concept within the framework of REV NEV allows us to trace the socio-role trajectory of a teenager facing mental problems: from the first awareness of the problem, its acceptance and observation of accompanying deviations/symptoms, to contact with a specialist, fulfilment of the role of a patient and subsequent exit from the problematic episode. In general, despite the apparent "network" perspective, it can be argued that the key theoretical and methodological underpinning of the network episode model - as well as that of B. Percosolido - is social systems theory and the structural-functionalist paradigm

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[222] Parsons T. System of Modern Societies / Translated from English by L.A. Sedov and A.D. Kovalev. Edited by M.S. Kovaleva. Moscow: Aspect Press, 1998. 270 с.

of T. Parsons, which predetermined the logic of the model's construction and the categorization of its components.

However, adherence to this paradigm may be the main weakness of the considered model. The use of the concepts of "illness behaviour" and "illness career" by T. Parsons, which was dominant in 1950-1970, is now considered controversial. Parsons' concepts, which dominated in 1950-1970, are now recognized as controversial. As a result of the constructivist critique, a pressing methodological problem is the possibility of applying the models of 'illness behaviour' to the study of mental disorders: in general, the questions raised earlier about the applicability of the labels 'patient' and 'patient' to recipients of psychological and even psychiatric care remain unresolved. In addition, it is contact and work with mental health professionals that the network episode model considers the successful completion of a 'career of illness'. At the moment there is a transition from paternalistic to participatory medicine - in particular, to the practices of responsible self-medicalization and self-help: this trend is also manifested in the spread of alternative ways of overcoming stress and mental difficulties without visiting a specialist (for example, the use of over-the-counter drugs)[223] . In addition to various manifestations of self-medicalization of stress, it seems promising to analyze not so much psychiatric, but rather the possibilities of general psycho-emotional help and the role of its alternative sources in the form of informal social networks. Given that the REV NEV model has so far only been tested on a clinical sample of 14-20-year olds at high risk of developing psychosis, it is unclear whether the model can be adapted to other research subjects, particularly adolescents who have not previously been in contact with the professional help system.

The second conceptual model that appears in the literature on adolescents' seeking psychological help and deserves attention is the online help-seeking pathways model. The authors of the model - P. Best, E. Gil-Gonzalez, R. Manktelov, and B. Taylor - derived it in 2016 based on the results of their own qualitative research conducted with

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[223] Dudina V. I., Ruppel A. F. "Any little thing makes me mad": self-medicalisation of stress and patterns of pharmaceuticals use in digital society // Monitoring of public opinion: economic and social changes. 2020. № 2. P. 315-316.

14-15-year-old males[224] . An image of the model adapted by the author to the Russian language is presented in Figure 8.
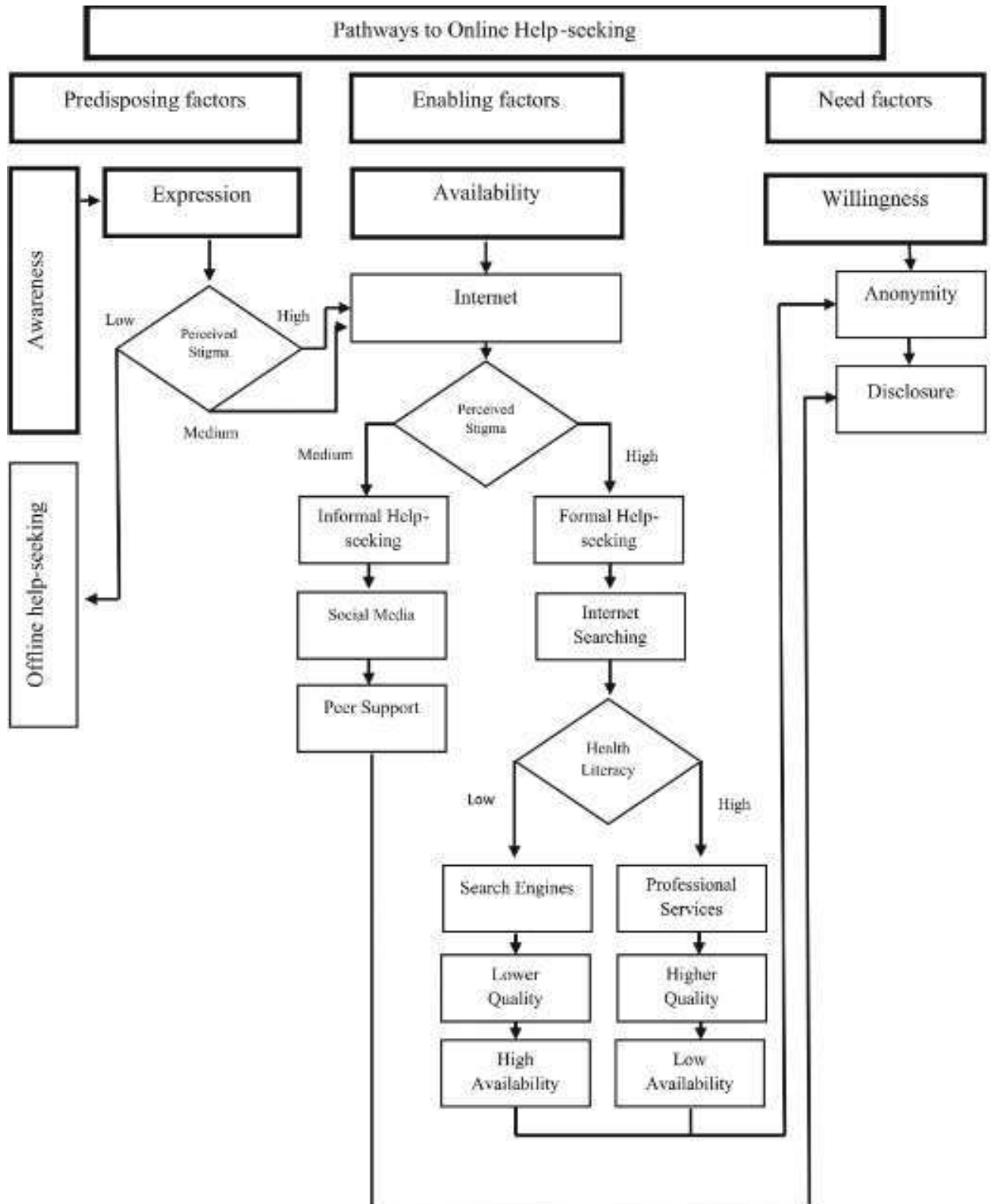
Figure 8. Model of pathways of adolescents seeking psychological help online (P. Best, E. Gil-Gonzalez, R. Manktelov, B. Taylor)

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[224] Best P., Gil-Rodriguez E., Manktelow R., Taylor B. J. Seeking help from everyone and no-one: Conceptualizing the online help-seeking process among adolescent males // Qual. Health Res. 2016. №26. P. 1067-1077.

The model, presented in the form of a flowchart, demonstrates how the trajectory of an adolescent's search for psychological help in difficult life situations is built up under the influence of some factors. Thus, the model leads the adolescent either to offline sources of psychological help or to its online resources and tools. Online help itself, similar to "face-to-face" psychological help, can be interpreted as formal (seeking the services of mental health professionals) or informal referral (in the person of other Internet users, support groups). In addition to various sources, informal online help appears to be de-anonymizing a priori - at least within the limits of online acquaintances and community providing psycho-emotional support and help.

The starting designation of predisposing, contributing and need factors around which the adolescent's trajectory of online help is built is taken from the Andersen-Newman Behavioural Model of Health Care Use (ANBM) in the 5th edition, which takes into account both contextual and individual characteristics of patients/clients[225] . Thus, predominantly individual factors are the adolescent's *awareness of the* presence of psycho-emotional difficulties, problems, *expression of a* request for necessary psychological help and *readiness to* receive it, namely, to communicate with a specialist, to disclose to him/her his/her problems and personal information, and to implement recommendations. The contextual factor, on the contrary, is the collective factor of *accessibility*, indicating both objective, physical possibilities of teenager's access to psychological help services (location, opening hours, cost of services, etc.) and social aspects of access (trust in specialists, stigmatization of treatment, perceived safety and confidentiality of treatment by teenager, etc.).

The model of P. Best et al. can serve as an example of a "stigma-centred" approach in conceptualizing adolescents' seeking psychological help. The stigma factor influences not only the fact of seeking or not seeking help for adolescents. According to the model, its structural influence can be traced at three more stages in the trajectory of seeking help:

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[225] Andersen R. National Health Surveys and the Behavioural Model of Health Services Use // Medical Care. 2008. №46(7). P. 652.

- Choice of online/offline format of receiving psychological help. A high/medium degree of perception of stigmatizing attitudes leads to the fact that adolescents tend to resort to impersonal, anonymous online resources that do not require disclosure and assume a more convenient format of communication. Adolescents who do not experience the negative barriers of stigma are more open to face-to-face, offline help-seeking.

- Choosing sources of online psychological help. The high impact of stigma leads to the fact that adolescents are more likely to adopt a strategy of avoiding contact with online professionals and turning to informal sources of help. These may include anonymous support groups, online communities and friends. In contrast, adolescents with moderate perceptions of stigma are more likely to contact professionals or seek out information, mobile apps and other resources available for self-help.

- Choosing the type of formal online psychological help. Whether an adolescent will independently seek a solution to his or her problems or will be helped by a specialist depends on the adolescent's "mental literacy". It was previously defined as a set of knowledge, attitudes, skills in self-diagnosis, seeking and receiving the required help, as well as a general openness and ability to interest the adolescent in solving mental health problems. Mental health literacy is inextricably linked to the concept of stigma: high literacy acts as a protective factor against negative manifestations of stigma, while low literacy, on the contrary, increases the risks of its self-stigmatization and, as a result, unpreparedness for contact with specialists. Adolescents with low literacy levels are more likely to independently search for answers and recommendations on the Internet, which is more accessible but does not guarantee effective help. Teenagers who are educated about mental health are more likely to turn to professional evidence-based therapy services rather than low-threshold self-help tools.

Thus, the model of trajectories of online psychological help among adolescents presents a fresh look at the problem of "addressability". The metaprocess of digitalization undoubtedly transforms adolescent practices of taking care of their own mental health, which justifies the relevance and novelty of this model as the first attempt to map

alternative, online trajectories of seeking psychological help. However, it is important to bear in mind that the model, which is rather exploratory, also has a number of limitations. First, based on qualitative data, the authors construct a hypothetical "path" of an adolescent and its determining predictors. The existence of strong correlations between perceptions of stigma and, for example, the preferred format/source/type of help received must be verified through subsequent quantitative tests. Secondly, the specificity of the qualitative study sample from which this model was derived needs to be taken into account: only 14-15-year-old males were targeted. As mentioned in an earlier review of research, young men were generally more likely to be influenced by stigma when seeking psychological help than young women. This explains the prospect of developing specific techniques, tools and low-threshold services to bring at-risk young men into contact with the institution of psychological help[226]. However, it remains unclear to what extent this conceptual model, based on the nexus of "hegemonic masculinity" and the resulting stigmatization of psychological help, can be extrapolated to much larger empirical data - not to mention the inclusion of girls in the sample.

In conclusion, it is worth mentioning the limitations of the "factor set" itself, which determines the way in which adolescents receive psychological help. Being the cornerstone of the whole model, "stigma" - which is important to emphasize - is not an empirically observable characteristic of the object at the current moment, but a risk, the probability of its occurrence at those moments when the adolescent will be "at a crossroads", choosing between online and offline sources of help, etc. Thus, this model in its task is extremely reminiscent of the generalized model of seeking psychological help by D. Rickwood and C. Thomas discussed earlier. Their key significance lies in the systematization of diverse patterns of seeking and receiving help, in the linear-sequential representation of the dynamic process of seeking help and possible choices of sources/format of psychological help arising within the framework of the indicated trajectories. Nevertheless, researchers do not focus on the variety of factors that

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[226] Campbell J., Rondon J., Leavey G., and Galway K. Meeting the Needs of Vulnerable Young Men: A Study of Service Provider Views // Children and Society. 2013. №27. P. 60-71.

invariably influence the way an adolescent progress along the designated trajectories and act as critical predictors of his/her decisions.
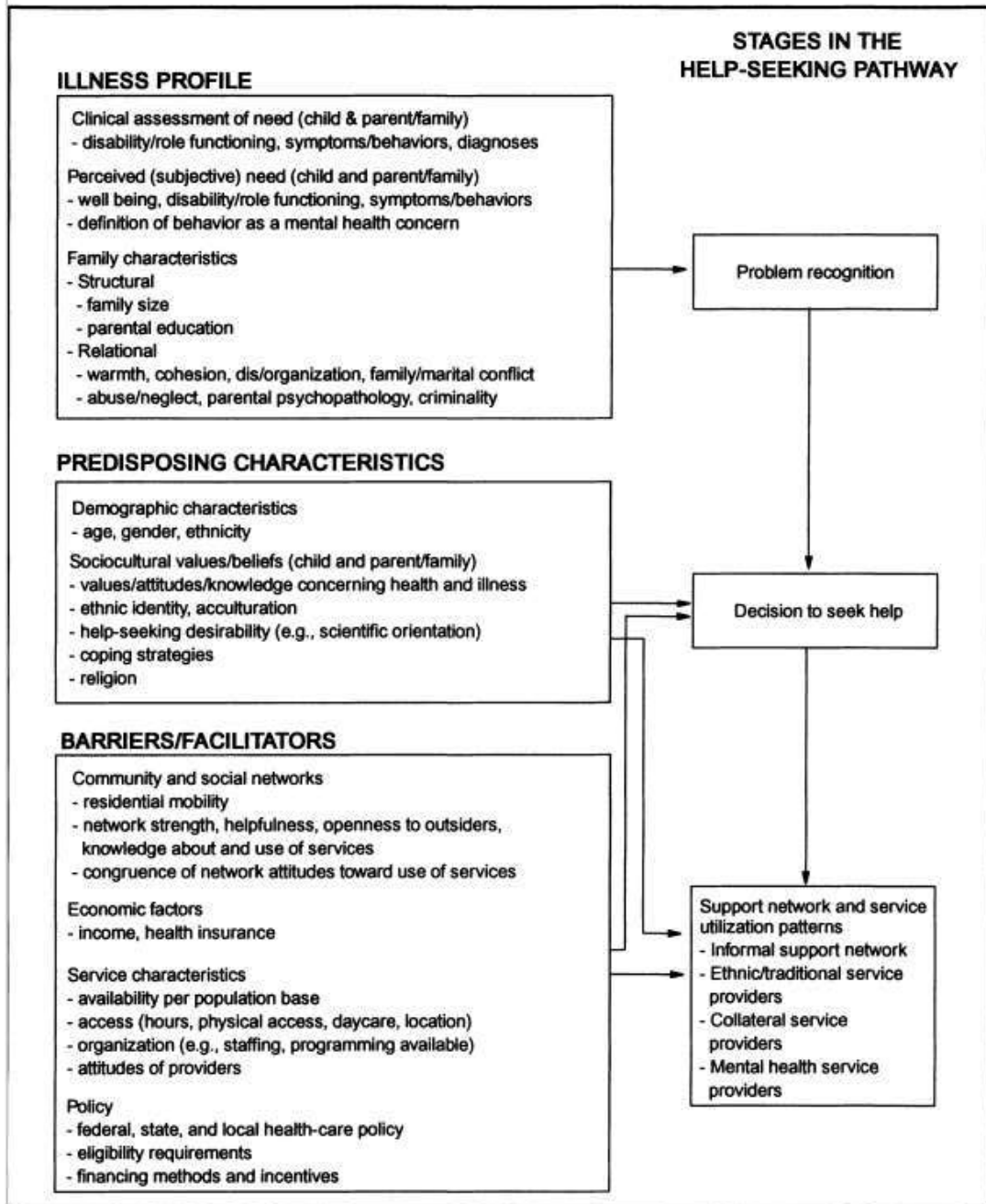
Figure 9. Model of children's demand for psychological help (D. Srebnick, A.M. Kousse, N. Baidar)

Reinterpretation of T. Parsons' theory can be represented by the model of children's demand for psychological help, developed by the team of D. Srebnick, A. M. Kousse and N. Baidar in 1996[227] . The model is an adaptation of Goldsmith's qualitative research

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[227] Srebnik D., Cauce A. M., Baydar N. Help-Seeking Pathways for Children and Adolescents // Journal of Emotional and Behavioural Disorders. 1996. №4(4). P. 210-220.

programme for the analysis of professional psychological help-seeking[228] : the latter, in turn, was based on the Andersen-Newman Behavioural Model of Health Care Use (ANBM), a classic model in health sociology. Thus, in its theoretical and methodological underpinnings, this model can be seen as a compromise between a model of networked episodes in an adolescent's life and their trajectories of online/offline help-seeking. A representation of the model in the author's translation is presented in Figure 9.

The purpose of this model is to identify and analyze a set of factors determining the *stages in adolescents' receipt of necessary help* in the sphere of mental *health*. The trajectory itself is represented in three stages: recognizing a psychological problem, making a decision to seek help and start searching for it, and the final stage of receiving it in various forms. Despite the fact that such a vector representation of the process of seeking help partly repeats the "career of illness" of T. Parsons. Parsons, the key novelty of the work lies in the diversification of forms of psychological help available to adolescents in different sociocultural contexts. The authors take into account the key features of the social group of adolescents in this process: they consist in the fact that adolescents are much less likely than adults to be the initiator of seeking help, occasionally acting as an "involuntary client", as a result of which a small proportion of adolescents in need of help have contact with mental health professionals (according to the authors' estimates - less than 20%)[229] . Despite the low rates of seeking professional services, other channels and forms of help are nevertheless present in adolescents' lives. These are, first of all, family and school social networks, studied in the paradigm of B. Percosolido, as well as other channels and forms of help. Percosolido's paradigm, as well as religious and traditional practices that play a significant role in certain ethnic and religious communities.

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[228] Goldsmith H. F, Jackson D. J., Hough R. Process model of seeking mental health services: Proposed framework for organising the research literature on help-seeking. In H. F. Goldsmith, E. Lin, R. A. Bell, & D. Jackson (Eds.), Needs assessment: Its future (DHHS Publication No. ADM 88-1550, pp. 49-64). Washington, DC: Government Printing Office, 1988.

[229] Srebnik D., Cauce A. M., Baydar N. Help-Seeking Pathways for Children and Adolescents // Journal of Emotional and Behavioural Disorders. 1996. №4(4). P. 212.

The *illness profile* is a complex variable, the indicators of which are a comparison of the adolescent's objective and subjective need for psychological/psychiatric care and the characteristics of the adolescent's family. The importance of considering these components separately is explained by the fact that the methods of clinical diagnosis of disorders observed in adolescents differ significantly from the diagnostic patterns present in the minds of the adolescent and his or her family environment. While professionals identify and interpret adolescent psychoemotional problems in the context of psychiatric symptoms, parents usually only notice these disorders when they begin to affect the adolescent's social functioning and well-being (e.g., poor academic performance, truancy, conflicts with peers, etc.)[230] . The low motivation of parents to seek treatment and, on the contrary, their desire to solve problems in the upbringing of adolescents by their own efforts, without the involvement of a specialist[231] .

Predisposing factors combine independent, predominantly socio-demographic characteristics of the adolescent, steadily influencing his/her readiness to seek psychological help. In addition to the prescribed role components related to the age, sex and origin of the adolescent, a significant group of indicators are social attitudes, values and knowledge of the adolescent and his/her family in the context of caring for his/her own mental health. As discussed earlier, the phenomenon of stigmatization arising in the adolescent's social environment also plays a special role. In general, it can be argued that these factors reflect, among other things, cultural norms regarding the acceptance of mental disorders, as well as coping mechanisms perceived as (un)desirable in the socio-cultural community with which the adolescent identifies[232] .

The component of the model, called *barriers and facilitators*, accumulates precisely the socio-medial factors of adolescents' seeking psychological help at the level of their community, external social networks and political-economic configurations of

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[230] Pottick K., Lerman P., Micchelli M. Of problems and perspectives: Predicting the use of mental health services by parents of urban youth // Children and Youth Services Review. 1992. №18. P. 363-378.

[231] Chernikova N. A., Shubina A.. S. Actual requests of parents of adolescent children for socio-psychological help // Izvestia VGPU. 2022. № 10(173). P. 111.

[232] Rogler L., Cortes D. Help-seeking pathways: A unifying concept in mental health care // American Journal of Psychiatry. 1993. №150. P. 554-561.

the institution of professional help. The adolescent's immediate social environment (represented by family members, friends, religious representatives, local "counsellors", etc.) often becomes the first link influencing what channel and type of psychological help the adolescent will choose[233] . Only then can he or she come into contact with professional services, which, however, have their own barriers and facilitators of adolescent referrals. This group of analyses also includes socio-economic factors of availability of psychological help and norms regulating it institutionally and methodologically.

Thus, the model of D. Srebnick, A. M. Kousse and N. Baidar can be called the most comprehensive - at least in the number of selected variables and indicators - methodological scheme for studying adolescents' demand for various types of psychological help. It appears to be a successful example of adapting the classical trajectory of T. Parsons' "career of illness" and restructuring it. Parsons and the restructuring of B. Percosolido's model of network episodes, taking into account the specifics of the target group, those patterns of treatment that are significant and widespread among children and adolescents. However, the limitations of this model stem primarily from its initial focus on qualitative strategy and sociological research methods. As a result, the authors themselves acknowledge the lack of knowledge about the correlation and specific importance of each component: for example, similar variables of "predisposing factors" and "barriers and facilitators" may turn out to be collinear in their influence on the formation of the trajectory of adolescent turnover. In contrast, some indicators may be insignificant when quantitatively validated in individual samples. In general, this model, which is an example of a "qualitative" consolidation of adolescents' pathways to care, can serve as a methodological framework for large-scale quantitative studies that can answer the research questions posed by the authors, verify the hypotheses reflected in the model, and facilitate its revision for analyzing specific socio-cultural groups of adolescents[234] .

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[233] Cauce A. M., Srebnik D. Returning to social support systems: A morphological analysis of social networking // American Journal of Community Psychology. 1990. №18. P. 609-616.

[234] Srebnik D., Cauce A. M., Baydar N. Help-Seeking Pathways for Children and Adolescents // Journal of Emotional and Behavioural Disorders. 1996. №4(4). P. 217.

