



Teachers' and Adolescents' Perceptions of Mental Health and Character Education as Preventative Measures Against Youth Violence

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ABSTRACT

Introduction: Mental health significantly influences both adolescent emotional well-being and the likelihood of violence, as adolescents with strong mental health are better equipped to manage interpersonal conflicts and resist pressures that may otherwise lead to violence. This study explores how perceptions of mental health among teachers and adolescents contribute to emotional resilience and provide a foundation for anti-violence character development.

Methods: Using a descriptive qualitative approach, data was collected through interviews, observations, and documentation involving ten informants—six students and four teachers—selected via purposive sampling to capture varied insights.

Results: Results reveal that perceptions of mental health among both adolescents and teachers are diverse but commonly highlight the value of emotional and psychological stability. Furthermore, the role of family and early life experiences is consistently emphasized as essential in shaping mental health, affecting how adolescents manage emotions and conflicts. Findings also suggest that character traits developed from childhood and through formative experiences are instrumental in supporting an individual's mental health and ability to respond to social stressors without resorting to violence.

Conclusion: This study provides valuable insights into the connection between teachers' and students' perceptions of mental health and character as a key strategy for preventing violence. The findings underscore the crucial role of collaboration among schools, families, and communities in creating a supportive environment for students' character development and mental well-being. The study's implications highlight the necessity of comprehensive, school-based initiatives and educational policies that integrate mental health and character education. Educators are encouraged to adopt character-focused approaches, policymakers to formulate inclusive policies, and researchers to explore this issue across various socio-cultural settings to strengthen violence prevention efforts.

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INTRODUCTION

Youth violence encompasses violent behaviors among individuals aged 10–29 years, often involving those who lack close family ties, whether or not they are acquainted. This violence typically occurs outside the home and spans a range of actions, from online and offline intimidation to more serious acts of physical and sexual violence. The consequences of youth violence are severe, posing risks such as death, injury, and disability, along with long-term health effects, including mental health challenges and risky behaviors that increase the likelihood of chronic diseases.

Globally, youth violence results in an estimated 176,000 homicides annually among individuals aged 15–29, making it the third leading cause of death within this age group. Rates of youth homicide vary substantially both between and within countries, with a general decline observed from 2000 to 2019. This decline, however, has been more pronounced in high-income countries compared to low- and middle-income regions. Statistically, the majority of both victims and perpetrators of youth homicides are male (1).

In Indonesia, recent data highlights the prevalence and severity of youth violence. The Online Information System for the Protection of Women and Children (SIMFONI-PPA) reported 1,993 cases of violence against children in January and February 2024, signalling a potential increase compared to previous years. In 2023, the National Commission for Child Protection (Komnas PA) recorded 3,547 cases, while the Indonesian Child Protection Commission (KPAI) reported 2,355 child protection violations from January to August, with 861 incidents occurring within educational settings. The reported cases include 487 instances of sexual violence, 236 cases of physical or psychological abuse, 87 cases of bullying, 27 issues with educational facilities, and 24 policy-related cases. The Ministry of Women's Empowerment and Child Protection (PPPA) additionally documented 2,325 cases of physical violence against children in 2023 (2).

The rise in incidents of child violence within educational institutions demands a unified response involving students, educators, school staff, and the broader school community. Schools, as a critical second environment for children, must prioritize creating a safe and supportive atmosphere. Any form of violence within educational settings should be proactively anticipated and addressed, as its presence not only disrupts the educational process but also negatively impacts children's mental health and well-being.

Implementing mental health-based character education holds significant potential in fostering non-violent behaviour and enhancing the overall well-being of adolescents. Good mental health plays a key role in reducing violent tendencies and promoting emotional stability among teenagers. This research highlights three primary reasons for examining this topic: First, the Importance of Adolescent Mental Health: Positive mental health in adolescents influences not only their emotional well-being but also equips them to manage potential violence that may arise from interpersonal pressure and conflicts. Second, the Role of Character Education: Character education imparts not just knowledge but also nurtures values such as empathy, positive self-awareness, and emotional resilience—essential foundations for avoiding violent behaviour. Third, Inclusion in the Education System: An inclusive approach to character education ensures that every adolescent, regardless of background, benefits from the program, thereby fostering a collective environment that supports shared well-being and mutual respect (3).