The theoretical and methodological analysis presented in this paragraph has allowed us to consolidate the available knowledge about adolescents' seeking professional psychological help, the formation of their trajectories and the factors influencing this process in the form of the author's conceptual model. Based primarily on the work of D. Srebnick, A. M. Kousse, and N. Baidar, it represents a research programme of an exploratory nature, aimed at quantitative description of the phenomenon of adolescents' seeking psychological help and the role of socio-medical factors influencing this process. Thus, the content of the model reflects only the components that are achievable and available for measurement through specifically sociological methods of data collection, processing and analysis. The image of the model in the version based purely on secondary analysis and literature review on the topic is presented in Figure 10.
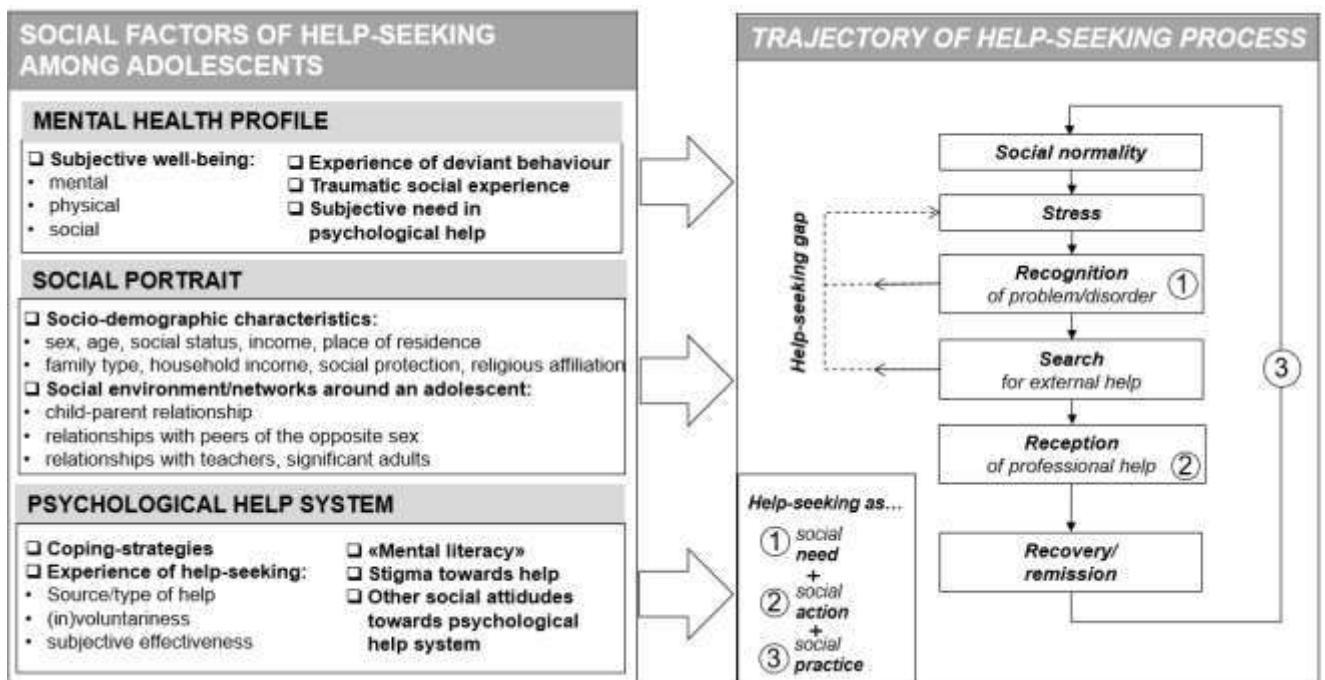
Figure 10. Author's conceptual model of adolescents 14-17 years old seeking professional psychological help

The central element of the model is the **pathways of adolescents seeking professional psychological help.** It is understood as a step-by-step process during which adolescents facing psycho-emotional and mental problems seek and receive the necessary psychological/psychiatric help. In addition to the reviewed model of D. Srebnick, A. M. Kousse, and N. Baidar, which refers to the model of referral to mental health professionals by H. Goldsmith, the concept of "trajectory" relies mainly on the idea of T. Parsons'

"illness career". Parsons in the framework of the systems approach and its subsequent development in the model of multiple trajectories by A. Twaddle and R. Hessler[235] , the model of network episodes by B. Percosolido[236] . Thus, this approach to depicting adolescents' turnover as a certain trajectory/disease reflects the theoretical development of the sociology of mental health at the turn of the XX-XXI centuries and, in particular, the departure from the original paradigm of morbid behaviour.

The number and content of the stages that make up the trajectory of receiving professional psychological help by an adolescent is determined by a similar "career" model of mental disorder by S. Aneschensel[237] . According to such a model, the trajectory represents the expected scenario in which the adolescent, having been in a situation of stress/distress, returns to a situation of social "normality". It is important to emphasise that the boundaries between 'stress' and 'normality' are conceptualised not in terms of psychiatric diagnoses and symptoms, but in a broader socio-cultural understanding of 'normality'. The already discussed concept of "harmful dysfunction" by A. Horwitz, according to which *stress* (as a departure from the "normal" life of an adolescent) is not a pathology, a mental/mental disorder, but mainly a behavioural reaction of an adolescent to stressful life events perceived by him/her and/or others as *socially dysfunctional[238]* .

Most notable are the three stages in the adolescent's treatment trajectory, labelled by their respective numbers:

1. **Recognition of the problem**. It is, according to D. Karp, a form of self-attribution and marks a turning point in which the adolescent finally realises that "something is wrong" with him/her[239] . From this, first of all, the need for external psychological help is formed, which determines the search for such support or professional services. The

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[235] Twaddle A. C., Hessler R. M. A sociology of health. St. Louis, MO: Mosby, 1977. P. 124.

[236] Pescosolido B. A. Illness careers and network ties: A conceptual model of utilisation and compliance. In G. Albrecht & J. Levy (Eds.), Advances in medical sociology, (pp.164-181). New York: JAI Press, 1991.

[237] Aneshensel C. S. Mental Illness as a Career: Sociological Perspectives. In: Aneshensel C.S., Phelan J.C., Bierman,A. (eds). Handbook of the Sociology of Mental Health. Springer, Dordrecht, 2013. P. 607.

[238] Horwitz A. V. Transforming normality into pathology: The DSM and the outcomes of stressful social arrangements // Journal of Health and Social Behaviour. 2007. №48(3). P. 213.

[239] Karp D. A. Speaking of sadness: Depression, disconnection, and the meanings of illness. Oxford, UK: Oxford University Press, 1996. 256 p.

stage of "problem recognition" in the indicated trajectory logically correlates with the first component of *appealability as a social need of* an adolescent, which was previously outlined in the author's three-component model of appealability for psychological help (see Paragraph 2.1.).

2. **Receiving professional help**. This is the moment of actual contact between the adolescent and mental health professionals. This is when the type of help to be provided is determined, the problem is conceptualised and a diagnosis is formulated, and decisions are made about possible forms of therapy, medicalisation and hospitalisation. In addition, an important transition point in this progression may be a change in the adolescent's *identity*, the perception of the adolescent as "mentally unhealthy", "mentally unstable", etc.: some studies have shown that such changes in self-definition can, in particular, lead to self-stigmatisation of the adolescent and markedly worsen the effectiveness of care and therapy[240] . Direct contact and interaction with specialists correlates with the second component of the model - *addressability as a social action*.

3. **Reproducibility of the trajectory.** According to the previous conceptualisation of the central concept, the third component of adolescents' seeking professional psychological help represents the formation of a sustainable social practice. As a result, the use of professional services becomes an accessible and habitual coping strategy for adolescents to survive stressful situations and return to their "normality" after receiving the necessary help and support. It can be argued that the manifestation of the third component - social practice of addressability - is the successful completion of the entire trajectory and the formation of its cyclical nature in the adolescent's life.

Thus, comparability of the two author's models with the theoretical and methodological basis accumulated within the framework of the sociology of mental health is achieved. The concept of "reversibility" takes the form of a cyclic-dynamic process of adolescent's use of professional sources in solving mental problems and subsequent return to normal social functioning. However, the empirical "reversibility paradox", consisting in the discrepancy between the actual use of these services and the

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[240] Rosenfield S. Labelling mental illness: The effects of received services and perceived stigma on life satisfaction // American Sociological Review. 1997. №62. P. 660-672.

population's actual need for them, as well as the vast body of literature, does not allow us to ignore the alternative trajectory. Called the **"help-seeking gap"** (according to the English terminology), this branch of the conceptual model reflects a social phenomenon in which adolescents in need of professional psychological help do not reach the stage of direct contact with professionals and remain without help. The theoretical foundations of this phenomenon can be traced back to the studies and works of L. Srole and A. Fischer in 1970-1980: the authors used the metaphor of the "tip of the iceberg" to refer to the "treatment gap"[241] . The already discussed work of D. Srebnick, A. M. Kousse and N. Baidar also reflected the related concept of "unmet need", signaling a significant discrepancy between the number of children in need of professional help and the proportion of those who actually receive it[242] .

A conceptual explanation of this phenomenon was presented in the "cycle of avoidance" model developed by a team of researchers led by L. Biddle[243] . Their dynamic model explains a different career trajectory of mental problems, in which adolescents do not resolve them, but adapt to the symptoms, deny them and return to the stage of "normality". With each new cycle, the threshold of perceived distress rises, which can lead to an even greater reluctance to seek qualified help in the future. Thus, the "treatment gap" is the author's development of previous developments in this area and, moreover, an empirically significant indicator, the study and measurement of which contributes to the reassessment and development of adolescent-oriented programmes aimed at overcoming this gap.

The left half of the author's model represents a set of **factors** influencing the adolescent's behaviour at different stages of his/her treatment trajectory. The categorization of factors is based on the model of D. Srebnick, but revises each factor set

[241] Srole L., Fischer A. K. (Editors). Mental health in the metropolis: The Midtown Manhattan Study. New York: McGraw-Hill, 1975. P. 209.

[242] Srebnik D., Cauce A. M., Baydar N. Help-Seeking Pathways for Children and Adolescents // Journal of Emotional and Behavioural Disorders. 1996. №4(4). P. 212.

[243] Biddle L., Donovan J., Sharp D., Gunnell D.. Explaining non-help-seeking among young adults with mental distress: A dynamic interpretive model of illness behaviour // Sociology of Health & Illness. 2007. №29. P. 983-1002.

taking into account the empirical possibilities of sociological research of adolescents aged 14-17.

- The ***mental health profile*** accumulates data on the adolescent's susceptibility to mental problems and risk factors that threaten the adolescent's subjective well-being. The *subjective well-being* variable itself appears as a comprehensive assessment of the adolescent's psychological, physical and social well-being in the considered dichotomy "normality - stress". In addition, the experience of *deviant behaviour (*predominantly in the context of addictive, self-destructive and illegal behaviour), as well as the adolescent's *traumatization* and *victimization* are taken into account. It is also important to measure the "mental health profile" by asking directly about the need for professional help, in the course of which the respondent is able to formulate an independent request and express his or her social need. Given that by adolescence behavioural problems are no longer the main manifestation of psychopathology, the need to identify the internal, latent problems of the adolescent through surveys/self-reports increases[244] .

- ***Social portrait*** is a methodological section of two sets of variables, correlated with similar components of "predisposing characteristics" by D. Srebnick, A. M. Kousse and N. Baidar and the "social content" of network episodes in the NEM-II models and its adaptation for the study of children and adolescents REV NEM. The first subgroup consists of *socio-demographic indicators* that define the socio-role specificity of both the adolescent in need of help and his/her family/household environment. The second subgroup is an adaptation of the *network approach* to the analysis of adolescents' seeking psychological help, in which the indicators reflect the characteristics of the social networks in which the adolescent is included and the interpersonal relations within them.

- **The psychological care system is a** factor set, most often referred to as the "treatment system" in all the models discussed above, drawing on B. Percosolido's

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[244] Slobodskaya E. P. Contribution of sex, age and sensitivity to reinforcement to the structure of personality traits and common psychological problems of children and adolescents // Psychology. Journal of Higher School of Economics. 2017. №1. P. 133.

network approach. Percosolido. Its author's adaptation consists in departing from the study of the actual institutional aspects of the mental health protection system, which are inaccessible for a field sociological study among 14-17-year-old adolescents. Nevertheless, the characteristics of this system are revealed by analyzing the adolescent's readiness to interact with it. The key variables here are the *coping strategies* used by the adolescent to resolve his or her own psychoemotional difficulties and, if the respondent has already been in contact with psychological services, the descriptive characteristics of this interaction and personal experience. In addition, stigma factors, mental health literacy, and other social attitudes that can act as barriers and facilitators to adolescents' seeking professional psychological help are important predictors of adolescent referrals.

In conclusion, it is worth noting that the author's model takes into account the principles of the new sociology of childhood and, in particular, the participatory approach of sociological research on this issue. The model is aimed, first of all, at a focused study of adolescent turnover and its factors from the perspective of adolescents themselves. The life experience, interests and needs of adolescents themselves can have a special factor load, as opposed to the structural impact of family, education and health care institutions, which are presented here more as private predictors of individual components. Thus, the author's model of adolescents 14-17 years old seeking professional psychological help reflects the current trends and requests of the sociology of mental health and the new sociology of childhood, and its testing has become the goal of one of the most large-scale and comprehensive sociological studies in this subject field.

Chapter 3. EMPIRICAL RESEARCH OF ADPLESCENTS' HELP-SEEKING IN MODERN RUSSIAN SOCIETY

3.1 Methods, aims and objectives of the empirical study of adolescents' psychological help-seeking in Russian society

The theoretical and methodological foundations of the thesis, discussed in the previous chapters, allow us to form the design of the present empirical study. The choice of its objectives, hypotheses, methods, object and subject of study correspond to the tradition and methodological apparatus of empirical studies of social reactions within the framework of the sociology of mental health. The key configurations of the research design are presented below.

The object of the study is adolescents 14-17 years old living in 85 subjects of the Russian Federation. Subsequently, the analysis focuses on splitting this object into two subgroups - adolescents with and without experience of seeking professional psychological help.

The subject of the study is factors (barriers and facilitators) determining adolescents 14-17 years old seeking psychological help.

The aim of the research is to form a complex model of factors of 14-17 years old adolescents' appeal for psychological help.

Objectives of the study:

- To determine the specifics of formation of coping strategies and, in particular, the need for psychological help among adolescents 14-17 years old;
- to identify the peculiarities of adolescents' application and non-application for professional psychological help, their main determinants;
- To identify the attitudes of adolescents to receiving professional psychological help using digital technologies, and the practices of those who have experience of seeking help online;

- To determine the prevalence of the practice of seeking psychological help among Russian adolescents, its specifics and trends;
- To identify and systematise the factors of seeking psychological help among adolescents in the context of socio-demographic groups and forms of psychological services;

Hypotheses of the study:

- The regression model of adolescents seeking psychological help highlights socio-demographic factors as key predictors of treatment;
- There is an empirical paradox of "treatment gap" - high need of RF adolescents in psychological help and low rates of seeking it;
- Sex specificity of the scenarios of seeking psychological help among Russian adolescents is observed;
- The digital transformation of the institute of psychological help is not expressed in the prevalence of cases of teenagers applying for remote help in comparison with face-to-face help;
- The perception of stigma is a weak ambivalent factor that does not determine whether adolescents in contemporary Russian society seek psychological help.

The **empirical base of** the thesis was formed by the following studies conducted with the author's participation at all stages of the projects:

1. Study of practices, attitudes and values of students of St. Petersburg, carried out by Sociological Clinic of Applied Research of St. Petersburg State University for the Committee on Law, Order and Security of St. Petersburg (N = 22, age criterion 14-19 years). Method of collection - focus groups, period - December 2021.

The results of the study provide valid data on the experience of seeking psychological help from different social groups: students of secondary educational institutions in St. Petersburg aged 14-16 (6 informants), pupils of the "Children's Home" of PI № 70 aged 15-17 (8 informants), and first-year students of various educational programmes at St. Petersburg State University aged 17-18 (8 informants). Despite the

amount of qualitative data that allowed us to identify pilot sets of factors of adolescents' seeking help, the opinion of adolescents from other regions of the Russian Federation, as well as residents of rural areas with a different infrastructure for receiving psychological help, is unrepresented. Thus, the identified codes reflected the opinions and experiences of adolescents and young people in St. Petersburg of different levels of well-being, but may not have been confirmed by the sample from other regions and sociocultural spaces.

2. Sociological research "Adolescents 360°" within the framework of the strategic programme " Adolescents of Russia" of the Russian Presidential Commissioner for Children's Rights (N = 17,000, age criterion 14-17 years). Method of collection - online survey, period - June-September 2022.

The validity of the quantitative data was ensured by following procedures:

- cleaning of the data set, checking for invalid questionnaires - by time of completion, IP-address of the respondent who took the survey via multilink from different devices, logic of filling in and presence of mutually exclusive answers in one questionnaire;
- strict adherence to the quota target to achieve the declared representativeness, repair of the sample when disproportions in its individual segments are detected.

Possible biases that reduce the validity of the data can probably be attributed to two features of the online survey:

- Despite sending written instructions for the distribution and completion of the survey through the main channels of respondent recruitment, it was impossible to control the work of instructors. As a result, it is not possible to check the correctness of filling out the questionnaires by adolescents of educational institutions with a teacher acting as an instructor. In case of difficulties and misunderstanding of specific questions of the questionnaire (despite the preliminary piloting of the toolkit), the respondent may not have received proper explanations.
- As the quota is not cross-sectional, the representativeness of individual sub-samples at the level of "boys 14 years old from urban areas", "girls 16 years old

from rural areas", etc. is not guaranteed. There may be deviations between such sample segments and the available statistical information on the general population, resulting in some bias in the data on second-stage demographic groups ("15-year-old boys", "17-year-olds from rural areas", etc.).

The sample size of the study was 17,000, with a general population of 6,133,424 adolescents aged 14-17 living in the Russian Federation. With this sample, the confidence probability was 99% and the confidence interval was within $\pm$ 1%. The general population corresponds to the statistical bulletin of the Federal State Statistics Service as of 1 January 2022.

The study sample is a quota sample: the quota assignment (Table 1) reflects the distribution of the target group of adolescents by main demographic indicators, according to state statistics from 2022. Thus, this sample is representative by sex, age and type of locality in which the adolescent lives in 8 federal districts of the Russian Federation. The volume of each quota in frequencies is presented in Table 2.

Federal district	Sex		Age				Type of settlement		Total
	Male	Female	14	15	16	17	Urban	Rural	
Central	51,2%	48,8%	25,9%	24,5%	24,9%	24,7%	81,9%	18,1%	**23,6%**
Northwest	51,2%	48,8%	26,1%	24,4%	24,4%	25,1%	84,5%	15,5%	**8,6%**
Southern	51,3%	48,7%	26,6%	24,7%	24,4%	24,3%	59,2%	40,8%	**11,3%**
North Caucasian	50,5%	49,5%	26,8%	24,2%	25,0%	24,0%	46,2%	53,8%	**9,2%**
Volga	51,3%	48,7%	26,9%	24,3%	24,1%	24,7%	72,0%	28,0%	**19,7%**
Ural	51,2%	48,8%	26,6%	24,6%	24,3%	24,6%	80,5%	19,5%	**9,0%**
Siberian	51,4%	48,6%	26,9%	24,3%	24,2%	24,6%	71,2%	28,8%	**12,5%**
Far Eastern	51,2%	48,8%	26,5%	24,5%	24,4%	24,6%	69,2%	30,8%	**6,3%**

Table 1. Quota setting of the sample population, %

Federal district	Sex		Age				Type of settlement		Total
	Male	Female	14	15	16	17	Urban	Rural	
Central	2050	1956	1036	982	998	990	3282	724	**4006**
Northwest	745	710	379	355	355	366	1230	225	**1455**
Southern	986	937	511	475	469	468	1139	784	**1923**
North Caucasian	791	774	419	378	391	375	723	842	**1565**
Volga	1715	1628	898	813	806	826	2409	934	**3343**
Ural	780	745	406	375	370	374	1228	297	**1525**
Siberian	1089	1031	571	515	513	521	1510	610	**2120**
Far Eastern	544	519	282	260	260	261	735	328	**1063**

Table 2. Quota setting of the sample population, frequencies

The sample is spontaneous; the method of sampling was river-sampling, which involves posting links to questionnaires on various platforms/portals/social media/internal mailing lists and spontaneous sampling. In addition, the sample can also be characterized as non-probability and non-random due to the choice of online questionnaires as the method of data collection.

Recruitment of research participants by distributing links to complete the survey was carried out with the help of government agencies and civil organizations responsible for the protection of children's rights, among others:

1) The Public Council under the Russian Presidential Ombudsman for Children's Rights.

2) Commissioners for the Protection of Children's Rights of all constituent entities of the Russian Federation.

3) Children's Public Councils under the Child Rights Ombudspersons in the constituent entities of the Russian Federation.

(4) The Parents' Platform, a consultative and advisory public body under the Children's Ombudsman.

5) Regional Ministries (Committees/Departments) of Education.

In addition to the above-mentioned statistical distributions, it is worth noting the following features of the sample population, which appeared due to its spontaneous nature. Thus, the majority of respondents (73%) are students of secondary general education (secondary schools) and specialized (lyceums/gymnasiums) educational institutions, a quarter (25%) are students of colleges/technical schools. Slightly more than 1% were students of public schools, and less than 1% were pupils of boarding schools and students of specialized/correctional schools. A limitation of the study may be the lack of coverage of adolescents engaged in home/family education - but it is recognized that

their share (especially of 14-17-year olds, as final examinations approach) in the education system is insignificant and represents more of a private research case[245] .

Methods of data collection, processing and analysis. The qualitative phase of the study, carried out within the framework of the combined strategy, was implemented in November-December 2021. through a series of 3 focus groups (two face-to-face and one distance) with student adolescents and young adults 18-19 years old. Transcripts of the conducted focus groups were processed using open and axial coding. The qualitative data analysis was completed by forming pilot sets of factors of adolescents' seeking psychological help, identifying key research questions for the subsequent quantitative survey, and developing a pilot conceptual model of adolescents' seeking psychological help. The greatest attention among them was paid to stigmatization and self-stigmatization, as well as to the adolescent's own experience and his/her significant environment in the initial contact with the institute of psychological help and interaction with a specialist.

The method of collection of the quantitative stage of the research was an online survey of adolescent students aged 14 to 17. The choice of this method is due to the minimization of power structures and risks of breach of confidentiality, the advantages of online questionnaires of children and adolescents compared to traditional ones. By remaining anonymous in their "natural environment", the adolescent is thus more likely to provide reliable and quality data[246] . Questionnaire construction and response collection were conducted on the "Anketolog" platform, which allows for quick adjustment of data collection and uploading of the data set in order to monitor quota occupancy. The toolkit consisted of 86 questions divided into a socio-demographic block and 5 thematic blocks. In the process of creating the questionnaire for adolescents, special attention was paid to comfortable language and communication style oriented to the target group. In particular, a more trusting communication style was ensured by using simple

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[245] Yashina M. N. Portrait of Russian homeschoolers' families: based on the results of online surveys // DISKURS. 2020. № 6(6). P. 93.

[246] Yashina M. N. Questioning and interviewing children. Childhood of the XXI century: socio-humanitarian thesaurus: thematic dictionary-reference book / Ed. by S. N. Mayorova-Shcheglova. N. Mayorova-Shcheglova. Moscow: Izdvo ROS, 2018. P. 440.

and understandable turns of speech, as well as neologisms and "slang" words understandable to the target group. The addition of emoji, memes and gif-images common in the youth environment also ensured comfortable passing of the questionnaire.

The array of collected questionnaires was processed in IBM SPSS Statistics software: in the course of database processing, the questionnaires were cleaned, their validity was checked for key demographic indicators, the necessary sample repair was performed, and open and semi-closed questions were coded. Univariate and bivariate statistical tools were used to analyze the obtained data: descriptive analysis, calculation and comparison of averages, construction of z-statistics, correlation analysis (based on Spearman's and Pearson's R coefficients, as well as Gamma coefficient to determine inter-rank relationship). Subsequently, more sophisticated methods of statistical analysis were applied, including the construction of logistic regression models (to validate the model of adolescents seeking psychological help).