Several studies show the need for interventions that can increase the knowledge and skills of adolescents in managing mental health problems which are considered to be able to control themselves in preventing violence in adolescents, through character education interventions. Based on research (4) this study aims to assess the effect of evidence-based character education interventions on students' positive behavior, with results showing an increase in empathy, cooperation, social awareness, and emotional management abilities. Students who receive character education tend to show decreased negative behavior such as aggression, intimidation, and disciplinary violations. Other research (5) explains that schools are an appropriate place to provide health promotion measures that can prevent violent behavior.

The considerable number of violence cases linked to mental health issues among adolescents has led researchers to explore how adolescents perceive and experience mental health inclusively, aiming to understand its impact on promoting anti-violence and well-being among teenagers. This research aspires to contribute to scientific literature and provide insights into how adolescents' understanding of mental health influences youth violence, thereby offering valuable information for developing more effective preventive measures.

METHOD

This study adopts a descriptive qualitative research design, employing interviews, observation, and documentation to gather in-depth insights. Utilizing a narrative descriptive approach, the research seeks to capture and interpret the meaning behind individual experiences with mental health, specifically focusing on adolescent perceptions and experiences within an inclusive framework to foster anti-violent attitudes and well-being. The research participants included both students and teachers, selected to represent diverse perspectives: three students and teachers participated initially, but data collection ultimately involved 10 informants consisting of six students and four teachers—chosen through purposive sampling. The participants comprised six females and four males. Among the six students, three were from SMP 1 Majene, and three were from SMA YPPP Wonomulyo; similarly, two teachers were selected from each school.

The research was conducted over two days, on August 29 and 30, 2024, at two locations: SMP 1 Majene, located on Jalan Gatot Subroto Majene, and SMA YPPP Wonomulyo, on Jalan Jenderal Gatot Subroto Wonomulyo. The choice of these schools was based on the study’s target demographic—teenagers. By including participants from both junior high and high school levels, the research aimed to capture a broad adolescent perspective. Additionally, observations focused on school facilities and activities related to mental health promotion, providing context on the resources that support students' well-being, aligning with the study’s objectives. To ensure the data was both high-quality and relevant, the researcher prepared a detailed interview guide featuring five open-ended questions to explore participants’ experiences and perceptions regarding mental health comprehensively.

The research team employed a qualitative data analysis approach to explore insights from interviews with teenagers and teachers from two schools: SMP 1 Majene and SMA YPPP Wonomulyo. Data collection was conducted using structured interviews, averaging 7.67 minutes for teenagers and 8.31 minutes for teachers per informant. All interviews were recorded using audio devices and supplemented with field notes. Informants were guided to respond to questions aligned with the study’s objectives, providing relevant information about violence, its impact on well-being, knowledge of mental health, its connection to character, and the influence of educational programs on mental health and violent behaviors.

Following data collection, interview recordings were transcribed, documenting each informant's identity and responses. The qualitative data analysis process was then conducted using Nvivo 12 Plus software, based on five-phase model for data analysis, as follows: (6)

- Phase 1: Organizing the data systematically to prepare for analysis.
- Phase 2: Sorting data into relevant topic categories to focus on core themes and insights.
- Phase 3: Analyzing the meaning of responses to capture the underlying significance in participants’ statements.
- Phase 4: Identifying recurring themes, patterns, and key findings that provide depth to the research focus.
- Phase 5: Presenting the results coherently to illustrate the main discoveries about the research questions.

In order to ensure the assessment of inter-code reliability (ICR) in the analysis, the initial step was to create a coding framework in the form of a code list. This was accomplished by having two independent coders establish ICR. The process involved reducing the raw data and then classifying and synthesizing it into a coding framework. Once the coding was complete, the next step was to group the codes into themes or narratives. These narratives were then interpreted according to relevant theories

RESULTS

Informant characteristics

The research informants included both adolescents and teachers, whose characteristics are summarized below:

Table 1. Characteristics of research informants

Code	Initial	Gender	Status	School Name
S1	D	Female	Student	SMP 1 Majene
S2	N	Female	Student	SMP 1 Majene
S3	F	Male	Student	SMP 1 Majene

Code	Initial	Gender	Status	School Name
S4	U	Female	Student	SMA YPPP Wonomulyo
S5	M	Female	Student	SMA YPPP Wonomulyo
S6	MA	Male	Student	SMA YPPP Wonomulyo
G1	A	Male	Counseling teacher	SMP 1 Majene
G2	RM	Female	Counseling teacher	SMP 1 Majene
G3	R	Maleiuuk	Teacher	SMA YPPP Wonomulyo
G4	DP	Female	Teacher	SMA YPPP Wonomulyo

Table 1 shows the distribution of 10 informants, with 6 students and 4 teachers. Regarding gender, there were 6 females and 4 males among the participants. The 6 students were evenly split, with 3 students each from SMP 1 Majene and SMA YPPP Wonomulyo. Similarly, among the 4 teachers, 2 were from SMP 1 Majene, and the remaining 2 from SMA YPPP Wonomulyo.

This structured analysis framework allowed for a thorough interpretation of the views and experiences shared by both adolescents and educators on the topics of violence and mental health within educational settings. By examining these perspectives, the study provides an in-depth understanding of the factors influencing youth well-being and anti-violence efforts in schools

The research objectives were addressed through interviews guided by two primary research questions, which generated seven sub-themes organized into three main themes. These themes and sub-themes are summarized in Table 2.

Table 2. Findings from interviews with fishermen, relevant to the research questions

Research Questions	Subtheme	Theme
1. What do you know about mental health?	1. Definition	1. Mental Health Concept
	2. Cause	
	3. Signs of mental disorders	2. Mental Health Criteria
	4. Signs of mental health	
2. Is mental health influenced by a person's character?	5. Related	3. The relationship between mental health and character
	6. Example	
	7. Flexible	

Data processing using Nvivo produced a word frequency table, visually represented by a word frequency image. This image highlights the most commonly mentioned words across all informants, with larger word sizes indicating higher frequency or greater saturation. Following this, frequently appearing words were further analysed using a text search function, which tracked sentences starting and ending with these words and displayed them in a word tree format for clearer context. The identified themes and sub-themes are outlined as follows:

Knowledge about Mental Health

Findings from the interviews illustrate the understanding of mental health among teenagers and teachers, which is detailed in two sub-themes:

Informants' understanding of the concept of mental health

Table 3. Word frequency data based on the subtheme of the 'mental health concept' theme, related to informants' knowledge about mental health

a) Definition	b) Cause

Source: Nvivo - Word Frequency Query Results, 2024

Table 3 presents a variety of keywords mentioned by informants across each sub-theme of the 'mental health concept' theme. To grasp the significance of these keywords, sentences that begin and end with these key terms have been traced from informant statements, providing context and insight as follows:

The concept of mental health, as understood by informants, includes a central keyword: “well-being.” The following quotes highlight informants' perceptions:

- "Mentally, we like to have a good soul, **well-being**, a good mind, and not have trauma or depression (S2)."*
- "Mental health is like a state of **well-being** for the mind (S5)."*
- "It's a condition where one's mental **well-being** is good (S6)."*

The findings indicated that the participants associated mental health with emotional well-being, a positive state of mind, and freedom from trauma or depression. This suggests that mental health encompasses not only the absence of illness but also the presence of positive aspects of well-being. Mental health is all about finding a balance of emotions and thoughts. This is shown by statements like "well-being, good mind" and "no trauma." These statements show how important balance is for cognitive and emotional aspects. Moreover, the emphasis on "no trauma or depression" in Trauma and Depression as Barriers to Mental Wellbeing highlights the significance of recovery and prevention in preserving mental well-being.