The limitations of the study include the spontaneous nature of the sample, which is predetermined by the method of data collection, as well as its non-probability due to its collection through an online survey, which excludes adolescents who did not have access to Internet resources at the time of the study. In addition, the online survey was collected using a streaming method, which also increased the non-randomness of the sample and limited the reproducibility of the survey results and their extrapolation to an identical quota sample generated by probability methods.

3.2 Features and trends of Russian adolescents' help-seeking according to the results of the empirical study

This paragraph presents the results of descriptive analysis reflecting the prevalence of the main practices and attitudes of RF adolescents seeking professional psychological help, as well as the characteristics of their appeal as a complex phenomenon measured through the following components of the author's conceptual model:

- Articulation of the **request to** receive this psychological help. It correlates with the first component of addressability as "social need". It is measured by the nominal

scale (the wording of the question - *"Tell us, please, do you need psychological help now?"*).

- **Experience of** seeking psychological help. Correlates with the second component of treatment as a "social action". It is measured by means of a nominal scale (the wording of the question - *"Have you ever sought psychological help in your life?"*).

- **The practice of** addressing to a psychologist as a sustainable coping mechanism to solve personal psycho-emotional problems. Correlates with the third component of referral as a "social practice". It is measured by means of a nominal scale with the possibility of multiple answers (the wording of the question - *"If you suddenly encounter some personal or emotional difficulties in your life, how do you most often try to cope with them?"*).

The prevalence of various coping strategies used by adolescents is presented in Fig. 11. Informal sources of help from the nearest social environment - family members (50.8%) and friends and peers (31.2%) - are key for adolescents.
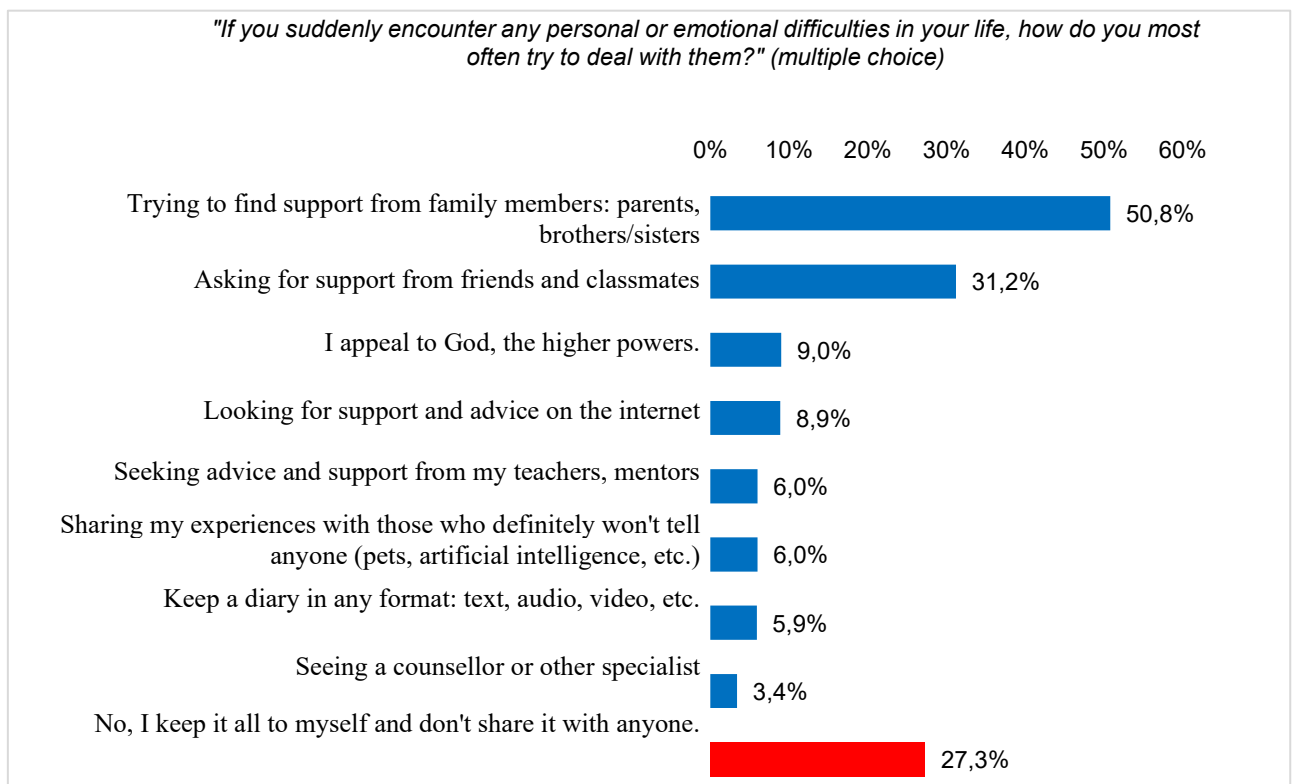
Figure 11. Prevalence of different coping strategies for dealing with psycho-emotional problems among adolescents (N=17,000)

Alternative informal sources of psychological help in the form of religious practices (9%), Internet resources (8.9%), as well as teachers, mentors (6%) and non-interpersonal tools (keeping diaries, seeking support from animals, artificial intelligence, etc.) are used much less frequently. Among the proposed coping mechanisms, the lowest prevalence is observed for seeking professional psychological help (3.4%). At the same time, 27.3% do not seek any psychological help at all, preferring to cope with personal problems on their own, which may be a risk factor for the development and aggravation of psychological problems in these adolescents without seeking external sources of help. Nevertheless, the measurement of treatment as an experience of contact with psychological services shows that 14.5% of RF adolescents have at least once used the help of a psychologist (Fig. 12). 85.5% of respondents have never sought professional psychological help.
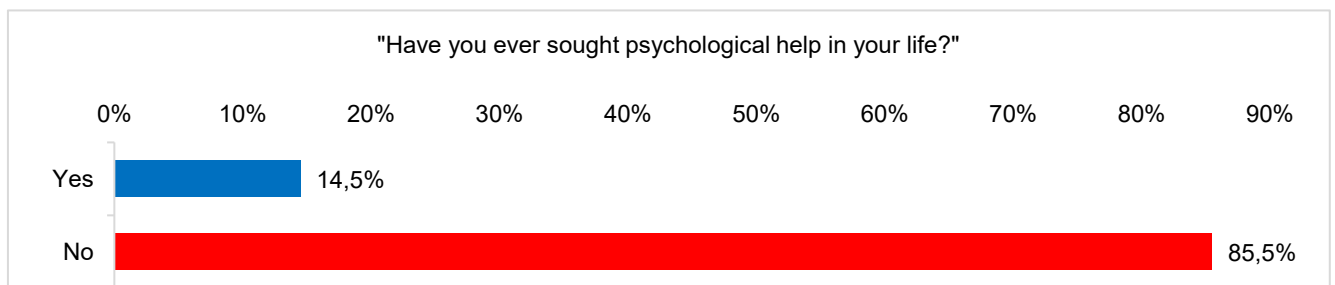
Figure 12. Adolescents' experience of seeking psychological help (N=17,000)

Among the subjective reasons for not seeking psychological help (Fig. 13), which are noted by respondents, the most common are opinions about the lack of need for this intervention (68.3%) and autonomous solution of their own psycho-emotional problems (19%). More instrumental barriers to seeking psychological help (high cost of psychological services, poor awareness of the opportunities to receive them) are practically not presented, as well as the reasons determined by the stigmatization of psychological services and their recipients (fear of public condemnation, negative consequences of contact with the system of professional help in the future life of a teenager). Thus, the key declared factor of non-request for psychological help remains the absence of a request for this help: this can speak both about the absence of significant psycho-emotional problems among 68% of surveyed adolescents, and about the low level

of self-diagnosis and awareness of the need for specialist help, cultivated by other structural factors.

"Please tell us why you have never seen a counsellor?" (multiple choice)

I didn't need any help	68,3%
I believe that I should solve my own problems on my own	19,0%
It's too expensive	11,1%
Didn't know where to find help	8,7%
It's not gonna help anyway	7,1%
I'd be laughed at for that	3,6%
I'm not allowed to go to a psychologist, that's up to my parents to decide	2,7%
Then it's bound to affect my life in some bad way: career, relationships, etc.	2,5%
Refusal to answer	6,4%

Figure 13. Subjective reasons for not seeking psychological help for adolescents (N=14,537)

Speaking about the scenarios of seeking psychological help, it seems significant that the majority of adolescents (69.3%) applied to a specialist on their own initiative (Fig. 14). Among 30.7% of respondents who sought help as a result of external initiative (Fig. 15), the key channel of contact with psychological services is the social environment of significant adults - parents/family members (51.7%) and employees of educational institutions (22.1%). Medical routing (14.5%), as well as the role of peers who can help with advice and refer to the right specialist are less common. In general, this phenomenon of referral can be equally interpreted as a passive consent of a teenager to seek psychological help from a specialist (on the instructions of a significant environment), as well as a forced social action caused by algorithms within educational, medical institutions, etc.

"Was visiting a pcychologist your personal initiative?"

Yes	69,3%
No	30,7%
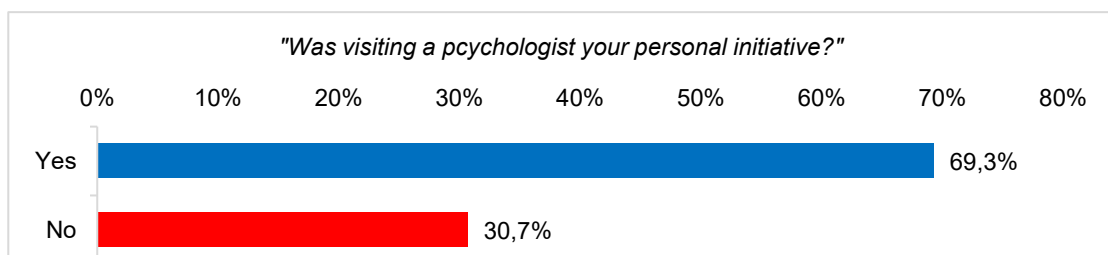
Figure 14: Initiativity in adolescent's experience of seeking professional psychological help (N=2,473)

"Who insisted you visit a psychologist?"

Parents or close family members	51,7%
Teachers	22,1%
Doctor (by referral)	14,5%
Friends	8,3%
Partner	3,5%
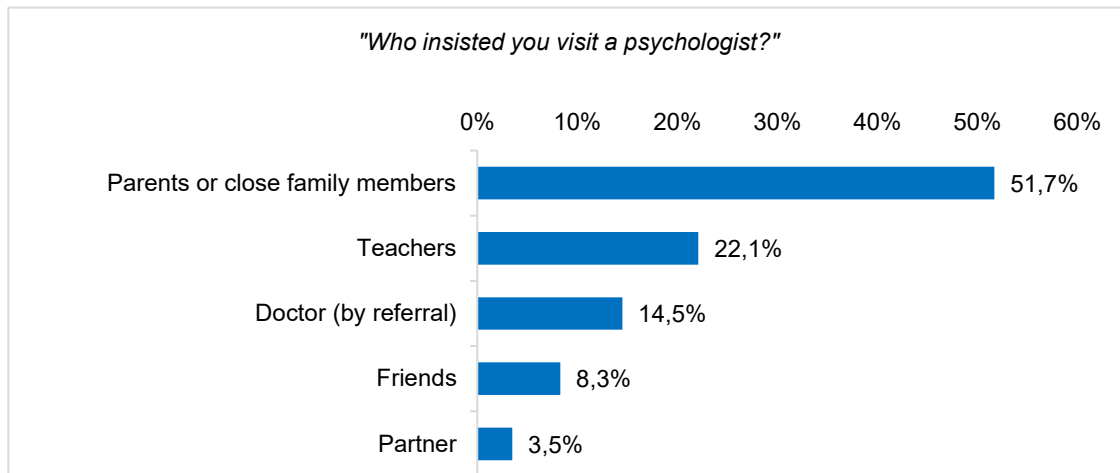
Figure 15. External initiators of teenager's request for psychological help (N=689)

Digitalization of psychological services is currently becoming an important factor in the accessibility of various social groups to psychological help. Nevertheless, the main share of adolescents (72%) applied to a specialist through face-to-face counselling (Fig. 16). Much less frequently, respondents resorted to an exclusively remote format (15.8%) or a combined format (12.2%), in which digital technologies are used as an auxiliary tool that overcomes the objective limitations of space-time or the physical condition and mobility of the adolescent. According to Figure 17, the most common format for receiving remote assistance is online text chat with a psychologist. About a fifth of respondents used other tools, including online chat embedded in the interface of psychological help websites (22.8%), helplines (22.1%) and video consultations with a specialist (18.5%). Thus, the vast majority of adolescent contacts with a specialist were individual, often anonymous, while one of the proposed group/mass formats of psychological counselling showed the lowest prevalence (15.6%).

"Please tell us, in what format did you receive psychological help?"

Face-to-face consultation	72,0%
Remotely	15,8%
Both in person and remotely	12,2%
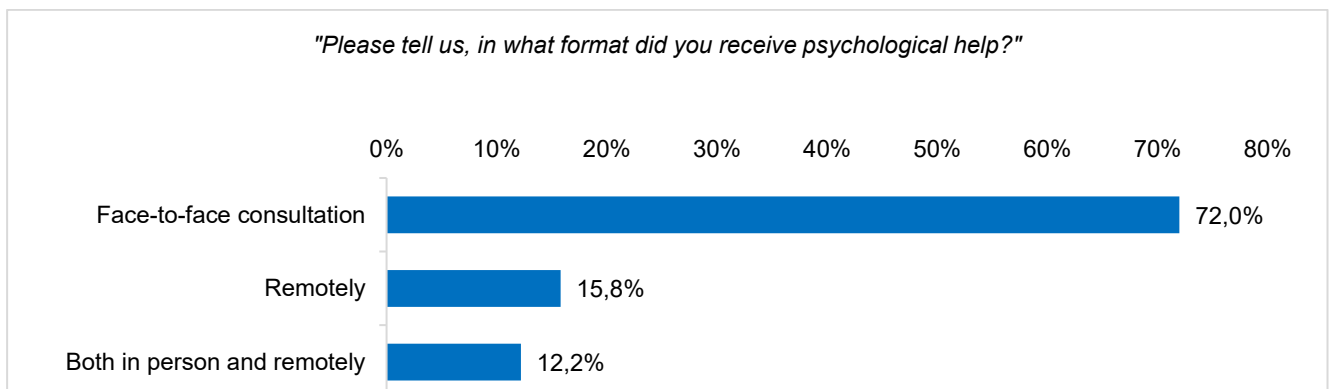
Figure 16. Format of adolescents' receipt of psychological services (N=2,473)

"In what distance format were you assisted?"

Format	Percentage
Through online chat with the psychologist (including via messengers)	44,0%
Via online chat on the website	22,8%
Through a helpline, hotline	22,1%
Through remote counselling (Zoom, Skype)	18,5%
Through online group training, webinars, etc.	15,6%
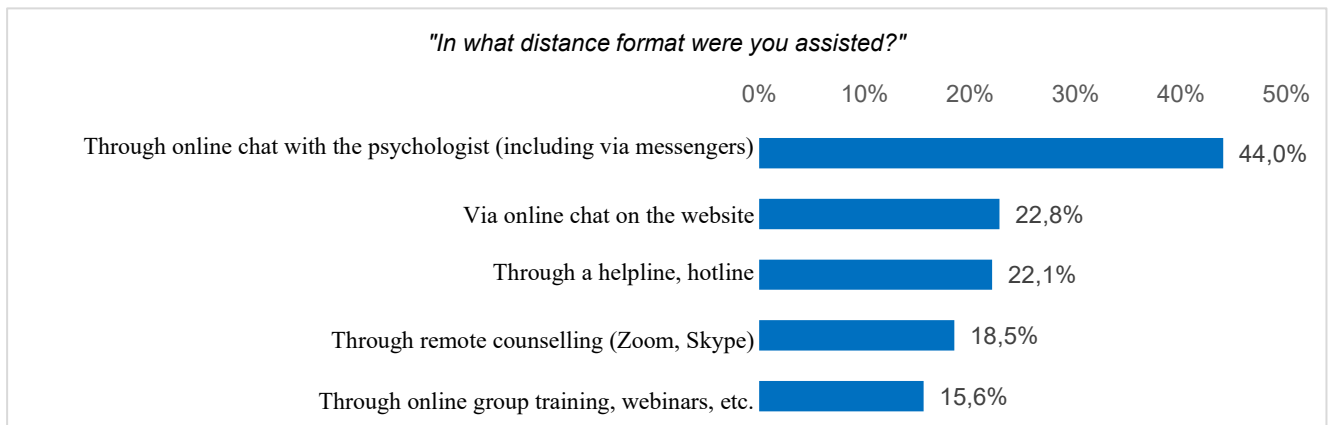
Figure 17. Format of adolescents receiving remote psychological assistance (N=692)

An important factor in seeking psychological help is the previous experience of applying to a psychologist, which forms a positive attitude to this practice, trust in the specialist, as well as confidence in the effectiveness and safety of this intervention. The majority of adolescents (53.4%) who sought professional psychological help evaluate their experience positively (Fig. 18). 26.1% of respondents were rather negative about their previous contact with a specialist, with about 5% reporting harm in the course of providing help. Thus, the generalized perception of the quality of psychological assistance to adolescents in Russia is predominantly positive, but has the potential to improve this indicator and reduce the number of negative experiences.

"In your opinion, has psychological assistance helped you?"

Response	Percentage
Yes, my problem is solved	23,4%
Yes, there are big positive changes	30,0%
Yes, but the changes are minor	20,5%
Not sure, nothing has changed	21,3%
No, it only got worse	4,8%
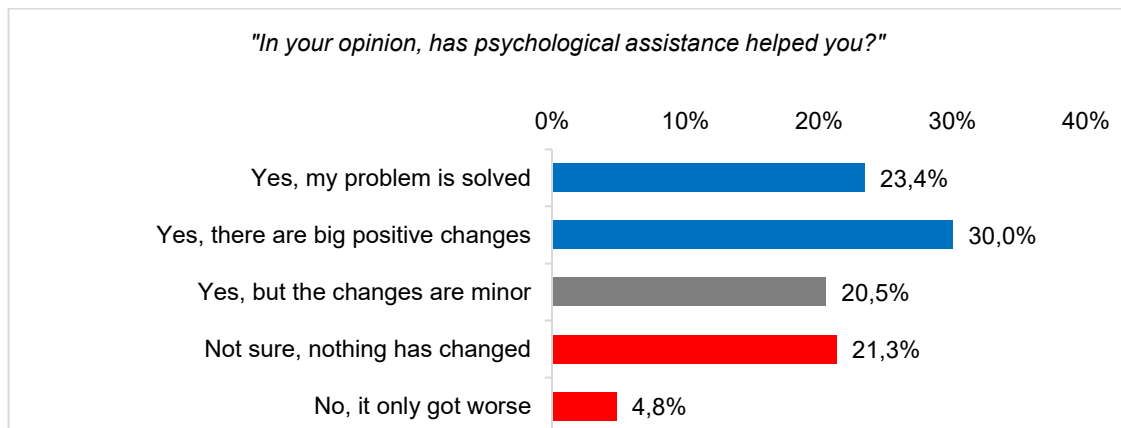
Figure 18. Evaluation of the quality of receiving psychological help by adolescents (N=2,473)

The third component of the assessment of applicability for psychological help is the presence and expression of a request for it on the part of adolescents. According to the data presented in Fig. 19, this request is articulated to different degrees among 21.6% of adolescents: 9.1% of them are sure of the need for external help, 1.4% already receive

psychological services and need to continue them, 11.1% - wish to seek psychological help rather for the purposes of prevention and psychodiagnostics. 68.6% of adolescents declare the absence of the need for psychological help, which practically coincides with the similar indicator in the question about the reasons for not seeking help and allows us to put forward the hypothesis of avoiding professional intervention as a stable coping strategy of this group of adolescents.

"Do you need psychological help now?"

Yes, I need it	9,1%
Yes, I need it and I have been already receiving it	1,4%
No, I don't need it, but I want to contact a psychologist any way	11,1%
No, I don't need it, I don't plan to seek help	68,6%
Refusal to answer	9,8%
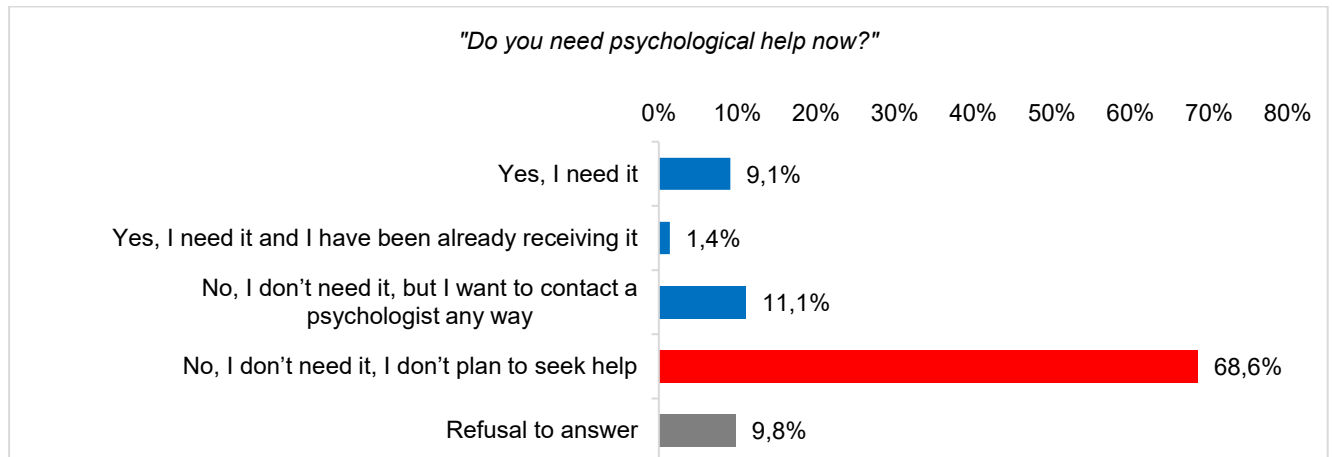
Figure 19. Adolescents' request for psychological help (N=17,000)

Finally, one of the key predictors of seeking psychological help as a social action can be social attitudes towards it. The distribution of respondents' answers by 5 selected categories (including trust in different formats and institutions of help, stigmatization of psychological help and its recipients) is presented in Fig. 20. Thus, the overwhelming majority of adolescents are not inclined to stigmatize either professionals providing psychological services (82.6%) or their recipients (84.7%): there is a lack of negative attitudes towards psychologists and their profession, while seeking their help is not seen as an extreme option, necessary only in the presence of certain psychiatric diagnoses. A remarkable parity of opinions can be observed with regard to different sources of psychological help: face-to-face/distance, public/private, as well as the institution of the school psychologist available to adolescents in secondary schools. Approximately 51% of respondents believe that the effectiveness of distance counselling is not comparable to face-to-face counselling, while 49% are more positive about receiving distance help. 41% of teenagers do not trust state psychological help services, giving priority to private services, while 59% do not consider state help to be inferior. 53% of respondents are

skeptical about the involvement of a school psychologist, 47% are not inclined to believe in their effectiveness in solving problems arising both in the educational space and outside it. Thus, the type/source of psychological help are ambivalent factors of appeal, as well as the factor of emerging stigmatization/self-stigmatization.

"Below we have compiled some statements about psychological counselling. Please rate how much you can agree or disagree with them"

Statement	Totally agree	Agree	Disagree	Totally disagree
High-quality psychological help can be obtained remotely, without a face-to-face visit to a psychologist	17,8%	33,1%	32,7%	16,4%
In state institutions, psychological assistance is not inferior in quality to private psychologists	9,9%	31,1%	36,8%	22,2%
A school psychologist will not help at all, unlike a private specialist	22,1%	30,5%	35,2%	12,2%
Psychologists are charlatans, they do not help at all, but only create the illusion of help and pull money	5,9%	11,5%	45,0%	37,6%
Only mentally ill people seek psychological help	5,8%	10,5%	37,0%	47,7%

Figure 20. Social attitudes of adolescents towards professional psychological help (N=17,000)

Within the framework of summarizing the results of descriptive analysis, the key task is to systematize the tool for assessing the applicability of adolescents for psychological help. Proceeding from the theoretical conceptualization of this phenomenon and the author's operationalization of the concepts, the measurement of "appealability" is possible in three parameters: the assessment of the adolescent's subjective need to receive professional help, the fact of initial application and the presence of a stable practice of application as a coping mechanism. The determining condition arising from the conceptualization of "psychological help-seeking" is the presence of a formed request, the need for external intervention: thus, observations in which the

adolescent does not seek the services of a psychologist due to the absence of a reason and the need for it are excluded from the calculation. As a result, referral rates are calculated as a percentage within the subsample of adolescents who articulated a request for professional psychological help (the question about the need for this help acts as a filter). Indicators of Russian adolescents' turnover in the context of the main socio-demographic indicators are presented in Table 3.

Indicators of treatment of adolescents in the Russian Federation	*Help-seeking (social action)*	*Help-seeking (social practice)*
Total sample	**31,2%**	**8,4%**
Male	30,2%	7,5%
Female	31,7%	8,8%
14 years old	25,8%	6,6%
15 years old	30,8%	7,0%
16 years old	33,7%	9,8%
17 years old	32,9%	9,4%
City dwellers	32,2%	9,1%
Residents of rural settlements	28,0%	6,0%
Central Federal District	33,5%	10,1%
Northwest Federal District	35,6%	8,5%
Southern Federal District	32,1%	8,7%
North Caucasus Federal District	19,3%	5,3%
Volga Federal District	28,0%	8,3%
Ural Federal District	29,5%	6,8%
Siberian Federal District	32,9%	8,1%
Far Eastern Federal District	39,4%	9,3%

Table 3: Recourse of Russian adolescents to professional psychological help in the context of the main socio-demographic groups (among those who need psychological help)

In the context of key socio-demographic indicators important for a comprehensive analysis of this phenomenon at the federal level, insignificant deviations are noticeable for each of the parameters. Thus, girls sought the help of a psychologist more often than boys, and city dwellers more often than the population of rural areas, which may indicate the influence of sex and territorial-infrastructural factor on the prevalence of the practice of seeking professional psychological help. The age structure of the recipients of psychological services allows us to put forward a hypothesis about the tendency of adolescents to seek help as they grow older: it is noteworthy that the highest rates of seeking help as a social action and practice are observed among adolescents of sixteen years of age and slightly decrease by the age of seventeen. In the context of the regional division of the Russian Federation, there is also a rather uneven distribution of rates of

seeking psychological help. Above-average statistics on adolescent referrals are observed in the Central, Northwestern, Southern, and Far Eastern Federal Districts. On the contrary, a below average tendency to seek psychological help is common among adolescents in the Volga, Urals and North Caucasus Federal Districts. The North Caucasus Federal District has the lowest rate of adolescents seeking professional psychological help, which, in addition to the influence of the distal, territorial factor, suggests a hypothesis about the role of the cultural factor that combines the social, religious, and everyday features of the population structure of the North Caucasus region.

However, the indicated trends in the socio-demographic segmentation of Russian adolescents in need of professional psychological help allow us to hypothesize the presence of certain factors, but do not confirm their determining role. In order to select a valid set of indicators that are predictors of adolescents' demand for psychological services and their subsequent categorization within the framework of complex factors, it is necessary to conduct a bivariate correlation analysis, the results of which are presented in the next paragraph.

3.3 Conceptual factor model help-seeking among Russian adolescents

The search for the factors determining the appeal of adolescents for professional psychological help was to test a set of indicators for correlation with the three components of appeal, according to the earlier operationalization of the author's three-component model. As the indicators to be tested, we used an extensive set of indicators (155 in total) related both to the phenomenon of psychological help and psychological services and to the complex portrait of Russian adolescents. Table 4 presents the operationalization of the variables used, previously outlined in the author's model of 14-17-year-old adolescents' demand for professional psychological help.

Factor set	Variables	Indicators
Mental Health Profile	Subjective well-being of the adolescent	General satisfaction with life, assessment of psychological state, assessment of physical health, assessment of well-being in the educational sphere, satisfaction with leisure time, perception of one's own future
	Experience of deviant behaviour	Frequent non-attendance, experience of substance use, experience of alcohol abuse, experience of criminal offences, experience of suicidal behaviour

	Traumatic experience	Experience of physical violence, experience of psychological violence/bullying, experience of cyberbullying victim survivorship
Social profile	Socio-demographic characteristics	Sex, age, region of residence, type of locality, family composition/structure, family completeness, family income, personal income of the adolescent, source of personal income, type of school attended, belonging to socially vulnerable categories, disability/HIA restrictions,
	Adolescent's social environment/networks	Characteristics of intra-family relationships, presence of child-parent conflicts, romantic life, characteristics of relationships and presence of conflicts with peers/teachers/significant adults, level of communication in the online environment, degree of perceived loneliness, perception of the adolescent's proximal security on the scale of family/educational climate/area of residence/city/country as a whole, access to the Internet, level of activity on the Internet
The system of psychological assistance	Coping strategies of the adolescent	Support/help from family members, peer support from peers/classmates, referral to religious practices, referral to educational staff/mentors, use of internet-based counselling and self-help sources, use of other self-help tools, referral to mental health professionals, strategy of not seeking help
	Experience of seeking professional help	Source of professional assistance, type of services rendered, fact of initiative in treatment, presence of network recommendations in treatment, experience of treatment through face-to-face/distance formats of psychological assistance, choice of distance psychological assistance format, subjective evaluation of professional psychological assistance rendered
	Social attitudes towards the professional assistance system	Attitudes towards public/private psychological help services, attitudes towards the institution of school psychologist, trust in various professional help institutions, assessment of perceived stigma in case of seeking psychological help, assessment of the level of stigmatization of recipients of psychological services

Table 4: Operationalization of factors of psychological help-seeking among Russian adolescents 14-17 years old

The presence of a relationship with the variables and their characteristics was checked in two stages. At the first stage, the null hypothesis of independence of variables was rejected by Pearson's chi-square analysis: indicators with p-value < 0.05 were filtered out. Further, Goodman and Kraskal Gamma-correlation analyses (Gamma) were used as a measure of direction and strength: this statistical indicator of inter-rank correlation was chosen as a determinant due to the prevalence of dichotomous and rank scales in the toolkit, which made it possible and correct to compare more than 300 test results. As a result, the indicators that showed Gamma > 0.2 (which, in this case, suggests the hypothesis of a stable relationship) with each of the three variables were eliminated. Their disassembly is presented with sorting by "treatment as coping strategy" as a central element of the analysis of the present study.

Results of correlation analysis

Significant socio-demographic indicators of adolescents' demand for professional psychological help are presented in Table 5. First of all, a high rate of seeking psychological help is demonstrated by adolescents under guardianship or custody: the acceleration of applications from this group of adolescents is a consequence of both a

special set of psychological problems inherent in child-parent relations in substitute families[247] , and the expanded access to socio-psychological support services for these families within the framework of the state policy of the Russian Federation[248] . Another group of significant indicators points to the role of the state of physical health of an adolescent in need of psychologist's assistance and the possibilities of receiving it within the framework of integrated systems of receiving psychological services for psychosomatic and palliative illnesses[249] , as well as socio-pedagogical and psychological support for children with disabilities[250] . Regulated within the framework of the social policy of the Russian Federation and having a rather stable and prescribed status, these indicators were also decided to be categorized as "socio-demographic". In addition, high correlation indicators are noted in the issue of the teenager's sex. Girls demonstrate greater receptivity to information about psychological health and more often than boys faced difficulties that required the involvement of a psychologist. Similar behavioural differences are also noted in other sociological studies of Russian teenagers[251] .

Socio-demographic indicators	Help-seeking as:		Correlation (Gamma) with help-seeking as:		
	coping mechanism	*coping experience*	*coping mechanism*	*coping experience*	*request*
Availability of a guardian/guardian	15,0%	45,0%	0,287	0,358	0,121
Low physical health score	11,6%	42,0%	0,205	0,358	0,541
Existence of health limitations (HIA)	9,9%	36,6%	0,262	0,366	0,42
Female sex	8,8%	31,7%	0,347	0,324	0,541

Table 5. Socio-demographic indicators of psychological help-seeking

The development of deviant (deviating from social norms) behaviour in adolescents is one of the classic factors of psychological problems and an important object of socio-psychological work both within the framework of models of prevention (primary, secondary, tertiary) of deviant behaviour and a comprehensive model of work

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[247] Oslon V. N. Organisational model of psychosocial support of a substitute family // Psychological Science and Education. 2015. № 7(2). P. 2.

[248] Letter of the Ministry of Education and Science of the Russian Federation dated 1 September 2014, No. VK-1850/07 "On restructuring and reforming organisations for orphans and children left without parental care and improving the network of services to support foster families" // Yu

[249] Zuraeva A. M., Jelieva Z. T. Psychotherapeutic work with patients with chronic diseases // ANI: Pedagogy and Psychology. 2018. № 2(23). P. 367-369.

[250] Law of the Russian Federation "On Education in the Russian Federation" of 29.12.2012 № 273 // Rossiyskaya Gazeta. 2012 г. № 303(5976).

[251] Awareness of Russian adolescents about opportunities for psychological help // NAFI. 2022. URL: https://nafi.ru/projects/sotsialnoe-razvitie/osvedomlennost-rossiyskikh-podrostkov-o-vozmozhnostyakh-polucheniya-psikhologicheskoy-pomoshchi/ (date on

with the family of a "difficult teenager"[252] . Nevertheless, the results presented in Tab. 6, demonstrate the different magnitude of correlation between adolescents seeking psychological help and specific forms of deviant behaviour. Information about risky/traumatising experiences was given by respondents in the format of self-reporting (the wording of the question - *"Below we have listed difficult situations that a person can get into. Please note whether there are people in your environment (or you personally) who have found themselves in the following situations"*).[253]

Indicators of deviant experiences	Help-seeking as:		Correlation (Gamma) with help-seeking as:		
	coping mechanism	*coping experience*	*coping mechanism*	*coping experience*	*coping mechanism*
Experiences of substance use	18,9%	60,4%	0,584	0,698	0,665
Frequent non-attendance of classes	14,3%	57,1%	0,299	0,308	0,303
Adolescents who have committed criminal offences	14,2%	59,1%	0,41	0,594	0,483
Experience of alcoholic beverage abuse	11,9%	49,0%	0,421	0,549	0,54
Experience of suicidal behaviour	10,7%	46,2%	0,461	0,666	0,816
Indicators of traumatic experiences					
Victims of physical violence	9,9%	43,8%	0,401	0,582	0,708
Victims of psychological violence/bullying	8,8%	40,5%	0,373	0,583	0,725
Victims of cyberbullying	8,5%	42,2%	0,246	0,479	0,542

Table 6: Indicators of deviant and traumatic experiences

Thus, the highest rates of contact are characteristic of adolescents who have used psychoactive substances, failed to attend classes and committed criminal offences: as a rule, the contact of these adolescents with psychological services is ensured by more comprehensive systems of work - in particular, drug abuse prevention and rehabilitation of drug addicts, the work of an educational psychologist in the prevention of deviations in the educational process and psychological work within centres for the temporary detention of juvenile offenders. On the contrary, low rates of seeking psychological help are noticeable in cases when the adolescent became not an actor in committing deviant acts, but a victim - of psychological violence (including bullying and cyberbullying), physical (including sexualized) violence and his/her own critical state leading to suicidal behaviour. It is important to emphasize that all of the above indicators of deviant

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[252] Romanova E. S. S., Makshantseva L. V. Psychological assistance to families raising adolescents with deviant behaviour // Human Capital. 2018. №6(114). P. 78.
[253] Prokurova S. V., Gaynullina A. V. Psychological assistance to adolescents with deviant behaviour in a temporary detention centre for juvenile offenders // Psychopedagogy in law enforcement agencies. 2019. №2(77). P. 150-157.

behaviour are predictors of seeking psychological help, a risk to the comprehensive well-being of the adolescent and a marker of the work of socio-psychological services necessary to ensure contact of the adolescent in a difficult life situation with a specialist in the field of mental health.

A separate group of indicators, shown in Tab. 7, was focused on adolescents' subjective perception of proximal and distal security. Based on the results, adolescents' perception of their own insecurity on different spatial scales (from the place of residence to the country as a whole) is an important factor in seeking professional psychological help. At the same time, there is a noticeable weakening of referral rates as the "dangerous space" increases: the key indicator is the unsafe environment within dysfunctional families, levelled by socio-psychological support for families and adolescents at risk[254] . A slightly less significant predictor is the aggressiveness of the educational environment, which aggravates the social disintegration of adolescents at risk[255] .

Indicators of perceptions of safety	Help-seeking as:		Correlation (Gamma) with help-seeking as:		
	coping mechanism	*coping experience*	*coping mechanism*	*coping experience*	*coping mechanism*
High level of feeling of danger: home	13,0%	47,1%	0,536	0,624	0,811
High level of perception of danger: school	9,6%	36,8%	0,309	0,438	0,639
High level of perception of danger: neighbourhood	10,9%	38,4%	0,319	0,384	0,561
High level of feeling of danger: urban/rural settlement	8,9%	35,0%	0,237	0,344	0,569
High level of feeling of danger: Russia	8,9%	34,9%	0,268	0,345	0,53

Table 7: Indicators of perception of safety

At the level of proximal social interaction, adolescents' social environment factors were also investigated and the results are shown in Table 8. 8. Particularly significant here is the factor of the presence in the adolescent's immediate environment of persons who have had experience of deviant behaviour (who have used psychoactive substances, committed criminal offences, become victims of psychological/physical violence and are prone to suicidal behaviour). However, the mechanism of the influence of these indicators

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[254] Socially dangerous situation of families and children: analysis of concepts and methodology of assessment / ed. by E. R. Yarskaya-Smirnova, V. M. Markina. Moscow: LLC "Variant", 2015. 100 с.

[255] Serdyukov B. V. Integration aspects of the social environment of adolescents from the high-risk group // Vestnik of St. Petersburg University. Sociology. 2020. №13(2). P. 196.

on adolescents' seeking psychological help remains not completely clear: the presence of such people in the social environment can be both a risk factor for the development of deviant tendencies in the adolescent (generating the phenomenon of multicollinearity with indicators of deviant behaviour) and a negative, preventive example that stimulates the adolescent's concern for his or her own psychological health. Another important factor of treatment is the presence of romantic relationships among adolescents: more often, seeking the help of a psychologist can be associated with specific requests of adolescents who have a romantic partner or are in search of one[256] . In addition, the very presence of a significant environment and the exclusion of social deprivation are also important: adolescents who suffer from loneliness, even in the company of formal mates, are more likely to need the help of a specialist, although their rates of seeking help are insignificantly different from the statistical average.

Indicators of social environment	Help-seeking as:		Correlation (Gamma) with help-seeking as:		
	coping mechanism	*coping experience*	*coping mechanism*	*coping experience*	*coping mechanism*
Social environment: people who have used psychoactive substances	11,2%	41,8%	0,436	0,473	0,526
Social environment: victims of cyberbullying	10,7%	36,5%	0,329	0,284	0,32
Having a romantic life, having/finding a romantic partner	10,1%	37,9%	0,325	0,317	0,154
Social environment: people who have committed criminal offences	9,8%	39,4%	0,357	0,396	0,463
Social environment: people who have exhibited suicidal behaviour	9,8%	34,4%	0,312	0,33	0,478
Social environment: victims of physical violence	9,3%	37,8%	0,348	0,421	0,549
Adolescents' feelings of loneliness	8,3%	35,7%	0,204	0,399	0,602

Table 8: Indicators of social environment

A separate group of significant indicators of referral were personal problems experienced by adolescents and forming a request for the involvement of a psychologist. In addition to the above-mentioned difficulties in building romantic relationships and social circle, which can act as a source of informal psychological help for adolescents, attention should be paid to such adolescent problems as non-acceptance of their values and worldview, opinions and personal choices, disrespect for personal space and difficult

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[256] Umnyashova I. B., Zaporozhskaya D. E. Psychological counselling of adolescents in an educational organisation // Vestnik prakticheskoi psikhologii obrazovaniya. 2016. № 3(10). P. 9.

relationships with significant adults both inside and outside the family. Despite the fact that most of the highlighted adolescent problems (with peers, family, social environment and society as a whole) are of an invariant nature and are poorly influenced by social transformations, in particular, digitalization[257] , it seems important to maintain their visibility as markers of both the psychological well-being of adolescents and the work of psychological services to meet these demands on the part of Russian adolescents.

Indicators of adolescent personality problems	Help-seeking as:		Correlation (Gamma) with help-seeking as:		
	coping mechanism	*coping experience*	*coping mechanism*	*coping experience*	*coping mechanism*
Difficulties in romantic relationships	11,0%	33,8%	0,34	0,232	0,332
Non-acceptance of values and worldviews	9,8%	34,3%	0,385	0,374	0,572
Difficulties in relationships with family members	9,8%	34,2%	0,303	0,275	0,391
Lack of attention and support from the environment	9,2%	32,0%	0,307	0,347	0,609
Lack of respect for personal space by adults	8,5%	33,3%	0,306	0,378	0,571
Feeling generally misunderstood by adults	8,5%	32,4%	0,377	0,487	0,703
Condemnation of adolescent's opinions and choices by adults	7,8%	32,8%	0,236	0,327	0,506

Table 9: Indicators of personal problems when seeking psychological help

Despite the theoretical significance of conceptualizing the social attitudes of adolescents towards professional psychological help, the indicators of this group were an insignificant factor in adolescent referrals. Of the identified attitudes, only the stigmatization of receiving psychological services showed a stable correlation: at the same time, the presence of a stigmatizing attitude about receiving psychological help exclusively to solve mental illnesses stimulates the turnover of this group of adolescents, while respondents who disagree with this thesis, on the contrary, resort to the help of a specialist less often. Such a trend in the Russian scenario challenges foreign popular concepts, according to which stigmatization of psychological help is a barrier to adolescent turnover and, on the contrary, is offset by successful experience of seeking psychological help and its acceptance as a coping mechanism for solving psychological

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[257] Regush L. A., Alekseeva E. V., Veretina O. R., Orlova A. V., Pezhemskaya Y. V., Pezhemskaya Yu. P. Psychological problems of adolescents in Russia of the period of digitalisation (2010-2020) // Izvestiya Rossiiskogo gosudarstvennogo pedagogicheskogo universitet n.a. A. I. Herzen. №2022. P. 17.

problems[258] . As an explanation for this phenomenon, we can put forward hypotheses about the greater "medicalization" of mental problems in the Russian Federation, as well as the greater representation in the sample of cases of adolescents being routed within the framework of prevention and treatment of mental disorders in adolescents (by doctor's referral), and a possible shift in the sample, which caused a greater representation of adolescents who received help directly from a psychiatrist rather than a psychologist.

Indicators of social attitudes to psychological help	Help-seeking as:		Correlation (Gamma) with help-seeking as:		
	coping mechanism	*coping experience*	*coping mechanism*	*coping experience*	*coping mechanism*
Stigmatization of recipients of psychological services	11,0%	35,7%	0,261	0,244	0,324
Non-stigmatization of recipients of psychological services	8,1%	30,6%	0,261	0,244	0,324

Table 10. Indicators of social attitudes to psychological help

The group of indicators of alternative coping mechanisms, not previously conceptualized in the literature as a separate factor of seeking psychological help, also had a significant positive impact on the number of adolescents seeking psychological help. More frequent practice of seeking professional help is characteristic of adolescents who tend to cope with their own psycho-emotional problems by keeping diaries, seeking support from other people on the Internet or from "non-human sources" at all (including animals, inanimate objects, artificial intelligence, etc.). As a hypothesis, we can suggest that this group of adolescents has a greater need for trusting interpersonal communication, which can be compensated for by a psychologist. In contrast, outside of therapy they are forced to cope with stress and experience through communicative actions directed not at other people, more often excluding peers and significant adults from potential sources of psychological help. However, this phenomenon can also demonstrate the significance of the scenario of one-sided communicative process of seeking psychological help. In this case, the specialist satisfies the basic need of the adolescent to speak out, to express his/her feelings and experiences - similar to a diary and publication on the Internet, which do not presuppose a response or objection.

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[258] Shechtman Z., Vogel D. L., Strass H. A., Heath P. J. Stigma in help-seeking: The case of adolescents // British Journal of Guidance & Counselling. 2018. №46(1). P. 115.

Indicators of alternative coping mechanisms	Help-seeking as:		Correlation (Gamma) with help-seeking as:		
	coping mechanism	*coping experience*	*coping mechanism*	*coping experience*	*coping mechanism*
Diary management	17,3%	40,1%	0,648	0,455	0,623
Turning to "non-human" sources of support (animals, AI)	13,7%	36,3%	0,53	0,315	0,412
Seeking help and support online	11,6%	33,1%	0,449	0,308	0,395

Table 11. Indicators of alternative coping mechanisms among adolescents

The final group of statistically significant indicators consisted of scenarios of adolescents receiving psychological help in the context of initiative to seek help and use of digital technologies. Since these explanatory variables accumulated the answers of only a certain subsample (respondents who sought remote help), the analysis was carried out only to the extent of acceptable Gamma correlation and is not comparable with the results of other indicators. Nevertheless, they allow us to suggest facilitators of the transformation of adolescents' conversion from a single social action into a repeated social practice, as well as to compare the potential impact of different indicators on this conversion. Thus, the conclusion about the role of the adolescent's initiative in the dynamic process of seeking external help, serving as a manifestation of his or her agency in adopting the practice of seeking psychological services, seems obvious. On the contrary, adolescents whose contact with psychological services was ensured by external efforts and initiative are less likely to choose seeking psychological help as a personal coping strategy in the future.