The informants also associate the concept of mental health with causes, using the keyword “family.” These statements illustrate their viewpoints:

- "...mental health in a family context means, to me, that mental health results from certain influences (G1)"*
- "...the presence of violence from family or in their environment (G3)"*
- "...a harmonious family relationship. It's different when there's a broken home (G4)"*

The findings indicated that informants regarded the family as a salient factor influencing mental health. Their perspectives encompassed both positive and negative influences emanating from family interactions, including harmony, conflict, and violence. As posited in statement (G1), the notion that mental health is influenced by specific factors suggests that the family plays a pivotal role in this regard, functioning as both a cause and a solution for mental health issues. The presence of family violence or conflict (G3) is widely recognized as a substantial risk factor for mental health complications. A substantial body of research has demonstrated that domestic violence has a

detrimental effect on the mental well-being of its victims, often resulting in an elevated probability of developing trauma, PTSD, and anxiety disorders. The family has been identified as a protective factor in the expression of informant (G4), who underscored the significance of harmonious family relationships in promoting mental well-being. In this context, a well-connected family can act as a protective factor, offering emotional support, security, and stability. The role of the "Broken Home" in Mental Health Disorders, as outlined in the Statement on "Broken Home" Families (G4), indicates a relationship between familial disharmony and mental health concerns.

Informants' Understanding of Mental Health Criteria

Table 4. Word frequency based on the subtheme of the 'mental health criteria' theme, related to informants' knowledge about mental health



Source: Nvivo - Word Frequency Query Results, 2024

Table 4 illustrates the keywords frequently mentioned by informants concerning the theme 'mentally healthy criteria,' which are categorized into two sub-themes. To capture the full meaning of these keywords, quotes from informant statements are analysed by examining the sentences where these keywords appear.

The first sub-theme, indicators of mental health disturbances, is represented by the keyword "**bad mood**." This term is contextualized in the following quotes:

- “...like always in a **bad mood**, so it kind of disrupts their health (S1)”
- “...someone, for example, feels a **bad mood** and then becomes happy (S2)”
- “...an inner feeling that feels uncomfortable, like a **bad mood**. (S5)”

The findings indicate that respondents perceive depression as a salient indicator of mental health disorders. The term "bad mood" is understood to encompass a range of emotional discomfort, including frequent bouts of depressed mood, and its impact on individual well-being. According to the informants, the presence of "bad moods" (S1, S5) can be considered an early manifestation of mental health disorders. Specifically, the consistent experience of negative moods may serve as an indication of Mood Disorders. According to S2, the transition from a state of discontent to one of elation is indicative of emotional volatility, a phenomenon that has been associated with the presence of mood disorders. The observation of such fluctuations in mood underscores the necessity of meticulous attention to individual emotional patterns during mental health assessments. The utilization of keywords such as "uncomfortable inner feelings" (S5) signifies the emotional distress experienced as a hallmark of a depressed mood.

- The mental health mark contains the keyword "no" and the following statement:*
- "...have a good mind, **no** trauma, **no** depression (S2)"
- "...show **no** readiness to learn, which is also visible from his physical neglect (G4)."

This finding suggests that indications of mental health are frequently discerned through the absence of deleterious conditions, such as trauma, depression, or unproductive behaviors. Informants employed the keyword "no" to characterize mental health as a state of being unencumbered by psychological disorders or impediments to

daily functioning. The statement from S2, which emphasizes the absence of trauma and depression, reflects a deficit approach to understanding mental health, which focuses on the absence of negative symptoms. The statement from G4 highlights the physical manifestations of mental health, such as readiness to learn and a well-groomed appearance, suggesting that mental health not only relates to psychological states but also impacts daily behavior. The use of the term "no" in the aforementioned statement suggests that informants find it more straightforward to identify instances of mental health through negative indicators, such as trauma, depression, or disorganization, as opposed to positive indicators, such as happiness or social engagement. This underscores the necessity for public education aimed at fostering a positive understanding of mental health, rather than a narrow interpretation of it as merely the absence of problems.