Indicators of scenarios of receiving professional psychological help	Correlation (Gamma) with help-seeking as a coping mechanism
Own initiative of help-seeking process	0,595
Through remote counselling (Zoom, Skype)	0,857
Through a helpline, hotline	0,786
Through online chat with the psychologist (including via messengers)	0,785
Through online group training, webinars, etc.	0,742
Via online chat on a website	0,640

Table 12. Indicators of previous scenarios of seeking psychological help

While the format of receiving psychological help (face-to-face, remote, combined) did not show a significant relationship with the variables of adolescents' seeking psychological help, the sought correlation is observed in the cases of individual instruments of remote psychological services. In particular, the digital tool more effective

in cultivating a sustainable practice of seeking professional psychological help is remote videoconferencing with a psychologist: a similar effect of their use for long-term therapy was observed in a study of the adult population [259]. Formats with more limited communicative possibilities (involving only text or voice interaction with the adolescent), as well as group distance tools show lower correlation values. Psychological online chats integrated into the pages of helplines and crisis services show the lowest correlation. It is important to note that this statistic speaks exclusively about the lesser role of anonymous online chats in shaping the long-term practice of seeking psychological help, while, according to focused empirical studies, they remain an important and accessible low-threshold tool providing the initial contact of adolescents with the psychological help system[260].

Regression modelling of adolescents' help-seeking

For additional validation of the selected predictors of adolescents' seeking psychological help, the method of constructing logistic regression models was used. Using the Wald exclusion method, an attempt was made to reduce the purely investigated predictors, taking into account their resolving abilities (with inclusion criteria of 0.05; exclusion criteria of 0.1; classification threshold of 0.5), while maintaining the high probability of the selected factors to predict adolescents' seeking professional psychological help. Given the multiple measurability of referral in the author's conceptual model, two regression models were constructed - primary contact (fact of referral) with psychological services and social practice (coping mechanism) of seeking psychological help - based on a set of 30 predictors identified by correlation analysis.

The model of initial contact with psychological services (Tab. 13) underwent 13 iterations of selection, identifying 18 out of 30 indicators as key predictors. The overall resolving power of the model to predict whether or not the adolescent had sought

[259] Plutov L. E., Rusakova M. M., Guzeva D. V. Digitalisation of psychological care: factors and trends (on the example of St. Petersburg) // Sociological Research. 2023. № 7. P. 57.
[260] Shchukina M. A., Garanja A. V. Chat counselling in crisis psychological service for adolescents // Vestnik VyatSU. 2021. № 1. P. 121.

professional psychological help was estimated at 87% probability. Accordingly, the Hosmer-Lemeshow criterion showed a relatively low performance at the 0.011 level. Despite the fact that this criterion indicates the low resolution of the model, the model's coefficient of approximation (Nagelkerk's R square = 0.172) demonstrates that most of the selected predictors are indeed valid and able to explain the variance of the dependent variable.

The key predictors of the model (in terms of the proportion of explained variance) are factors that predetermine the adolescent's social and psychological vulnerability: experience of deviant self-destructive behaviour (suicidal, substance and alcohol dependence), traumatic experiences of violence and bullying, unfavourable social environment (presence of persons who also suffered from addictions and violence), manifestations of social deprivation (in the form of social exclusion, high feelings of loneliness, conflict in relations with teachers and family members), and the existence of a romantic life, which is also associated with certain psychological and sexual risks, and the presence of limited health capabilities, which can act as a risk factor for the adolescent's social vulnerability. In addition, significant social predictors include the adolescent's romantic life, which is also associated with certain psychological and sexual risks, and the presence of health limitations, which can be a risk factor in various aspects of social life. The overwhelming majority of significant predictors are risk factors for adolescents' well-being: thus, the regression model indirectly proves the hypothesis that the system of psychological assistance in the Russian Federation is aimed at preventing socially dangerous manifestations of adolescent life and provides contact with psychological services for those adolescents who really need professional help.

Final set of predictors (13 steps)	B	Std. Error	Wald	Exp(B)	99% confidence interval	
					Lower	Upper
Experiences of substance use	,878	,155	32,162	,416	,279	,619
Experience of suicidal behaviour	,862	,087	98,631	,422	,338	,528
General lack of understanding from the immediate environment	,538	,063	73,924	,584	,497	,686
Victims of psychological violence/bullying	,473	,071	43,848	,623	,518	,749
Having a romantic life	,380	,053	51,964	,684	,597	,784
Social environment: victims of physical violence	,372	,074	25,368	,690	,570	,834

Experience of alcoholic beverage abuse	,363	,093	15,205	,695	,547	,884
Social environment: presence of people who have used psychoactive substances	,359	,074	23,560	,699	,577	,845
Social environment: people who have exhibited suicidal behaviour	,346	,071	23,643	,708	,589	,850
Presence of disabilities	,312	,062	25,250	,732	,624	,859
Poor relationships with teachers as a factor of learning demotivation	,295	,066	20,090	,744	,628	,882
High level of perceived danger: home	,289	,125	5,341	,749	,543	1,034
Adolescents stigmatizing recipients of psychological services	,284	,076	13,955	1,328	1,092	1,615
Adolescents' feelings of loneliness	,284	,071	16,214	,752	,627	,903
Personal problems: relationships with parents/guardians	,275	,063	19,050	,760	,646	,893
Social environment: victims of cyberbullying	,188	,075	6,245	,829	,683	1,006
High level of perceived danger: educational institution	,169	,077	4,791	,845	,693	1,030
Victims of cyberbullying	,157	,087	3,225	,855	,683	1,070

Table 13. Logistic regression model of primary contact (fact of help-seeking) of adolescents with psychological services

The regression model of adolescents' seeking psychological help as a sustainable coping mechanism and social practice is presented in Table 14. After 19 iterations of selection, the number of significant predictors of adolescents' seeking psychological help was reduced to 12. In contrast to the previous model, this model showed significantly better resolving power (Hosmer-Lemeshow criterion = 0.696) and predictability of the adolescent's choice of a strategy for seeking professional help to solve his or her own psychoemotional problems in 97% of cases. This indicator confirms that the toolkit and its indicators are valid and suitable for predicting the social practice of referral to a psychologist that is emerging among adolescents, which is consistent with the theoretical and conceptual focus of the work. Despite this, the criterion of the pseudo-square of Nagelkerk (0.067) indicates a low degree of agreement of the selected predictors: it is obvious that the indicators of adolescents' seeking psychological help proposed in the methodology are excessive in their number, but not exhaustive in the share of explained variance Further work in the framework of this problem should consist in the search for new predictors that can effectively predict the readiness of adolescents to seek the help of specialists in the field of mental health.

The general characteristic of the identified set of 12 predictors, in general, repeats the theses applicable to the model of the actual experience of the adolescent's seeking psychological help. The majority of predictors are represented by risk factors for the

adolescent's well-being, grouped in the areas of addictive and suicidal behaviour, as well as in the context of the adolescent's personal problems in relationships with parents/guardians, the opposite sex, and society as a whole. More significant (compared to the previous model) predictors of treatment are the experience of substance use by the adolescent or someone from his or her social environment, and an unsafe home environment caused by possible conflicts with family members, the prevalence of deviant, socially dangerous practices among them, and specific problems of child-parent relations (in particular, disrespect for the adolescent's personal space). Also new in relation to the previous model is the predictor of a teenager's request for psychological and educational assistance in the area of romantic relationships, which is more significant than the fact of having or finding a romantic partner. Thus, this factor may be associated not so much with the risks of adolescents' romantic life (a new set of interpersonal difficulties, risk factors for early sexual debut, etc.) as with the teenager's need to receive constructive information, advice and assistance in building their future romantic and family life.

Final set of predictors (19 steps)	B	Std. Error	Wald	Exp(B)	99% confidence interval	
					Lower	Upper
Experiences of substance use	,816	,233	12,269	,442	,243	,806
High level of feeling of danger: home	,610	,186	10,815	,543	,337	,876
Social environment: presence of people who have used psychoactive substances	,484	,126	14,616	,617	,445	,854
Experience of suicidal behaviour	,469	,151	9,630	,625	,424	,923
Personal problems: relationships with the opposite sex	,457	,105	18,901	,633	,483	,830
Leading a romantic life	,364	,096	14,367	,695	,543	,890
Social environment: victims of cyberbullying	,334	,122	7,441	,716	,522	,982
Presence of disabilities	,327	,110	8,882	,721	,543	,957
Personal problems: relationships with parents/guardians	,316	,112	7,965	,729	,547	,973
Social environment: people who have exhibited suicidal behaviour	,314	,126	6,203	,731	,528	1,011
Personal problems: lack of respect for the adolescent's personal space	,233	,113	4,275	,792	,592	1,059
General lack of understanding from the immediate environment	,223	,122	3,316	,800	,584	1,097

Table 14. Logistic regression model of help-seeking as a sustainable coping mechanism (social practice)

The results of regression analysis confirm the validity of the indicators used and the author's methodology's focus on predicting the use of psychologists by RF adolescents

as a sustainable practice of using the services of a specialist and adopting this coping strategy along with other types and sources of psychological help. The predictors that showed the greatest significance in both models may indicate that the practice of consulting a psychologist is used by adolescents primarily to address and prevent acute socially dangerous phenomena associated with threats to the physical health and social functioning of adolescents in Russian society. Most of them are of a socio-mediological nature, which suggests a hypothesis about the social genesis of the practice of adolescents seeking psychological help, predetermined by the threats of the social environment and interaction with its elements. Despite the fact that the regression models constructed seem to be redundant, this method of analysis was used not so much to form the minimum possible set of predictors with their maximum resolving/predicting power, as to verify the available indicators identified by complex correlation analysis and to take into account their individual role in explaining adolescents' seeking psychological help. In addition, the hypothesis that the presence in an adolescent of the identified health risk characteristics (physical, psychological, sexual and social) inevitably leads them to receive effective professional help seems deliberately false.

Categorization of factors in adolescents' demand for professional psychological help

According to the presented literature review, very little attention has been paid to the problem of categorizing the factors of adolescents' seeking help in the world bibliography. Perhaps the only result of the consolidation of factors identified in numerous empirical studies can be considered the structure of a three-level analysis of predictors of seeking psychological help, formulated by a Russian team of psychologists - T. V. Kazantseva, N. A. Antonova and K. Y. Eritsyan[261] . According to her original classification, the variables explaining human behaviour in the process of seeking and receiving psychological help can be systematized within three levels - individual, socio-psychological and environmental. "Individual level" contained factors of perception of

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[261] Kazantseva T. V., Antonova N. A., Eritsyan K. Y. Appeal for professional help in the field of mental health: conceptualisation of the concept and analysis of predictors // St. Petersburg Psychological Journal. 2019. № 28. P. 88-117.

psychological problem, planning and evaluation of actions necessary for its solution. "Social-psychological" - factors of success/effectiveness of applying for psychological help and communication with a specialist. In its turn, the "mediational level" accumulated structural factors of accessibility of psychological help and proximal/distal cultural and contextual factors of seeking psychological help.

Taking into account the specific set of 30 empirically confirmed indicators and a different research object (Russian adolescents instead of the generalised population as a whole), it was decided not to reduce the boundaries and content of this structure, but to adhere to the author's original model of adolescents' demand for professional psychological help. The classification of T. V. Kazantseva, N. A. Antonova, and K. Y. Eritsyan clearly influenced the design of the author's model, but could not be fully adapted for a sociological empirical study on the presented sample of adolescents. Thus, the classification of variables and their corresponding indicators was made within the framework of the three original factor sets and is presented in Table 15.

Factor set	Explanatory variables	Indicators
Mental Health Profile	Experience of deviant behaviour	Experience of suicidal behaviour
		Experiences of substance use
		Experience of alcoholic beverage abuse
		Adolescents who have committed criminal offences
		Frequent non-attendance of classes
	Traumatic experience	Victims of psychological violence/bullying
		Victims of physical violence
		Victims of cyberbullying
	Adolescent well-being	Low physical health score
Social profile	Socio-demographic characteristics	Female sex
		Having of a guardian
	Adolescent's social environment/networks	High level of perceived danger: home
		General lack of understanding from the immediate environment
		High level of perceived danger: educational institution
		Lack of attention and support from the immediate environment
		Adolescents' feelings of loneliness
		Failure to respect a teenager's personal space
		High level of perceived danger: populated area
		High level of perceived danger: neighbourhood of residence
		Environment: victims of physical violence
		Condemnation of adolescents' opinions and choices
		Environment: people who have used psychoactive substances
		Environment: people who have exhibited suicidal behaviour
		Environment: people who have committed criminal offences
		Problematic relationships with parents/guardians
		Problematic relationships with the opposite sex
		Environment: victims of cyberbullying
		Poor relationships with teachers

		Having a romantic life, having/seeking a romantic partner
The system of psychological assistance	Social attitudes towards the system of psychological assistance	Adolescents stigmatizing recipients of psychological services

Table 15. Conceptual factor model of Russian adolescents 14-17 years old seeking professional psychological help

The experience of deviant/delinquent behaviour in various manifestations and previous traumatic experience, which has a detrimental effect on the mental health of adolescents and significantly increases their need for qualified psychological help, were considered to be particularly significant variables of the adolescent's mental health *profile*. It is also indicative that among the indicators of adolescents' subjective well-being, the most significant correlation with the components of "addressability" was shown by the subjective assessment of physical health. The result confirms both the hypothesis about the significant connection between the adolescent's physical well-being and his/her required level of psychological support and assistance, and the theoretical and methodological framework used in the work, based on the traditions of the sociology of mental health.

The concept of *social portrait* as an important factor in adolescents' seeking professional psychological help was also empirically tested: in particular, its initial division into socio-demographic and socio-network predictors. Of the set of socio-demographic indicators, only two were found to be valid. The "female sex" indicator, repeatedly used in previous empirical studies, turned out to be valid for the Russian sample of adolescents as well. This also confirms the existence of a gap caused by different social norms for young men and girls with regard to the manifestation of mental problems, their disclosure and seeking help from specialists. The socio-family status of the adolescent is also recognized as important, due to the existing methodological principles of socio-psychological work with families in which a foster child lives. Among the social-network predictors, most of the proposed indicators were confirmed, demonstrating the influence of the adolescent's different environment (family, peers, romantic partners) and relationships with him/her on the indicators of his/her seeking professional psychological help.

Perhaps the most unobvious factor set was presented at the level of the *system of psychological assistance* surrounding Russian adolescents. As has already been noted, the key factor in the context of Russian adolescents' seeking professional help remains the factor of its stigmatization: in particular, the stigmatization of recipients of such services. At the same time, this phenomenon is ambivalent, bidirectional in nature, which indicates the potential impact of other, latent sociological variables. It is obvious that this methodological section needs elaboration, search for new explanatory variables and their validation with a focus on the results of the conducted research. Indicators of adolescents' "mental literacy" and the influence of other social attitudes that were not included in the current research toolkit may still be of particular importance. In addition, the development of new methods for analyzing individual scenarios of seeking professional psychological help in the context of the routing of adolescents in need of it and the digitalization of the institute of psychological services, which offers adolescents new mechanisms for seeking and receiving the required help, seems important. The results of our study have shown the main trends associated with these processes in Russian society at the level of univariate analysis, but their explanatory and predictive power in modelling adolescent turnover has not been fully clear.

To statistically assess the specific significance of the selected factors, the results of the regression analysis were recalculated using the following formula:

$$\text{Significance}_i = \frac{B_i \ * \ \% \text{ representation}_i}{\sum_{all \ variables}(B \ * \ \% \ representation)} \times 100\%$$

where i - is the indicator under study, B - Beta of the expected change in the dependent variable (in regression modelling), *% representation* - the share of respondents possessing the characteristic i of the total sample.

Thus, the "significance" parameter reflects not only the relationship between adolescents' help-seeking behaviour and each indicator, but also an adjustment for their actual representation in the overall representative sample. Thus, although substance use experience shows the highest Beta in the regression model, this indicator is found in only 2% of the adolescents surveyed. In contrast, the Beta value for the indicator "romantic

life" is lower, but adolescents leading this indicator account for 36% of the representative sample. The results for each indicator were summarised within the framework of the highlighted variables/factors and are presented in Fig. 21. The greatest significance of social-network factors (65%), which condition the teenager's advancement in the "career" of seeking psychological help, is demonstrated not only by the number of confirmed indicators, but also by their total significance. A special role in this process, if we use the methodology of B. Percosolido's network approach, is played by "social episodes" in the adolescent's life - both a set of past negative (self-destructive and traumatizing) events that threaten his mental health, and the present social environment of the adolescent, which contributes to the decision to seek the necessary help.
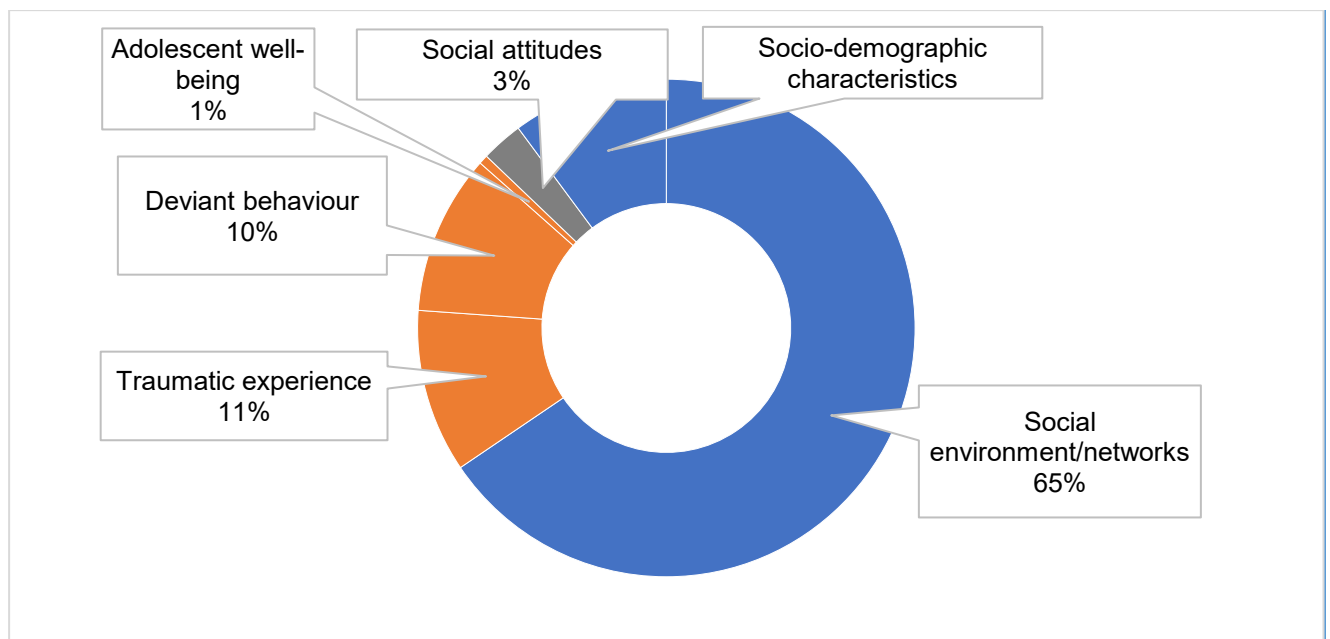
Figure 21. Specific significance of factors of adolescents' seeking psychological help (based on the results of regression analysis, adjusted for representation in the sample)

Thus, the hypothesis about the social genesis of this behaviour and the existence of a complex system of social risk and protection factors affecting the behaviour and functioning of Russian adolescents within the framework of the public system of psychological help is confirmed. In total, the factor set of *the* adolescent's *Social Porter* scored 75%, of which only 10% were confirmed socio-demographic variables.

The significance of the *"Mental Health Profile"* was 22%, of which the greatest contribution was attributed to the indicators of traumatic and deviant experiences. The

factor *"Systems of psychological help"* was represented by only one indicator (stigmatisation of recipients of psychological services), therefore it gained only 3% of the total amount. Thus, regression analysis with subsequent processing of its results allowed us to conclude that social factors prevail - social-network factors to a greater extent and socio-demographic factors to a lesser extent - in the adolescent's decision to seek professional help.

To supplement the descriptive statistics, the author's indicator *"Risk Index"* was developed, calculated using the following formula:

$$\boxed{Risk\ Index_i\ =\ Help-seeking\ gap \times \gamma(\text{Need}_i)}$$

Help-seeking gap$_i$ - the "treatment gap" indicator, which is characteristic of a subsample of adolescents with a certain indicator (i). It shows the percentage of respondents who express a need for professional psychological help, but have never had contact with specialists. It is important to note that these percentages do not reflect statistical distributions within the entire sample of adolescents, but rather their specific subgroup - "carriers" of a particular social indicator. Thus, this indicator reflects the frequency of occurrence of a negative trajectory in the "career" of mental health and the "cycle of avoidance" of professional help among adolescents with certain socio-psychological characteristics.

$\gamma(\text{Need}_i)$ - Gamma-correlation indicator of the researched indicator (i) and the variable of teenager's request/need for professional psychological help. It acts as a coefficient that assigns to the statistics on adolescents' treatment/non-treatment the value of potential risk associated with their psychological health.

Thus, the **"Risk Index"** is an indicator that demonstrates the extent to which seeking professional psychological help correlates with the need for help experienced by adolescents with a particular social characteristic. "Risk index" tends to 100% for the indicators, in the presence of which the rate of appeal for psychological help is significantly lower than the request for it, and tends to 0% when the proportion of appeals of adolescents with this or that characteristic is high, but the significance of this

characteristic/indicator in the formation of a teenager's request for psychological help is low. Being a logical continuation of the concept of "treatment gap", the Risk Index allows us to move from the general statistics of adolescents' non-treatment, which does not imply methodological tools to eliminate this gap, to the focused study of specific indicators that can become markers of the work of the institute of psychological help with vulnerable categories of adolescents aged 14-17.

Calculations of the "Referral Gap" and "Risk Index": are given in Table 16. Taking into account the significance of each indicator in the formation of the adolescent's need for professional psychological help, it demonstrates how critical, risky the non-application for help is assessed among adolescents of different groups and characteristics.

Indicators	"Help-seeking gap"	"Risk Index"
Experience of suicidal behaviour	51,1%	73%
High level of feeling of danger: home	51,6%	71%
Victims of psychological violence/bullying	56,2%	66%
Victims of physical violence	53,2%	64%
General lack of understanding from the immediate environment	59,5%	64%
High level of perceived danger: educational institution	57,8%	58%
Lack of attention and support from the immediate environment	61,7%	55%
Adolescents' feelings of loneliness	58,4%	55%
Experiences of substance use	36,5%	54%
Failure to respect a teenager's personal space	60,9%	52%
High level of danger perception: populated area	61,1%	52%
High level of feeling unsafe: neighbourhood of residence	56,9%	50%
Environment: victims of physical violence	57,0%	50%
Victims of cyberbullying	53,4%	50%
Female sex	59,9%	49%
Low physical health score	55,1%	48%
Experience of alcoholic beverage abuse	47,1%	48%
Condemnation of adolescents' opinions and choices	60,9%	47%
Environment: people who have used psychoactive substances	53,5%	47%
Environment: people who have exhibited suicidal behaviour	59,3%	43%
Environment: people who have committed criminal offences	52,5%	42%
Adolescents who have committed criminal offences	39,3%	41%
Existence of disability/HIA	55,3%	38%
Problematic relationships with parents/guardians	57,5%	35%
Problematic relationships with the opposite sex	60,1%	30%
Adolescents who do not stigmatise recipients of psychological services	58,7%	30%
Adolescents stigmatising recipients of psychological services	60,5%	29%
Frequent non-attendance of classes	42,5%	26%
Poor relationships with teachers	54,0%	23%
Leading a romantic life, having/finding a romantic partner	53,8%	14%
Availability of a guardian/guardian	46,6%	10%

Table 16. Help-seeking gap and Risk Index scores among Russian adolescents aged 14-17 years (based on a set of validated predictors)

When analyzing the results of the "Risk Index", the characteristics with which this indicator exceeds 50% deserve the greatest attention: in this case, it can be stated that

adolescents with these characteristics tend not to seek psychological help even in the presence of an acute, clearly expressed request for it. Thus, the highest index of the "Risk Index" (73%) is observed in adolescents who have had experience of suicidal behaviour and thoughts. On the one hand, the presence of this risk factor determines the acute need of the adolescent both in long-term therapy and in emergency psychological and psychiatric care. On the other hand, pronounced suicidal symptomatology is a recognized barrier to seeking psychological help, whereby the willingness to receive any external help gives way to a willingness to commit suicide[262] . A similar level of risk is observed for adolescents who do not feel safe at home and are highly likely to live in families in a socially dangerous situation (71%).