The Relationship Between Mental Health and Character

The interview results reveal that informants perceive mental health as intertwined with character, as categorized into three sub-themes shown in Table 5.

Table 5. Word frequency mentioned by informants based on sub-themes related to the connection between mental health and character

a) Related	b) Example	c) Flexibel

Source: Nvivo - Word Frequency Query Results, 2024

Table 5 shows the frequency of words mentioned by informants based on sub-themes related to the connection between mental health and character. Understanding the significance of each keyword is achieved by tracing the beginning and end of relevant sentences in informant statements:

Mental Health Linked to Character Development: The keyword “can” frequently appears, illustrated in the following quotes:

- “...It can happen, as I mentioned if the family’s approach to character and mental development is harsh, it can affect school life (G1)”
- “...Yes, it can, for instance, here, we encounter children with typical emotions, but some have a temperament that resists correction (G2)”
- “...Yes, it can be influenced by someone’s character (G4)”
- “...Yes, if the child **can** usually be quiet (S2)”

The findings indicate a close relationship between mental health and character development. Informants used the keyword "can" to emphasize the potential influence of character, family approach, and temperament on mental health and vice versa. This relationship demonstrates that mental health not only contributes to character development, but is also influenced by individual character. The Family Approach and Its Impact on Character Development and Mental Health from statement G1 underscores the manner in which family approaches, particularly those characterized by rigidity and severity, can exert a significant influence on the development of an individual's character and mental well-being. This observation lends support to the notion that the family environment plays a pivotal role in the formation of an individual's psychological health.

G2 observations revealed that children exhibited typical emotions and temperaments, with some exhibiting resistance to correction. This finding suggests that individual differences in temperament may influence responses to stress, acceptance of correction, and management of emotions. These factors are pertinent to mental health. As stated in Statement G4, an individual's character has been demonstrated to exert an influence on their mental health. The presence of certain characteristics, including but not limited to personality, resilience, and adaptability, has been observed to play a role in an individual's ability to cope with pressure or challenges. This observation suggests that character may serve as a determining factor in an individual's response to external stressors. S2 demonstrates the impact of personality traits, including introverted behavior, on children's responses to social or stressful circumstances. The manifestation of introverted tendencies in individuals might influence their emotional and social processing.

Mental Health Reflecting Character Traits: This is supported by the keyword “child,” evident in quotes like:

“...for example, an emotional child, we often encounter here, a temperamentally difficult child who can't be reprimanded. (G1)”

“...for instance, there are children who seem unfocused, frequently wanting to leave the class and unable to remain calm. (G2)”

The findings indicate that children's character traits frequently serve as indicators of their mental health conditions. The utilization of the keyword "child" underscores the emphasis on early childhood, a period in which character traits such as emotional temperament or disorganized behavior may be indicative of mental health concerns that necessitate consideration. Emotional Temperament as a Reflection of Mental Health from G1 statement describing children who are temperamental and difficult to accept reprimands serves as an illustration of how emotional temperament is one of the aspects frequently observed in order to assess mental health. G2 highlighted behaviors such as being unfocused, frequently leaving the classroom, and not being able to calm down as signs that reflect the child's mental state so that unfocused Ness and unsettledness as symptoms. The child's apparent inability to accept correction (G1) or to maintain focus (G2) suggests a close link between mental health and their social and cognitive abilities.

Mental Health and Character as Flexible Traits: The keyword “sometimes” is used to reflect variability in mental health:

“... sometimes, yes, sometimes it's good, and other times it isn't (S1)”

“...sometimes a quiet character could indicate they have a lot of issues, which affects their mental health (S2)”

“...sometimes those who tend to be quiet may have poor mental health (S5)”

The findings indicate that mental health and character exhibit a flexible and dynamic nature, whereby an individual's condition or behavior may undergo alterations in response to specific circumstances or experiences. The utilization of the term "sometimes" underscores the variable nature of mental health, signifying that mental well-being is not static but is susceptible to influence by various internal and external factors. S1 statement indicates that mental health is subject to fluctuation, with individuals experiencing periods of alternating good and bad conditions. This fluctuation suggests that mental health may be unstable. Statements S2 and S5 underscore the notion that the manifestation of quiet characters does not invariably signify positive well-being. On occasion, these characters may serve as a harbinger of mental health concerns, as they can be indicative of variability.