Teenagers who were victims of psychological violence and bullying (66%), physical violence (64%), and cyberbullying - bullying in the online space - ranked lower. Most of them have also never had contact with mental health professionals to work through these traumatic experiences, although they still have a social need to do so. Despite the observed process in the sphere of normative and methodological protection of children facing bullying in the educational system, violations of their physical/sexual integrity, the persistence of such negative trends in the sphere of their seeking help can be explained by the action of latent social variables. In particular, the role of stigmatization faced by these adolescents is a pressing issue for the support and rehabilitation of these groups. When they become victims of the deviant and illegal acts identified, they may face the fear of disclosure of traumatic experiences and the sense of shame inherent in self-stigmatization. Thus, these negative phenomena not only reduce the likelihood of adolescents seeking psychological help and increase the risks of mental problems occurrence/progression, but may also act as a factor of re-victimization.

With regard to the social problem of bullying in Russian schools, high indicators of the "Risk Index" are characteristic of adolescents who generally do not perceive the educational space as safe (58%). This social group is represented by adolescents who

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[262] Wilson C. J. General psychological distress symptoms and help-avoidance in young Australians // Advances in Mental Health. 2010. №9(1). P. 63-72.

have already faced bullying and needed the help of a specialist. The hypothesis is likely to be that for most of those who have already been victims of bullying or are at risk of bullying, referral to a school psychologist or other specialist is perceived not as a solution to the problem, but as an additional risk of worsening relationships with peers. An important variable here may be the fear of breaching confidentiality of treatment, as a result of which the adolescent risks stigmatization, social exclusion or further bullying in the school community.

High values of the "Risk Index" are also observed among adolescents who generally find themselves in excluded social roles: facing misunderstanding (64%), lack of attention and support (55%), which only aggravates the adolescent's feeling of loneliness (55%). The interpretation of this phenomenon can be traced both in E. Durkheim's classical ideas about the importance of social integration and cohesion in mental health and in subsequent sociological approaches. The opposite trend is also evident, in which problems of interpersonal communication, the destruction of these networks or their loss of functions of psycho-emotional support and assistance to the adolescent can lead simultaneously to a deterioration of his or her psychological well-being and barriers to seeking help outside the social environment. On average, only 40% of adolescents with such problems had contacted a mental health professional. For the remaining 60% of respondents who needed help and did not receive it from their immediate environment, the coping strategy of not seeking help at all was more common, excluding both formal and informal sources.

It is important to note that adolescents who have exhibited deviant, addictive behaviour are not currently exposed to a critical level of risk associated with not seeking psychological help. Thus, even among adolescents who have had experience of substance use, the "Risk Index" reaches 54%. At the same time, almost two-thirds of respondents (63.5%) declare contact with a psychologist. On the one hand, this trend may indicate the effectiveness of methodological work with Russian adolescents who have had experience of drug addiction: as part of comprehensive programmes for the prevention of addictive behaviour (including rehabilitation), work with a psychologist/psychiatrist with an

adolescent is mandatory. On the other hand, the current "Risk Index" score among adolescents with a history of addictive behaviour tends to demonstrate that their need for further psychological help and long-term therapy is not being met. Given that the harmful effects of psychoactive substances can have long-term consequences for social well-being, it remains an urgent task to increase the accessibility of adolescents in this risk group, including through destigmatizing programmes that counteract the development of feelings of shame and fear of disclosing their addiction experience to professionals.

The final, but not the last in terms of significance and "Risk Index" indicator, it is worth considering again the sex indicator of adolescents' seeking psychological help. Despite the fact that Russian girls aged 14-17 are generally more open to professional help and seek it more often than boys, the level of dissatisfaction with their need for help is estimated to be extremely high - 49%. Firstly, this testifies to the collective role of the "female" sex indicator: being a visible socio-demographic attribute, it is capable of displaying a correlation with a complex of special psychological problems associated with the difficulties of female socialization. Secondly, this trend can be explained from the position of girls' trust in the psychological services provided and their perceived effectiveness[263] . According to the results of the descriptive analysis, 29% of girls aged 14-17 who sought help were dissatisfied with the result of interaction with a specialist (the same indicator among boys was 21%). In addition, it was noted that girls are less likely than boys to trust the services of more accessible, free psychological help in the form of school and state psychologists. Thus, work on meeting the acute need of adolescent girls for help may consist in improving the quality of the services provided, which, as a consequence, should contribute to increasing trust in them and reducing the "help-seeking gap", currently estimated at almost 60% of the sub-sample under consideration.

In addition, it is important to mention the results of a similar indicator among male adolescents: this indicator was not confirmed within the framework of the final factor

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[263] Plutov L. E. Sex specificity of Russian teenagers' appeal for professional psychological help // Sociodynamics. 2023. № 10. P. 54.

model of Russian adolescents' seeking psychological help. The ambiguity of the results of the correlation analysis, in turn, can be explained by the fact that young men in general have a more negative attitude to the very institution of psychological help, are less likely to be able to correctly diagnose their mental problems and recognize the need to solve them. This sex specificity can be explained: patterns of masculinity, laid down within the framework of socialization, are able to form among men the need for greater autonomy, independent solution of mental problems , which strengthens the role of social attitudes, restraining them from seeking professional psychological help[264] . Nevertheless, the results of the study demonstrate that 61.4% of young men who also need professional help have never sought it. The recommended task in bridging this gap could be awareness-raising among 14-17-year olds, developing their mental literacy, eliminating "mental illiteracy" and stigmatizing social attitudes that prevent young men facing psycho-emotional difficulties from seeking help.

Thus, the consolidation of the data obtained in the course of the study on the Russian adolescents' demand for professional psychological help was successfully implemented using correlation and regression statistical analysis. The result of this work was the formation of a final set of predictors consisting of 30 indicators classified within the framework of the author's conceptual three-component model of adolescent turnover. The indicators specified in the model have successfully demonstrated both interpretive and predictive capabilities in relation to the indicator of Russian adolescents' seeking psychological help.

In addition to the scientific significance of the identified trends and the novelty of the sociological study, which became the largest in the national history of the study of adolescents' seeking help, the results obtained were able to acquire a significant applied character. Firstly, the concept of the "help-seeking gap" was adapted and a methodology for its calculation was developed, which made it possible to estimate correctly, on a representative sample, the proportion of adolescents of various characteristics and risk

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[264] Anikina V. O., Popova A. G., Vasilieva N. L. Subjective factors of seeking psychological help for men // World of Science. Pedagogy and Psychology. 2020. №5 (8). P. 1-18.

groups who remain without proper psychological help. Secondly, the author's indicator "Risk Index" was developed and tested, which is able to demonstrate to what extent the acuteness of not seeking psychological help for adolescents in need of it correlates with specific social variables and indicators. Thus, it is possible to convert latent variables into specific markers for subsequent methodological work, which can be aimed at overcoming the identified "treatment gap" among Russian adolescents.

It should be taken into account that the limitation of using these results of the "treatment gap" and "risk index" is the research instrument. Since the questions about the experience of referral and the adolescent's need for qualified help had a different temporal structure, the results may be biased: in particular, a subsample of adolescents who need help at the time of the study, but who had contacted a specialist in the past for a different request and problem, remain "invisible" to the researcher. Given this error in the questionnaire, it is premature to assert the validity of the current measures of the "help-seeking gap" and "risk index". Nevertheless, the novelty of the indicators themselves, their justification and demonstration of the calculation formulae are much more significant. We expect that they can also serve as a valid and relevant tool for assessing adolescent non-return for help in subsequent sociological studies, when calibrating the current toolkit. In particular, we recommend pairwise comparison of questions about the need for help and seeking help in the questionnaire, in the past and hypothetical future time (to pilot both options):

- *"Tell us, please, do you need psychological help now?" + "Are you planning to visit a specialist about this or not?"*
- *"Have you had to face situations requiring psychological help?" + "Did you seek the help of a specialist/psychologist in that situation?"*

CONCLUSION

In this dissertation, adolescents' help-seeking has become the subject of a comprehensive sociological study, based on the concepts of the sociology of mental health. Thus, the problems of mental health of society are not only a reflection of biopsychological and individual-psychological features of a person, but also differ in their social genesis and are a mirror of social reality. One of the urgent tasks of the sociology of mental health remains a multi-paradigm study of social reactions to mental problems, analysis and application of combined theoretical models. The study of adolescents' demand for professional psychological help is located in this scientific field. In this study the tasks were fulfilled and a number of conclusions were formulated:

1. The conceptualization of adolescents as a vulnerable social group, the object of empirical studies of help-seeking was carried out. The most promising vector of the author's research was the paradigm of the new sociology of childhood, which contributes to the formation of complex, meta-subject knowledge about adolescence. It allowed us to accumulate methodological concepts of studying and interpreting adolescents' seeking professional psychological help from a sociological perspective, focusing on their subjective experience.

2. The key features of the sociological conceptualizations of the phenomenon of " psychological help-seeking" were outlined: consistency, cyclicality and dynamism of this social process, its ambivalence as a social-subject activity and a complex system of factors that determine the social genesis and trajectories of help-seeking. These conceptualizations allow to answer the question of why repeated appeal to a specialist becomes an accepted and spreading practice of caring for one's own mental health from the perspective of sociological science. The application of the sociological perspective also acquires applied significance, recommendatory possibilities and scientifically grounded tools for improving the work of psychological help system for adolescents in Russia.

3. Normative-methodological and institutional analysis of socio-psychological work with adolescents in the Russian Federation and the functioning of the system of professional psychological help allowed us to lay down the provisions of the empirical study:

- Providing professional assistance to adolescents and improving their psychological well-being is one of the national priorities implemented in the social, educational and health care spheres.

- The system of psychological help to adolescents in the Russian Federation is represented by a variety of institutions differentiated by types of services and tools for their provision, funding, level of access and anonymity of treatment, use of digital technologies, and target groups of adolescents.

- The sociological analysis of this system from the point of view of specialists involved in it has demonstrated an increase in the effectiveness of services provided to adolescents and their accessibility in 2020-2022. However, there are territorial and information-methodological barriers that hinder its qualitative development. The most problematic area of the system's work that needs strengthening is the provision of psychological support to adolescents facing traumatic experience.

- State and public support of the system of psychological help for adolescents in the Russian Federation, the expansion of the network and mechanisms of its provision is associated with a pronounced request for sociological study of the perspective of adolescents themselves, their attitudes, opinions and patterns of seeking help.

4 The basis of the research that meets this request is presented in the form of the author's model of adolescents' help-seeking. It made it possible to identify and describe the key stages experienced by adolescents in a crisis situation and forming their trajectory of help-seeking in the context of three components: social need, social action and social practice. The model was also able to take into account the principles of new sociology of childhood and the participatory approach, prioritizing the life experiences, interests and needs of adolescents over the structural impact of social institutions. Thus, the model of professional psychological help-seeking among adolescents 14-17 years old reflected the

current trends and requests of both the sociology of mental health and new sociology of childhood.

5. The validity of the model and the search for the factors of adolescent help-seeking behaviour became possible due to a quantitative study of adolescents aged 14-17 from 85 regions of Russia. The representative sample of 17,000 respondents was one of the largest in the history of Russian sociological research on adolescents. The following hypotheses were verified in relation to the hypotheses put forward on the basis of the review of the world literature on the topic.

- The key social factors of Russian adolescents' professional psychological help-seeking are not socio-demographic, but socio-network factors. Of these, the most significant were the variables of the adolescent's social environment, the presence in it of people who exhibited various forms of deviant behaviour, the degree of the adolescent's inclusion in various social networks or, on the contrary, his or her exclusion, the feeling of loneliness and lack of psychological support. Of particular importance is the perceived safety of the social networks and spaces in which adolescents are included. Further study of Russian teenagers' help-seeking seems more promising within the framework of the network episodes model than in the tradition of early structuralist models of the sociology of mental health, which interpret teenagers' behaviour in this sphere from the perspective of their prescribed social roles or socio-economic statuses.

- There is a phenomenon of "help-seeking gap" in the Russian context: the majority of the surveyed teenagers (60%), who feel the need for qualified help, have never sought it. Their trajectory of seeking help is locked in a "cycle of avoidance" (L. Biddle): they tend to resort to the use of alternative coping mechanisms, which do not always contribute to the resolution of psychoemotional difficulties. However, the final test of this hypothesis is possible after calibration of the current version of the toolkit. At the same time, general trends in adolescents' behaviour suggest that turning to informal sources of help such as family members (51% of respondents) and peers (31%) still prevails over the strategy of not seeking help at all (27%).

- The hypothesis about the sex specificity of the trajectory of Russian teenagers' demand for professional help was not fully confirmed: girls more often than boys felt the need for professional help, at the same time having more frequent contact with a specialist. In all three components of help-seeking ("need-action-practice"), female respondents showed insignificantly higher results. Significant deviations were observed only in the questions of assessing the effectiveness of services received and the prevalence of certain social attitudes towards psychological help institutions.

- With regard to its digital transformation, the hypothesis about the prevalence of cases of adolescents' treatment through remote/digital tools was refuted. 72% of the respondents received psychological help through face-to-face counselling. Nevertheless, the finding seems significant for the future development of distance psychological services, which continue to be an important low-threshold channel for adolescents facing various barriers to face-to-face counselling.

- The hypothesis about the ambivalence of the stigma as a factor in Russian adolescents' seeking professional psychological help was confirmed. Among the declared reasons for not seeking necessary psychological help, only 6% of adolescents stated fear of social judgement and other negative consequences they might face in their everyday life. Within the subsample of adolescents who expressed a request for professional help at the time of the study, the only valid indicator of the stigma factor was stigmatization of recipients of psychological services: moreover, adolescents prone to "labelling" were slightly more likely to be recipients of services themselves. However, it is important to emphasize that the stigma factor remains one of the most observed in the world literature on the topic of adolescents' treatment, so it is premature to claim that it is absent in the Russian context.

6. The empirical study allowed us to test new indicators, which became a rethinking of previous concepts in the sociology of mental health. Along with the "treatment gap", a "Risk Index" indicator was developed and calculated for each of the identified social predictors. Pilot measurement of the indicators revealed that the most acute problem of non-return for psychological services was for adolescents who had a history of suicidal

behaviour (73%), who felt a high level of threat in the home environment (71%), who had been victims of psychological violence/bullying (66%) and physical violence (64%).

7. Based on the above conclusions, the vectors for the use of the research results by the community of specialists providing psychological and psychotherapeutic services, as well as preventive and educational activities in the field of mental health are outlined:

- Increasing the attention of the system of professional psychological assistance to adolescents with high "Risk Index". Adolescents with traumatic experiences of violence (physical, sexualized, bullying and cyberbullying) in the home and educational environment are special risk groups in need of increased accessibility of psychological assistance.

- General revision of the existing tools and methods of providing professional psychological assistance, taking into account the current requests and needs of Russian adolescents and the specifics of their demand for help. This can increase the readiness of adolescents to seek help, which increases both the subjective effectiveness of the help received and the likelihood of subsequent referral to professionals. In particular, it is promising to further develop sex-oriented programmes for facilitating adolescent referrals, aimed at improving the effectiveness and quality of services for girls and the accessibility of services for boys who face socio-cultural barriers to referral. In addition, romantic relations are a relevant reason for adolescent referrals, especially when adjusted for the representation in the sample, which also requires appropriate training.

- Digitalization of professional psychological assistance to adolescents. Despite the fact that the prevalence of remote assistance institutions does not exceed the frequency of face-to-face applications, remote assistance services remain an important channel, sometimes the only one available for adolescents who do not have access (both infrastructural and social) to alternative sources of professional help. Video counselling services and helplines are the most important tools for adolescents to form a stable practice of seeking professional services. However, given the specificity of these resources, it is necessary to continue the development of more low-threshold tools (online chat rooms, asynchronous counselling and information services) for adolescents who are

least open to interaction with a specialist, but who also need professional advice, support and up-to-date information on mental health issues.

8. Promising directions of further scientific work within the framework of the sociology of mental health are formulated:

- Analysis of informal sources of psychological help for adolescents. The paper considers in detail the trajectories of adolescents' use of professional services, while the peculiarities of receiving informal help (from family members, peers, local/religious representatives, other significant adults) need further research. Taking into account that these channels of psychological help are much larger in total than the use of professional services, it is important to analyze their effectiveness in solving adolescents' mental problems.

- Sex specification of adolescents' demand for psychological help. A number of empirical paradoxes have been outlined above, which have not been properly interpreted in this paper. There are obvious prospects for new combined sociological studies devoted, first of all, to the differentiation of "mental literacy", "perceived stigma" and "subjective effectiveness" of professional psychological help among Russian adolescents of both sexes.

- Focused study of individual factors (barriers and facilitators) of adolescents' seeking psychological help. This study made it possible to compile a list of specific factors and variables that shape adolescents' trajectories of seeking psychological help, demonstrating their factor significance. In the future, it is necessary to test the selected variables on separate target samples of adolescents. The addition of knowledge from other branches of sociology (e.g., sociology of deviant behaviour, sociology of the family, etc.) will make it possible to enrich the interpretation of individual factors, as well as to formulate new applied recommendations for their application in the direct work of specialists with adolescents in need of help.

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APPENDIX

Appendix 1. Federal sociological survey "Adolescents 360°", 2022. Target sample - adolescents 14-17 years old, N = 17,000.

*The toolboxes used in the analysis and their linear distributions are given below

Variables from Questionnaire	Variable values	Percentages
How old are you?	14	26,1%
	15	24,8%
	16	24,5%
	17	24,6%
Identify your sex	Female	48,8%
	Male	51,2%
Choose the area in which you live:	Rural areas	27,3%
	Urban settlement	20,5%
	Small city (up to 500 thousand people)	38,9%
	Large city (500,000 to 1 million people)	9,2%
	City of millions	4,1%
Where do you go to school?	Secondary comprehensive school	63,3%
	Public school	1,2%
	Lyceum	4,6%
	Gymnasium	5,0%
	College/technical school	24,9%
	Comprehensive boarding school	0,6%
	Specialised/corrective school?	0,3%
In which region of the Russian Federation (krai, Oblast, republic) do you live?	Altai Krai	2,6%
	Amur Oblast	0,8%
	Arkhangelsk Oblast	0,5%
	Astrakhan Oblast	1,7%
	Belgorod Oblast	1,1%
	Bryansk Oblast	1,4%
	Vladimir Oblast	0,4%
	Volgograd Oblast	1,0%
	Vologda Oblast	0,4%
	Voronezh Oblast	0,8%
	Jewish Autonomous Oblast	0,0%
	Transbaikal Krai	0,5%
	Ivanovo Oblast	1,5%
	Irkutsk Oblast	1,7%
	Kabardino-Balkarian Republic	0,5%
	Kaliningrad Oblast	2,2%
	Kaluga Oblast	3,1%
	Kamchatka Krai	0,1%
	Karachay-Cherkess Republic	0,7%
	Kemerovo Oblast - Kuzbass	2,0%

	Kirov Oblast	0,3%
	Kostroma Oblast	0,4%
	Krasnodar Krai	7,3%
	Krasnoyarsk Oblast	1,2%
	Kurgan Oblast	1,2%
	Kursk Oblast	2,8%
	Leningrad Oblast	1,3%
	Lipetsk Oblast	0,3%
	Magadan Oblast	0,2%
	Moscow	0,8%
	Moscow Oblast	3,0%
	Murmansk Oblast	0,6%
	Nenets Autonomous District	0,0%
	Nizhny Novgorod Oblast	0,0%
	Novgorod Oblast	0,2%
	Novosibirsk Oblast	1,6%
	Omsk Oblast	0,9%
	Orenburg Oblast	1,1%
	Orel Oblast	1,1%
	Penza Oblast	0,5%
	Perm Krai	0,3%
	Primorsky Krai	1,2%
	Pskov Oblast	0,6%
	Republic of Adygea (Adygea)	0,0%
	Altai Republic	0,2%
	Republic of Bashkortostan	0,4%
	Republic of Buryatia	0,1%
	Republic of Dagestan	3,4%
	Republic of Ingushetia	0,0%
	Republic of Kalmykia	0,0%
	Republic of Karelia	0,8%
	Komi Republic	1,4%
	Republic of Crimea	1,2%
	Republic of Mari El	0,2%
	Republic of Mordovia	0,2%
	Republic of Sakha (Yakutia)	1,0%
	Republic of North Ossetia-Alania	0,1%
	Republic of Tatarstan (Tatarstan)	4,3%
	Republic of Tyva	0,4%
	Republic of Khakassia	0,5%
	Rostov Oblast	0,0%
	Ryazan Oblast	0,5%
	Samara Oblast	5,2%
	St Petersburg	0,6%
	Saratov Oblast	0,4%
	Sakhalin Oblast	0,2%

	Sverdlovsk Oblast	1,9%
	Sevastopol	0,1%
	Smolensk Oblast	1,9%
	Stavropol Krai	4,0%
	Tambov Oblast	2,2%
	Tver Oblast	0,3%
	Tomsk Oblast	1,2%
	Tula Oblast	1,1%
	Tyumen Oblast	0,2%
	Udmurt Republic	5,7%
	Ulyanovsk Oblast	0,9%
	Khabarovsk Krai	2,2%
	Khanty-Mansiysk Autonomous Okrug - Yugra	2,6%
	Chelyabinsk Oblast	2,1%
	Chechen Republic	0,5%
	Chuvash Republic - Chuvashia	0,1%
	Chukotka Autonomous District	0,0%
	Yamal-Nenets Autonomous District	0,9%
	Yaroslavl Oblast	1,0%
[Grouping by federal districts].	Far Eastern federal district	6,3%
	Southern federal district	12,5%
	Central federal district	23,6%
	Northwestern federal district	8,6%
	Central federal district	11,3%
	North Caucasian federal district	9,2%
	Volga federal district	9,0%
	Ural federal district	19,7%
Please tell us who you live with. Choose all the appropriate options. *I live...*	with mother	89,0%
	with father	64,7%
	with brother(s) and/or sister(s)	53,6%
	other relatives (uncles, aunts, grandparents)	12,9%
	with a carer	2,4%
	with other children in the orphanage	0,4%
	with the neighbours in the dormitory	3,1%
	alone	1,4%
Tell us what you have enough of your personal money for (This includes all your money - self-earned, pocket money from parents, etc.)	I don't have my own money at all	10,4%
	I only have enough money for the goodies	30,8%
	I have enough money to pay for most of my daily expenses	52,6%
	I could buy an expensive item with my money right now	6,2%
Choose the judgement that most accurately describes your family's financial situation.	Sometimes we don't even have enough to eat	1,3%
	We have enough for everyday expenses (food, transport), but it's difficult to buy clothes	9,9%

	We have no problem providing for everyday expenses and buying clothes, but we'll need to save up for appliances	34,0%
	Daily expenses, clothes and household appliances are not a problem, but we cannot make large purchases (car, flat) without savings	51,8%
	We could buy ourselves a new flat or a new car right now.	2,9%
Do you have any sources of income other than pocket money from parents/guardians? Specify all sources you have.	Work	45,4%
	Scholarship	39,1%
	Social payments (allowance, pension, etc.)	31,8%
How would you characterise your health in general?	Very bad	0,8%
	Bad	4,4%
	Satisfactory	30,4%
	Good	44,1%
	Very good	20,3%
Are you restricted in any activity due to impairments or health problems?	No	73,1%
	Yeah, marginally.	15,9%
	Yeah, considerably.	2,6%
	Don't know/not sure	8,4%
How many hours a day do you spend on the internet?	I don't surf the internet	1,6%
	Up to 3 hours	17,9%
	3-5 hours	36,5%
	6-7 hours	20,9%
	More than 7 hours	23,2%
To what extent do you agree with the following statements: "I use the internet to.... *make new acquaintances*	Totally agree.	15,8%
	Rather agree(s)	35,3%
	Rather disagree.	34,7%
	Totally disagree.	14,2%
To what extent do you agree with the following statements: "I use the internet to.... *get moral support (from online friends, audience, etc.)*	Totally agree.	15,1%
	Rather agree(s)	30,3%
	Rather disagree.	32,4%
	Totally disagree.	22,2%
To what extent do you agree with the following statements: "I use the internet to.... *professional fulfilment*	Totally agree.	21,4%
	Rather agree(s)	42,0%
	Rather disagree.	25,2%
	Totally disagree.	11,4%
To what extent do you agree with the following statements: "I use the internet to.... *get creative*	Totally agree.	27,1%
	Rather agree(s)	40,5%
	Rather disagree.	21,9%
	Totally disagree.	10,4%
To what extent do you agree with the following statements: "I use the internet to.... *study hard*	Totally agree.	36,1%
	Rather agree(s)	44,4%
	Rather disagree.	13,8%
	Totally disagree.	5,7%
Are you earning income from your online activities?	Yeah, I do.	11,0%
	No, I don't.	89,0%
	Yes	22,5%

Do your parents/guardians try to influence and/or restrict your online activities in any way?	No	77,5%
How do your parents/guardians try to influence your online activity? Select all relevant options.	Monitor and/or limit the amount of time I spend on the internet	72,1%
	Monitor my online activity (browsing my browser history, following my social media posts)	12,6%
	Keeping track of people I interact with on the internet	22,9%
	Monitor all aspects of my online activity (time limits, browser history, social media updates, social circle, etc).	11,2%
There are many ways to remain undetected on the internet: VPN, incognito mode, fake accounts, etc. How often have you resorted to them?	I don't	47,3%
	I use sometimes (for certain purposes)	46,9%
	I use it all the time	5,8%
How often do you: are you distracted by the internet (social networks, games, etc.) when you are busy?	All the time	8,8%
	Often	25,7%
	Sometimes.	56,4%
	Never	9,2%
How often do you: putting things off so you can spend more time on the internet?	All the time	7,5%
	Often	20,0%
	Sometimes.	53,7%
	Never	18,7%
How often do you: feel annoyed when you can't access the internet for a long time?	All the time	5,9%
	Often	12,4%
	Sometimes.	39,5%
	Never	42,2%
How often do you: do you fight with your loved ones (family, friends, etc.) because of the amount of time you spend on the Internet?	All the time	2,6%
	Often	5,1%
	Sometimes.	25,7%
	Never	66,6%
What grades do you get most often?	Fives	18,4%
	Fours	58,6%
	Troikas	22,3%
	Twos.	0,7%
How many classes a week do you usually skip?	Not a single one	82,6%
	A few classes	15,7%
	About half	1,0%
	Most of the classes	0,6%
How do you feel about your studies in general?	Everything's great, I like everything	17,0%
	It's okay, but there are some things I don't like	59,4%
	Overall, so-so, but some pretty good stuff	18,7%
	It's bad, why don't you come here	4,9%
What do you think of the study load level?	I'm doing fine. Give me more.	5,9%
	Basically, I get it out, but sometimes it's hard.	64,4%
	I'm trying to deal with everything, but it's not working out so well.	21,0%
	It's really hard, I'm gonna be exhausted	5,8%

	I'm done with school and I'm fine.	2,9%
What discourages your learning	Laziness, boredom.	59,6%
	Relationship with teachers	15,6%
	Study load	49,6%
	Classmates, school community	11,1%
	No interest in school subjects	30,0%
	The education system as a whole	32,3%
	Nothing.	9,6%
Please tell us to what extent you agree with the following statements: *I can benefit from even the most boring/useless subject matter*	Totally agree.	14,2%
	Rather agree.	42,2%
	Rather disagree.	33,6%
	Totally disagree.	9,9%
Please tell us to what extent you agree with the following statements: *I find critics by teachers helpful*	Totally agree.	12,3%
	Rather agree.	44,7%
	Rather disagree.	31,1%
	Totally disagree.	11,9%
Please tell us to what extent you agree with the following statements: *I get upset about bad grades*	Totally agree.	22,8%
	Rather agree.	34,7%
	Rather disagree.	25,7%
	Totally disagree.	16,8%
Please tell us to what extent you agree with the following statements: *I don't do error work*	Totally agree.	9,9%
	Rather agree.	25,4%
	Rather disagree.	43,4%
	Totally disagree.	21,3%
What can you say about your relationship with your teachers and classmates? *I really enjoy talking to a lot of teachers*	Totally agree.	36,7%
	Rather agree.	46,8%
	Rather disagree.	13,9%
	Totally disagree.	2,7%
What can you say about your relationship with your teachers and classmates? *I will not forge good relationships with teachers for my own benefit.*	Totally agree.	28,0%
	Rather agree.	33,1%
	Rather disagree.	27,6%
	Totally disagree.	11,2%
What can you say about your relationship with your teachers and classmates? *Communicating with most of my classmates is something I truly enjoy*	Totally agree.	40,9%
	Rather agree.	37,6%
	Rather disagree.	15,7%
	Totally disagree.	5,8%
What can you say about your relationship with your teachers and classmates? *A good relationship with my classmates is necessary for me because it can benefit me*	Totally agree.	21,3%
	Rather agree.	32,8%
	Rather disagree.	29,2%
	Totally disagree.	16,7%
Do you often have conflicts at school - with teachers?	All the time	1,5%
	Often	4,5%
	Sometimes.	18,2%
	Rarely	39,6%
	Never	36,1%
	All the time	0,9%

Do you often have conflicts at school - with other school staff members	Often	1,6%
	Sometimes.	8,8%
	Rarely	24,7%
	Never	63,9%
Do you often have conflicts at school - with classmates	All the time	2,0%
	Often	5,5%
	Sometimes.	22,7%
	Rarely	42,2%
	Never	27,6%
Do you often have conflicts at school - with other students	All the time	1,1%
	Often	2,6%
	Sometimes.	13,1%
	Rarely	34,3%
	Never	49,0%
Do you often have conflicts at school - with parents of classmates/other students	All the time	0,6%
	Often	0,7%
	Sometimes.	3,0%
	Rarely	10,9%
	Never	84,8%
If a conflict with someone at school has reached an impasse and you cannot resolve it on your own, what is the first thing you usually do?	I'm talking to the class teacher	9,5%
	Telling my parents	13,2%
	Asking friends for help	13,6%
	I'm talking to the school counsellor	0,7%
	I still don't tell anyone and I try to handle the situation myself.	24,8%
	I don't tell anyone anyway and I don't try to solve it in any way anymore	4,8%
	I don't get that kind of situation	33,3%
On a scale of 1 to 5, what do you spend more time on: 1 - if you do nothing but study, 5 - if you devote all your time to leisure and recreation, 3 - if you spend equal time on leisure and recreation	1	4,2%
	2	11,0%
	3	52,4%
	4	23,6%
	5	8,7%
Who do you most often spend your free time with? Choose up to 3 suitable options.	Family	70,0%
	Friends	74,7%
	Acquaintances from sections, clubs, etc.	9,1%
	Boyfriend/girlfriend	20,2%
	Pets	21,0%
	Alone with myself	39,2%
Do you like the way you spend your leisure time at all? Rate on a scale from 1 to 5 (1 - don't like it at all, 5 - everything is great, everything suits you).	1	2,8%
	2	5,4%
	3	23,1%
	4	30,6%
	5	38,1%
Do you have the opportunity to spend your leisure time the way you want to?	Yes	79,1%
	No	20,9%
Do people around you approve of your hobbies?	Definitely yes.	61,4%

Family	More like yes.	30,7%
	Probably not.	6,3%
	Definitely not	1,7%
Do people around you approve of your hobbies?	Definitely yes.	60,3%
	More like yes.	36,6%
Friends	Probably not.	2,5%
	Definitely not	0,6%
Do people around you approve of your hobbies?	Definitely yes.	67,4%
	More like yes.	26,8%
Boyfriend/Girlfriend	Probably not.	3,7%
	Definitely not	2,1%
Do people around you approve of your hobbies?	Definitely yes.	38,4%
	More like yes.	47,1%
	Probably not.	10,6%
Teachers at school	Definitely not	3,9%
And speaking specifically about your relationship with your friends, how would you characterise it?	I have awesome friends/friends/girlfriends, I don't need anyone else	77,6%
	I've always wanted to have the same kind of company as I have in TV series, but my friends are not like that at all	14,3%
	I don't have any friends and it doesn't upset me at all	5,9%
	I have no friends, I'm sad and lonely.	2,2%
How often do you feel lonely even in the company of friends?	Always	2,5%
	Often	10,3%
	Sometimes.	45,2%
	Never	42,0%
Shall I sing a song... about love? We have to ask: What is your current status?	In a relationship	20,5%
	Looking for a boyfriend/girlfriend	11,7%
	I'm dating, not in a relationship.	3,9%
	Not in a relationship and don't want to be in one	32,0%
	It's complicated.	8,3%
	I don't want to answer that	23,6%
How do you feel about romantic relationships in general? Choose the statement(s) you agree with: *Relationships are a very important part of a person's life*	Totally agree.	34,0%
	Rather agree.	44,4%
	Rather disagree.	15,4%
	Totally disagree.	6,3%
How do you feel about romantic relationships in general? Choose the statement(s) you agree with: *Relationships should be based on love*	Totally agree.	59,9%
	Rather agree.	32,2%
	Rather disagree.	5,3%
	Totally disagree.	2,7%
How do you feel about romantic relationships in general? Choose the statement(s) you agree with: *It's more important to love than to be loved.*	Totally agree.	11,7%
	Rather agree.	31,9%
	Rather disagree.	42,0%
	Totally disagree.	14,3%
How do you feel about romantic relationships in general? Choose the statement(s) you agree with:	Totally agree.	16,9%
	Rather agree.	33,0%

Relationships are important, at the very least, because it's better than being alone(s)	Rather disagree.	31,1%
	Totally disagree.	19,0%
How do you feel about romantic relationships in general? Choose the statement(s) you agree with: *The relationship should eventually lead to a family*	Totally agree.	29,8%
	Rather agree.	39,5%
	Rather disagree.	21,3%
	Totally disagree.	9,5%
How do you feel about romantic relationships in general? Choose the statement(s) you agree with: *Relationships need to be built to know yourself*	Totally agree.	15,4%
	Rather agree.	43,3%
	Rather disagree.	30,5%
	Totally disagree.	10,9%
Have you defined your goals and plans for the future?	Yeah, I already know what I want from the future.	59,8%
	No, I haven't decided what I want to achieve yet.	35,4%
	I don't want to make plans for the future at all	4,8%
To what extent do you agree with the following statements? *I am sure that many good things are waiting for me in the future*	Totally agree.	48,6%
	Rather agree.	41,1%
	Rather disagree.	8,2%
	Totally disagree.	2,1%
To what extent do you agree with the following statements? *I believe that I will be able to fulfil my ambition*	Totally agree.	50,2%
	Rather agree.	40,9%
	Rather disagree.	7,1%
	Totally disagree.	1,8%
To what extent do you agree with the following statements? *I don't think this is the best time to plan for the future.*	Totally agree.	12,4%
	Rather agree.	21,9%
	Rather disagree.	44,9%
	Totally disagree.	20,7%
To what extent do you agree with the following statements? *I expect life to work out wonderfully without my efforts (To what extent do you agree with the following statements?)*	Totally agree.	7,6%
	Rather agree.	13,1%
	Rather disagree.	43,5%
	Totally disagree.	35,8%
I'm terrified of the future and the events that could happen	Totally agree.	18,8%
	Rather agree.	30,9%
	Rather disagree.	31,5%
	Totally disagree.	18,8%
Tell us, how do you most often act in the following situations? Rate on a scale which statement is closest to you: 1 - if you are closest to the statement on the left, 4 - if you are closest to the statement on the right: *1 - I try to avoid risks if possible* *4 - I am willing to take any risks to achieve my goals*	1	22,2%
	2	32,5%
	3	30,1%
	4	15,1%
Tell us, how do you most often act in the following situations? Rate on a scale which statement is closest to you: 1 - if you are closest to the statement on the left, 4 - if you are closest to the statement on the right:	1	18,9%
	2	29,4%
	3	33,1%
	4	18,6%

1 - When I'm making an important choice, I rarely ask someone for advice *4 - It is important for me to consult with others about many things*		
Tell me, how do you most often act in the following situations? Rate on a scale which statement is closest to you: 1 - if you are closest to the statement on the left, 4 - if you are closest to the statement on the right: *1 - There aren't many things that truly interest me in life* *4 - I want to try as much as possible in this life*	1	13,4%
	2	22,2%
	3	31,6%
	4	32,7%
What do you think could prevent you from achieving your goal? Choose up to 3 options.	Lack of motivation	45,8%
	Lack of confidence in yourself and your abilities	55,3%
	Lack of support from the environment	21,4%
	Lack of information	21,5%
	Lack of time	20,9%
	Lack of financial resources	31,6%
	Laziness	39,2%
	Health status	7,8%
	Lack of useful social ties	8,4%
	External circumstances	9,6%
Rate on a scale which statement is closest to you: 1 - if the statement on the left is closest to you, 4 - if the statement on the right is closest to you. *1 - I have no idea what I will do when I grow up* *4 - I have an occupation (activity or hobby) that I want to make my life's work*	1	12,6%
	2	20,7%
	3	32,9%
	4	33,8%
Rate on a scale which statement is closest to you: 1 - if the statement on the left is closest to you, 4 - if the statement on the right is closest to you. *1 - Leadership is totally not my story at all* *4 - I do not miss an opportunity to show my leadership skills*	1	19,0%
	2	26,1%
	3	31,6%
	4	23,3%
Rate on a scale which statement is closest to you: 1 - if the statement on the left is closest to you, 4 - if the statement on the right is closest to you. *1 - If the other person needs help, let them help themselves* *4 - If the other person needs help, I will definitely try to provide it*	1	6,1%
	2	11,9%
	3	38,6%
	4	43,4%
Rate on a scale which statement is closest to you: 1 - if the statement on the left is closest to you, 4 - if the statement on the right is closest to you. *1 - Most of the time I just go with the flow and hope that the problems will go away on their own* *4 - The problems around me (in my family, school, city, etc.) are what I want and try to solve*	1	9,7%
	2	21,3%
	3	39,1%
	4	29,9%

Rate on a scale which statement is closest to you: 1 - if the statement on the left is closest to you, 4 - if the statement on the right is closest to you. *1 - The ordinary citizen cannot influence the future of the country* *4 - The future of the country is everyone's personal responsibility, and mine too*	1	14,2%
	2	20,3%
	3	33,4%
	4	32,1%
Rate on a scale which statement is closest to you: 1 - if the statement on the left is closest to you, 4 - if the statement on the right is closest to you. *1 - I am far away from politics, I don't even want to think about it.* *4 - I am interested in politics and can freely participate in discussions on this topic*	1	33,0%
	2	31,2%
	3	22,1%
	4	13,7%
Did you take part in professional orientation - a system of activities aimed at preparing young people to choose a profession?	Yes, participated	37,6%
	No, I haven't.	62,4%
Where have you had career counselling? Please indicate all possible options.	At school (tests, interviews with teachers, etc.)	84,5%
	Independently on the internet/ with the help of literature	34,9%
	At the career guidance centre	13,0%
	With a specialist/psychologist	9,7%
Below we have listed several statements that can describe a psychological status. Which one best describes your state of mind	I feel fine, nothing bothers me at all.	33,0%
	All in all, everything is fine, but there are some worrying "telltale signs" that are bothering me	37,7%
	I've been nervous a lot lately, feeling vulnerable.	14,4%
	I feel like just a little bit more and I won't be able to take it, my strength will run out.	8,0%
	I don't feel anything at all	6,8%
How do you feel in the places listed? Choose one answer. *At school*	Absolutely safe	35,4%
	It's rather safe	46,1%
	It's more like dangerous	7,8%
	It's very dangerous	2,4%
	It's hard to say	8,2%
How do you feel in the places listed? Choose one answer. *At home*	Absolutely safe	80,6%
	It's rather safe	14,7%
	It's more like dangerous	2,2%
	It's very dangerous	0,7%
	It's hard to say	1,7%
How do you feel in the places listed? Choose one answer. *In the area where you live*	Absolutely safe	43,8%
	It's rather safe	43,1%
	It's more like dangerous	7,2%
	It's very dangerous	1,5%
	It's hard to say	4,4%
How do you feel in the places listed? Choose one answer.	Absolutely safe	37,7%
	It's rather safe	44,4%
	It's more like dangerous	9,4%

In the town, village, wherever you live.	It's very dangerous	2,3%
	It's hard to say	6,3%
How do you feel in the places listed? Choose one answer. *In Russia*	Absolutely safe	31,2%
	It's rather safe	36,9%
	It's more like dangerous	13,8%
	It's very dangerous	5,3%
	It's hard to say	12,9%
Below we have listed the difficult situations that a person can find themselves in. Please note if there are any people in your environment who have been in the following situations? *"Me personally."*	Alcohol abuse	6,3%
	Used psychoactive substances	1,9%
	Committed criminal offences	1,8%
	Wanted to commit suicide/attempted suicide	8,9%
	Have been victims of psychological violence/ bullying	16,0%
	Have been victims of cyberbullying	9,0%
	Have been victims of physical violence	6,5%
Below we have listed the difficult situations that a person can find themselves in. Please note if there are any people in your environment who have been in the following situations? *[Grouping by social environment (family, friends, peers, acquaintances)]*	Alcohol abuse	37,3%
	Used psychoactive substances	11,5%
	Committed criminal offences	14,0%
	Wanted to commit suicide/attempted suicide	16,4%
	Have been victims of psychological violence/ bullying	20,3%
	Have been victims of cyberbullying	12,4%
	Have been victims of physical violence	11,5%
If you suddenly encounter some personal or emotional difficulties in your life, how do you most often try to deal with them? Choose whatever works for you.	Trying to find support from family members: parents, brothers/sisters	50,8%
	Asking for support from friends and classmates	31,2%
	Seeking advice and support from my teachers, mentors	6,0%
	Sharing my experiences with those who definitely won't tell anyone (pets, Alice/Siri)	6,0%
	Looking for support and advice on the internet	9,0%
	Seeing a counsellor or other specialist	3,4%
	I appeal to God, the higher powers.	9,0%
	Keep a diary in any format: text, audio, video, etc.	6,0%
	No, I keep it to myself and don't share it with anyone.	27,3%
Rate on a scale of 1 to 5 how satisfied you are with the relationships in your family, 1 if absolutely dissatisfied, 5 if absolutely satisfied.	1	3,3%
	2	5,5%
	3	16,4%
	4	28,9%
	5	45,9%
Probably everyone sometimes thinks that people around us do not understand us at all. How do you feel misunderstood by adults?	Conviction of your interests	22,4%
	Lack of support and attention	23,5%
	Condemnation of your opinion and personal choices	27,3%
	Disrespect for personal space	24,5%

	Not accepting your values / your worldview	18,9%
	I haven't come across one of these.	40,5%
Life is not easy. What knowledge, tips, and lifehacks do you think you need the most? Tick all the relevant options.	On studies	50,3%
	On the choice of future profession	54,2%
	About my rights and freedoms	29,6%
	About romantic relationships	19,6%
	About knowing yourself	44,0%
	About my relationship with my parents and family	17,1%
	This world makes perfect sense to me already	15,6%
Tell us, are you happy with your life in general?	Very satisfied	30,9%
	Satisfied	38,9%
	I don't know	23,6%
	Unsatisfied	4,1%
	Very dissatisfied.	2,5%
Have you ever sought psychological help in your life?	Yes	14,5%
	No	85,5%
Please tell us why you have never go to a psychologist? Choose all the options that suit you.	I didn't need any help	69,1%
	Didn't know where to go	8,8%
	It's too expensive	11,3%
	I'd be laughed at for that	3,7%
	It's not gonna help me anyway	7,2%
	Then it will probably affect my life in some bad way: career, etc	2,6%
	I believe that I should solve my own problems on my own	19,2%
	I'm not allowed to go to a psychologist, that's up to my parents to decide	2,7%
	I don't want to answer that	6,5%
Is seeking a psychologist your personal initiative?	Yes	69,3%
	No	30,7%
And who insisted that you visit a psychologist?	Parents or other close family members	51,7%
	Educators	22,1%
	Friends	8,3%
	Boyfriend/girlfriend	3,5%
	Doctor (by referral)	14,5%
Please tell us, in what format did you receive psychological help?	Face-to-face counselling	72,0%
	Remotely	15,8%
	Both in person and remotely	12,2%
In what remote format did you get help?	Through online chat with the psychologist (including messengers)	47,2%
	Via online chat on the website	24,0%
	Through a helpline, hotline	23,2%
	Through remote counselling (Zoom, Skype)	19,4%
	Through online group training, webinars, etc.	16,4%
Do you think visiting a psychologist has helped you?	Yes, my problem has been solved!	23,4%

	Yes, there are some big positive changes	30,0%
	Yes, but the changes are minor	20,5%
	I'm not sure, nothing has changed.	21,3%
	No, it just got worse.	4,8%
Tell us, please, do you need psychological help right now?	Yes, I do.	10,1%
	Yes, I do, and I've already found it and I'm receiving	1,5%
	No, I don't, but I want to address it just in case.	12,3%
	No, I don't need it, and I don't plan on using it	76,1%
Below we have compiled some statements about psychological help. Please evaluate how much you can agree or disagree with them:	Totally agree.	17,8%
	Rather agree.	33,1%
	Rather disagree.	32,7%
Quality psychological help can be obtained remotely, without a face-to-face visit to a psychologist	Totally disagree.	16,4%
Below we have compiled some statements about psychological help. Please evaluate how much you can agree or disagree with them:	Totally agree.	9,9%
	Rather agree.	31,1%
	Rather disagree.	36,8%
In state institutions, psychological help is not inferior in quality to private psychologists	Totally disagree.	22,1%
Below we have compiled some statements about psychological help. Please evaluate how much you can agree or disagree with them:	Totally agree.	22,1%
	Rather agree.	30,5%
	Rather disagree.	35,2%
A school psychologist will not help at all, unlike a private specialist	Totally disagree.	12,1%
Below we have compiled some statements about psychological help. Please evaluate how much you can agree or disagree with them:	Totally agree.	5,9%
	Rather agree.	11,5%
	Rather disagree.	45,0%
Psychologists are real charlatans, they do not help at all, but only create the illusion of help and pull money	Totally disagree.	37,7%
Below we have compiled some statements about psychological help. Please evaluate how much you can agree or disagree with them:	Totally agree.	5,8%
	Rather agree.	10,5%
	Rather disagree.	37,0%
Only mentally ill people seek psychological help	Totally disagree.	46,7%

Appendix 2. Federal sociological study "Adolescents 360°", 2022. Target sample - specialists in psychological/psychotherapeutic work with adolescents 14-17 years old, N = 3,995.