DISCUSSION

Interpretation of Key Findings

Based on the data collected through interviews, observations, and documentation from informants, this study examines teachers' and adolescents' perceptions of mental health and explores the connection between mental health and character in preventing violence.

Knowledge About Mental Health

The research discusses how teenagers and teachers understand mental health, as derived from interview results organized into two main themes: the concept of mental health and criteria for mental health. Using word frequency analysis in Nvivo, these themes reveal two subthemes each, capturing how informants perceive the definition of mental health, causes of mental health disorders, and indicators of mental well-being.

Mental Health Concept

Table 3 displays the frequency of words informants used to describe mental health, identifying two core subthemes: understanding and causes. Within the understanding subtheme, informants generally viewed mental health as a state of balanced mind and spirit, free from trauma, stress, or depression. For example, one informant described mental health as, "Our mentality is like having a good soul, having a good mind, no trauma, no depression" (S2). This reflects a widespread perspective among informants that mental health is achieved through a stable inner balance on insights (7)

Another understanding emerged from informant S5, who associated mental health with a "good inner condition," implying freedom from depressive or distressing feelings. For instance, the phrase "... mental health is like a good mind" (S5) highlights the informants' understanding that mental health involves balanced emotional and psychological well-being rather than physical health alone. These findings suggest that the meaning of mental health among teenagers and teachers encompasses emotional and psychological stability and resilience to trauma. (8)

In the subtheme "causes", informants highlighted the strong connection between mental health and the family environment. For instance, informant G1 observed, "Family mental health means this; I just think that mental health is a consequence," indicating that family dynamics, whether positive or negative, play a significant role in shaping an individual's mental well-being. Supporting this, informant G3 pointed to household violence or negative environmental factors as potential causes of mental health disorders. Additionally, informant G4 emphasized the value of harmonious family relationships, contrasting it with the challenges faced by individuals from "broken homes," where such support structures may be lacking (9)

Criteria for Mental Health

The second major theme identified in this research centers on mental health criteria, which is divided into two subthemes: signs of mental disorders and signs of mental wellness. Table 1.4 shows that the word "bad mood" frequently appears in informants' statements as an indication of mental disorders. For instance, one informant expressed, "...it seems like he's always in a bad mood, so his health seems to be disturbed" (S1). This observation suggests that prolonged negative feelings, such as recurring anger or sadness, are perceived as signs of mental health challenges. Another informant, S5, also noted that "a mind filled with unpleasant feelings, like bad mood" is indicative of mental health issues (10)

Conversely, in the subtheme related to signs of mental health, informants used the word "no" to signify a state where a person is free from psychological disturbances. For example, informant S2 remarked, "...has good thoughts, no trauma, no depression," emphasizing that a mentally healthy state is characterized by positive thinking and the absence of trauma. Informant G4 further added that someone who is mentally well can be recognized by their readiness to learn and a well-maintained physical condition (10)

These interview results reveal that understanding mental health among teenagers and teachers varies widely yet generally converges on the idea of emotional and psychological balance. The family environment emerges as an essential factor in shaping an individual's mental health. Indicators such as persistent negative emotions for mental disorders a positive mindset and well-maintained physical health for mental wellness are key themes identified by informants. This study offers critical insights into perceptions of mental health among adolescents and teachers, highlighting areas that could guide mental health education initiatives within school settings.

The Relationship between Mental Health and Character

This research explores the intricate relationship between mental health and character, examining three primary subthemes: relatedness, exemplary influence, and flexibility. Through word frequency analysis of interview data, the study highlights how an individual's character is intricately connected to their mental health.