*The toolboxes used in the analysis and their linear distributions are given below

Variables from Questionnaire	**Variable values**	**Percentages**
In which region of the Russian Federation do you reside?	Altai Krai	1%
	Amur Oblast	1%

	Arkhangelsk Oblast	2%
	Astrakhan Oblast	0%
	Belgorod Oblast	1%
	Bryansk Oblast	0%
	Vladimir Oblast	0%
	Volgograd Oblast	0%
	Vologda Oblast	2%
	Voronezh Oblast	1%
	Jewish Autonomous Oblast	0%
	Transbaikal Krai	1%
	Ivanovo Oblast	1%
	Irkutsk Oblast	2%
	Kabardino-Balkarian Republic	0%
	Kaliningrad Oblast	1%
	Kaluga Oblast	1%
	Kamchatka Krai	0%
	Karachay-Cherkess Republic	0%
	Kemerovo Oblast - Kuzbass	2%
	Kostroma Oblast	0%
	Krasnodar Krai	9%
	Krasnoyarsk Oblast	3%
	Kurgan Oblast	2%
	Kursk Oblast	1%
	Leningrad Oblast	2%
	Lipetsk Oblast	0%
	Magadan Oblast	0%
	Moscow	8%
	Moscow Oblast	3%
	Murmansk Oblast	1%
	Nenets Autonomous District	0%
	Nizhny Novgorod Oblast	1%
	Novgorod Oblast	1%
	Novosibirsk Oblast	2%
	Omsk Oblast	1%
	Orenburg Oblast	1%
	Orel Oblast	1%
	Penza Oblast	1%
	Perm Krai	1%
	Primorsky Krai	1%
	Pskov Oblast	1%
	Republic of Adygea (Adygea)	0%
	Altai Republic	0%
	Republic of Bashkortostan	2%
	Republic of Buryatia	0%
	Republic of Dagestan	1%
	Republic of Kalmykia	0%

	Republic of Karelia	1%
	Komi Republic	2%
	Republic of Crimea	1%
	Republic of Mari El	1%
	Republic of Mordovia	1%
	Republic of Sakha (Yakutia)	2%
	Republic of North Ossetia-Alania	0%
	Republic of Tatarstan (Tatarstan)	3%
	Republic of Tyva	1%
	Republic of Khakassia	0%
	Rostov Oblast	3%
	Ryazan Oblast	1%
	Samara Oblast	3%
	St Petersburg	1%
	Saratov Oblast	0%
	Sakhalin Oblast	2%
	Sverdlovsk Oblast	3%
	Sevastopol	0%
	Smolensk Oblast	0%
	Stavropol Krai	1%
	Tambov Oblast	1%
	Tver Oblast	0%
	Tomsk Oblast	1%
	Tula Oblast	0%
	Tyumen Oblast	1%
	Udmurt Republic	2%
	Ulyanovsk Oblast	2%
	Khabarovsk Krai	0%
	Khanty-Mansiysk Autonomous Okrug - Yugra	2%
	Chelyabinsk Oblast	1%
	Chechen Republic	0%
	Chuvash Republic - Chuvashia	2%
	Yamal-Nenets Autonomous District	1%
	Yaroslavl Oblast	0%
What type of settlement do you live in?	A city with a population of 1 million or more.	17%
	A city with population from 500 thousand to 1 million.	10%
	City with population from 100 thousand to 500 thousand people.	17%
	A city with a population of up to 100 thousand people.	22%
	Rural settlement	34%
How long have you been working with adolescents? Please indicate the number of full years:	Less than 1 year	1%
	1-10 years	55%
	11-20 years	24%
	21-30 years	13%
	31-40 years	5%

	41-50 years	1%
	Over 50 years	0%
	Refusal to answer	1%
Please indicate the type of organisation you work for:	State/municipal institution	98%
	Public non-profit organisation/foundation	2%
	Commercial organisation	1%
	Religious organisation	0%
	I work outside the organisation	1%
What target groups of children do you work with? Tick all that apply to you	Normotypical children and adolescents	53%
	Children with learning difficulties	59%
	Children in difficult life situations	71%
	Orphans and children left without parental care	49%
	Students with disabilities, disabled children	54%
	Children with deviant behaviour (deviant behaviour, suicidal behaviour of children and adolescents)	59%
	Gifted children	22%
Please indicate all areas of expertise in your work with adolescents	Prevention programmes	65%
	Psychological help: psychodiagnostics, psychocorrection, psycho	98%
	Child psychiatry	5%
	Socialisation and resocialisation of adolescents	35%
	Online counselling for children and adolescents	18%
	Professional development programmes/trainings/courses for specialists	17%
	Career guidance for teenagers	53%
	Patronage, social support, outreach work, organisation of temporary stay centres for adolescents	18%
	Accompanying adolescents in investigative activities	23%
	Awareness-raising activities for children and/or parents	63%
Under what conditions do you/your organisation provide assistance to adolescents?	It's free	90%
	Paid	2%
	Both paid and free services are available	8%
In your opinion, how accessible is professional help for adolescents in your region (i.e. ease of applying for and receiving free professional help)?	1	1%
	2	2%
	3	6%
	4	8%
	5	15%
	6	9%
	7	12%
	8	15%
	9	9%

	10	23%
How effective is the system of professional help for adolescents in your region (meaning the result of seeking professional help)?	1	1%
	2	2%
	3	6%
	4	9%
	5	16%
	6	12%
	7	14%
	8	16%
	9	11%
	10	14%
In your opinion, how has the level of professional help for adolescents changed over the last 2 years in your region?	Definitely went up	26%
	It's more of an increase	49%
	Remains unchanged	21%
	It's more of a decline	3%
	Definitely went down	1%
Based on your experience, rate the relevance of the following problems in helping adolescents in your area of work (where 1 is definitely not relevant, 5 is definitely relevant): *Shortage of qualified specialists in your field of activity*	1	8%
	2	10%
	3	26%
	4	20%
	5	36%
Based on your experience, rate the relevance of the following problems in helping adolescents in your area of work (where 1 is definitely not relevant, 5 is definitely relevant): *Lack of effective assistance programmes/protocols/practices*	1	13%
	2	17%
	3	33%
	4	21%
	5	16%
Based on your experience, rate the relevance of the following problems in helping adolescents in your area of work (where 1 is definitely not relevant, 5 is definitely relevant): *Poor quality of care provided by your organisation*	1	39%
	2	21%
	3	22%
	4	11%
	5	7%
Based on your experience, rate the relevance of the following problems in helping adolescents in your area of work (where 1 is definitely not relevant, 5 is definitely relevant): *Low efficiency of interdepartmental co-operation*	1	21%
	2	19%
	3	30%
	4	17%
	5	13%
Based on your experience, rate the relevance of the following problems in helping adolescents in your area of work (where 1 is definitely not relevant, 5 is definitely relevant): *Lack of a systemic body able to coordinate work with adolescents*	1	23%
	2	18%
	3	29%
	4	16%
	5	14%
Based on your experience, rate the relevance of the following problems in helping adolescents in your	1	19%
	2	18%
	3	33%

area of work (where 1 is definitely not relevant, 5 is definitely relevant):	4	17%
Lack of research, relevant data to inform effective practices	5	12%
Based on your experience, rate the relevance of the following problems in helping adolescents in your area of work (where 1 is definitely not relevant, 5 is definitely relevant):	1	14%
	2	16%
	3	29%
	4	20%
Lack of modern digital tools/solutions in promoting and assisting adolescents	5	20%
Based on your experience, rate the relevance of the following problems in helping adolescents in your area of work (where 1 is definitely not relevant, 5 is definitely relevant):	1	19%
	2	21%
	3	32%
	4	17%
Lack of focus on adolescents themselves	5	11%
Based on your experience, rate the relevance of the following problems in helping adolescents in your area of work (where 1 is definitely not relevant, 5 is definitely relevant):	1	12%
	2	15%
	3	28%
	4	19%
Lack of adolescent centres specialising in working with vulnerable groups of adolescents	5	27%
In your opinion, how acute are the problems facing modern teenagers in the following areas of life (where 1 - not at all, 5 - very acute):	1	3%
	2	7%
	3	27%
Relationships with peers	4	28%
	5	35%
In your opinion, how acute are the problems facing modern teenagers in the following areas of life (where 1 - not at all, 5 - very acute):	1	2%
	2	7%
	3	23%
Relationship with parents/guardians and/or other older relatives	4	29%
	5	39%
In your opinion, how acute are the problems facing modern teenagers in the following areas of life (where 1 - not at all, 5 - very acute):	1	3%
	2	9%
	3	34%
Relationship with the opposite sex	4	28%
	5	25%
In your opinion, how acute are the problems facing modern teenagers in the following areas of life (where 1 - not at all, 5 - very acute):	1	2%
	2	9%
	3	34%
Academic performance, study load	4	29%
	5	25%
In your opinion, how acute are the problems facing modern teenagers in the following areas of life (where 1 - not at all, 5 - very acute):	1	3%
	2	10%
	3	32%
Formation of plans for the future, career guidance	4	31%
	5	25%
	1	5%

In your opinion, how acute are the problems facing modern teenagers in the following areas of life (where 1 - not at all, 5 - very acute): *Financial literacy, money management*	2	14%
	3	36%
	4	25%
	5	21%
In your opinion, how acute are the problems facing modern teenagers in the following areas of life (where 1 - not at all, 5 - very acute): *Dissatisfaction with oneself (appearance, behaviour, character, etc.)*	1	3%
	2	11%
	3	32%
	4	27%
	5	26%
In your opinion, how acute are the problems facing modern teenagers in the following areas of life (where 1 - not at all, 5 - very acute): *Dissatisfaction with leisure activities (lack of free time, opportunities, parental restrictions, etc.)*	1	5%
	2	14%
	3	36%
	4	26%
	5	19%
In your opinion, how acute are the problems facing modern teenagers in the following areas of life (where 1 - not at all, 5 - very acute): *Health, attitude towards it*	1	7%
	2	20%
	3	39%
	4	21%
	5	14%
In your opinion, how acute are the problems facing modern teenagers in the following areas of life (where 1 - not at all, 5 - very acute): *Situation in the country and society (social problems, political situation, environmental situation, etc.)*	1	10%
	2	23%
	3	36%
	4	17%
	5	14%
Based on your experience to date, what problems, other than those mentioned above, are acute in the lives of adolescents living in your region? Please list them	Lack of places for cultural leisure, extracurricular employment	13%
	Vocational guidance and employment difficulties	10%
	Deviant behaviour (use of alcohol, psychoactive substances, suicidal behaviour, etc.)	7%
	The pernicious influence of the internet	7%
	Relationships in the family	6%
	Low motivation to study, excessive workload	4%
	Problems of interaction with society, conflicts, social pressure	4%
	Low income of parents, family disadvantage, low standard of living	4%
	Relationships with peers	4%
	Lack of cultural and spiritual education, immorality, lack of positive behavioural patterns	4%
	Adaptation and socialisation	4%
	Sex education, early sexual activity, pregnancies	4%
	Lack of higher education institutions, low level of education	3%
	Adolescents' reluctance to seek help	3%
	Lack of benefits for adolescents	3%
	Antisocial behaviour (aggression, withdrawn)	3%

	Fear of the future, of uncertainty	3%
	Low level of psychological culture and literacy	3%
	Relationship with teachers	3%
	Inadequate self-esteem, lack of self-acceptance or inflated self-image	2%
	The desire for early emancipation, independence	2%
	Low financial literacy	2%
	Low legal literacy, ignorance of one's rights and obligations	2%
What do you think are the most difficult issues for you to discuss with an adolescent? List all the ones you can think of from your work experience	Relationships with peers	5%
	Politics, political situation	4%
	Values, positive qualities	3%
	Psychotraumas, personal deep-seated experiences	3%
	Interaction with society, conflicts	2%
	Making plans for the future, planning, setting goals	2%
	Low self-esteem, lack of acceptance of self, body, etc.	2%
	Mental illness, abnormalities (depression, anxiety)	2%
	Internet addiction	1%
	Emotions, emotional openness, emotional instability	1%
	Teaching load	1%
	Alcoholism in the family	1%
In what situations/problems of the adolescent do you feel most confident and know that you can help the adolescent to improve the situation and/or fully resolve the problem? List all that you can think of from your work experience	Relationship with parents	18%
	Relationships with peers	14%
	Vocational guidance and employment	10%
	Academic performance, exam preparation, etc.	10%
	Improving self-esteem, self-acceptance	6%
	Relationships with the team, team building, team building	6%
	In most situations	5%
	Emotion management, improvement of psycho-emotional state	4%
	Bullying, conflict, bullying, cyberbullying, child abuse	3%
	Leading a healthy lifestyle	3%
	Organisation of leisure activities, extracurricular employment	3%
	Deviant behaviour (alcohol use, substance use, delinquency, aggression, self-harm and suicidal behaviour)	3%
	Interaction between the sexes, sex education	3%
	Socialisation and adaptation	2%
	Relationship with teachers	2%
	Self-realisation (creativity, implementation of projects, etc.)	2%
	Legal counselling, protection of rights	1%
	Spiritual and moral education	1%

	Crisis situations, ways out of them	1%
	Working with psychological traumas	1%
	Financial literacy	1%
	Domestic problems, ways of solving them	0%
	Living arrangements for orphans and children left without parental care	0%
	Financial assistance	0%
	Involvement of specialists from institutions of the prevention system.	0%
Rate how much you agree with the following statements about working with adolescents: *You can't help a teenager by force*	Totally agree.	48%
	Rather agree.	35%
	Rather disagree.	13%
	Totally disagree.	4%
Rate how much you agree with the following statements about working with adolescents: *Parents/carers should always be involved in dealing with a young person's problems*	Totally agree.	40%
	Rather agree.	40%
	Rather disagree.	16%
	Totally disagree.	3%
Rate how much you agree with the following statements about working with adolescents: *The professional should always take the side of the adolescent*	Totally agree.	12%
	Rather agree.	44%
	Rather disagree.	37%
	Totally disagree.	6%
Rate how much you agree with the following statements about working with adolescents: *The adolescent should be spoken to "in his/her language", in terms he/she understands*	Totally agree.	27%
	Rather agree.	48%
	Rather disagree.	22%
	Totally disagree.	4%
Rate how much you agree with the following statements about working with adolescents: *The adolescent's problems and experiences being addressed should be kept confidential*	Totally agree.	52%
	Rather agree.	39%
	Rather disagree.	8%
	Totally disagree.	2%
Rate how much you agree with the following statements about working with adolescents: *There are teenagers (from marginalised backgrounds, for example) who don't deserve respect for themselves*	Totally agree.	6%
	Rather agree.	14%
	Rather disagree.	36%
	Totally disagree.	44%
Rate how much you agree with the following statements about working with adolescents: *Sometimes a professional's bossy, authoritarian style helps a teenager better than empathising with them and ensuring their psychological comfort*	Totally agree.	7%
	Rather agree.	30%
	Rather disagree.	44%
	Totally disagree.	19%
In your opinion, how effective are the following practices of work with adolescents aimed at personal development and prevention of deviation? (1 - extremely ineffective, 5 - extremely effective) *Awareness of the consequences of deviant behaviour and ways to help abstain from it*	1	4%
	2	10%
	3	32%
	4	24%
	5	25%
	I can't answer that	5%
In your opinion, how effective are the following practices of work with adolescents aimed at personal	1	3%
	2	5%

development and prevention of deviation? (1 - extremely ineffective, 5 - extremely effective) *Promotion of a healthy lifestyle*	3	24%
	4	23%
	5	42%
	I can't answer that	3%
In your opinion, how effective are the following practices of work with adolescents aimed at personal development and prevention of deviation? (1 - extremely ineffective, 5 - extremely effective) *Formation of skills to resolve various conflict situations, ability to get out of a stressful situation*	1	1%
	2	3%
	3	16%
	4	24%
	5	52%
	I can't answer that	3%
In your opinion, how effective are the following practices of work with adolescents aimed at personal development and prevention of deviation? (1 - extremely ineffective, 5 - extremely effective) *Formation of negative public opinion towards various manifestations of deviant behaviour*	1	7%
	2	10%
	3	30%
	4	24%
	5	22%
	I can't answer that	8%
In your opinion, how effective are the following practices of work with adolescents aimed at personal development and prevention of deviation? (1 - extremely ineffective, 5 - extremely effective) *Development of critical thinking*	1	2%
	2	4%
	3	22%
	4	23%
	5	43%
	I can't answer that	6%
In your opinion, how effective are the following practices of work with adolescents aimed at personal development and prevention of deviation? (1 - extremely ineffective, 5 - extremely effective) *Organising local youth movements*	1	2%
	2	4%
	3	20%
	4	24%
	5	44%
	I can't answer that	7%
In your opinion, how effective are the following practices of work with adolescents aimed at personal development and prevention of deviation? (1 - extremely ineffective, 5 - extremely effective) *Organisation of leisure and creative activities that coincide with the interests of today's teenagers*	1	2%
	2	3%
	3	14%
	4	19%
	5	56%
	I can't answer that	6%
In your opinion, how effective are the following practices of work with adolescents aimed at personal development and prevention of deviation? (1 - extremely ineffective, 5 - extremely effective) *Active social training of adolescents in socially important skills (trainings, seminars, etc.)*	1	2%
	2	3%
	3	17%
	4	22%
	5	51%
	I can't answer that	6%
Based on your experience, the experience of colleagues and/or the community, who is most likely to initiate the adolescent's access to professional help? *The teenager himself*	Often	24%
	Sometimes.	69%
	Never	7%
	Often	51%
	Sometimes.	46%

| Based on your experience, the experience of colleagues and/or the community, who is most likely to initiate the adolescent's access to professional help?

Parents of a teenager	Never	3%
Based on your experience, the experience of colleagues and/or the community, who is most likely to initiate the adolescent's access to professional help?

Teenage friends | Often | 9% |
| | Sometimes. | 53% |
| | Never | 38% |
| Based on your experience, the experience of colleagues and/or the community, who is most likely to initiate the adolescent's access to professional help?

Class teacher, teachers of teenagers | Often | 54% |
| | Sometimes. | 41% |
| | Never | 5% |
| Based on your experience, the experience of colleagues and/or the community, who is most likely to initiate the adolescent's access to professional help?

Administration, staff of educational institutions | Often | 43% |
| | Sometimes. | 49% |
| | Never | 7% |
| Based on your experience, the experience of colleagues and/or the community, who is most likely to initiate the adolescent's access to professional help?

Routing, mediation and interagency co-operation bodies | Often | 27% |
| | Sometimes. | 56% |
| | Never | 17% |
| Based on your experience, the experience of colleagues and/or the community, who is most likely to initiate the adolescent's access to professional help?

Law enforcement agencies | Often | 26% |
| | Sometimes. | 61% |
| | Never | 13% |
| Based on your experience, the experience of colleagues and/or the community, who is most likely to initiate the adolescent's access to professional help?

Independently find teenagers who need help (outreach work, etc.) | Often | 23% |
| | Sometimes. | 56% |
| | Never | 21% |
| Based on your experience and the experience of your colleagues, how fair are the following statements about the reasons why adolescents do not seek help? (1 - totally unfair, 5 - totally fair):

Adolescents do not seek help because parents/guardians or other relatives forbid it | 1 | 22% |
	2	22%
	3	38%
	4	12%
	5	7%
Based on your experience and the experience of your colleagues, how fair are the following statements about the reasons why adolescents do not seek help? (1 - totally unfair, 5 - totally fair):

Often the teen simply doesn't realise that they need help | 1 | 3% |
	2	6%
	3	25%
	4	26%
	5	40%
Based on your experience and the experience of your colleagues, how fair are the following statements about the reasons why adolescents do not seek help? (1 - totally unfair, 5 - totally fair):	1	5%
	2	9%
	3	27%
	4	28%
	5	31%

Fear of being judged by their environment is a key reason why adolescents do not seek help (Rate, based on your experience and the		
Based on your experience and the experience of your colleagues, how fair are the following statements about the reasons why adolescents do not seek help? (1 - totally unfair, 5 - totally fair): Teenagers think that seeking help from adults will only make their problem worse	1	5%
	2	10%
	3	30%
	4	28%
	5	28%
Based on your experience and the experience of your colleagues, how fair are the following statements about the reasons why adolescents do not seek help? (1 - totally unfair, 5 - totally fair): Teenagers do not know where and how to get help for their problem	1	9%
	2	14%
	3	34%
	4	23%
	5	20%
Based on your experience and the experience of your colleagues, how fair are the following statements about the reasons why adolescents do not seek help? (1 - totally unfair, 5 - totally fair): If a teenager does not seek help, it means they can solve their problems on their own	1	31%
	2	24%
	3	28%
	4	10%
	5	6%
In your opinion, what are some of the challenges you personally face in your work with teenagers?	Lack of experience, skills in working with adolescents	20%
	Lack of up-to-date knowledge, modern approaches in working with adolescents	24%
	Lack of psychological assistance on personal issues	19%
	Lack of supervision (help from a more experienced professional) in working with adolescents	37%
	Lack of rights, authority to work effectively with adolescents	31%
	Lack of resources to work effectively with adolescents	53%
	Shortage of qualified professionals to work with adolescents	36%
	Lack of time to work directly with adolescents	39%
	No problems	8%
In your opinion, in what aspects of working with adolescents do you lack knowledge and skills?	Communication with the adolescent	18%
	Resolving conflicts between parents and adolescents	43%
	Communication with the adolescent's parents/guardians	28%
	Processing traumatic experiences of violence (physical, psychological, sexualised)	59%
	Understanding the characteristics of modern adolescents' lives in general	20%
	Building trusting relationships with adolescents	16%
	Discipline and time management in the lives of adolescents	25%
	Preventing involvement in alcohol use	29%

	Preventing involvement in drug use	30%
	Preventing involvement in smoking	25%
	Teenagers' safety on the Internet	28%
	Bullying in adolescent communities	33%
	Developing adolescents' critical thinking and decision-making skills	31%
	Interaction with other agencies/institutions in the framework of assistance to adolescents (medical institutions, social protection agencies, NGOs, Ministry of Internal Affairs, etc.)	27%
	Legal literacy	37%