The Connection Between Mental Health and Character: Subtheme “Can”

In this research, the keyword "can" frequently emerged in informants' discussions regarding the relationship between character and mental health. Informants conveyed that character shaped by life experiences or family background can profoundly influence one's mental health. For example, G1 stated, "...It could be that, sir, as I said earlier, if his family instills certain character traits and mentality, this will impact their experience at school." This illustrates how family background significantly influences character formation, ultimately affecting mental well-being in academic settings. Families employing harsh parenting styles may foster children who struggle with emotional regulation and conflict resolution, as expressed by G2, "...Yes, it can, for instance, here, we encounter children with typical emotions, but some have a temperament that resists correction" (11)

Examples of Character Influence on Mental Health

This subtheme emphasizes how specific character traits manifest in behaviors that reflect mental health status. The keyword "example" appeared frequently as informants described children whose emotional outbursts or inability to focus in class indicate mental health challenges. G2 shared, "...for example, there are children who seem unfocused and frequently wanting to leave the class and unable to remain calm," highlighting that behaviors of restlessness or inattentiveness can suggest mental health issues, such as anxiety or concentration difficulties. Strong character traits, especially those related to emotional control, can be instrumental in managing stress and conflict, aligning with research suggesting that resilient character traits can support stronger mental health (12)

In this subtheme, a person's character is described through examples of children's behavior that shows the influence of their mental health. The keyword that often appears is "example," where informants describe children who are emotional or unable to focus in class as a reflection of their disturbed mental health. For example, G2 mentioned, "...for example, there are children who are not focused and often want to go out of their minds in class," which shows that the character of children who are restless and unable to stay still can be an indication of mental health problems such as anxiety or impaired concentration. Strong character, especially in terms of controlling emotions, can help a person deal with stress and conflict, as explained by other research that shows how strong character can strengthen an individual's mental health (12)

Flexibility in the Relationship Between Mental Health and Character

The final subtheme, "flexible," was represented by the keyword "sometimes," underscoring the adaptable nature of the character and its reciprocal impact on mental health. This flexibility reflects how the character can shift, influencing mental health in varying ways. S1 remarked, "...of course sometimes it's good, sometimes it's not," suggesting that character traits can fluctuate with changes in mental states. Similarly, S2 and S5 noted, "...sometimes his character is quiet; perhaps he faces many problems, impacting his mental health." This illustrates that individuals who are typically quiet may be dealing with internal challenges, which can disrupt mental health (13)

The findings reveal a substantial link between mental health and individual character, underscoring how life experiences and early influences shape traits that affect mental resilience. Positive character traits, such as emotional regulation and adaptability, are conducive to better mental health, while weaker character traits or significant emotional stress can contribute to mental health difficulties. This connection highlights the importance of character development from an early age as a proactive measure to support mental well-being, especially in adolescence which is a critical period for emotional and psychological growth.

Comparison with Previous Studies

This research highlights the essential role of mental health in preventing adolescent violence and fostering emotional well-being through inclusion-based character education. Findings align with prior studies across several dimensions:

The Relationship Between Exposure to Violence and Mental Health: Previous studies indicate that exposure to violence, whether direct or indirect, significantly impacts adolescent mental health, often leading to conditions like depression, anxiety, and post-traumatic stress disorder. In this context, adopting a proactive approach through character education is vital to mitigate these negative effects. Developing resilience and self-regulation skills early can reduce the psychological toll of violence and enhance mental stability (13).

The Importance of Environmental and Family Support: Consistent with this research, prior studies underscore the significance of support from both family and the school environment in promoting adolescent mental health. Inclusive character education strengthens the influence of social and family structures, reinforcing their roles as foundational supports for emotional well-being and essential elements in violence prevention efforts (14).

Inclusive Character Education: Multiple studies affirm that inclusive character education plays a critical role in reducing the likelihood of violent behaviors in adolescents. By fostering self-control and improving social interaction skills, this approach helps young people develop healthier ways of managing conflicts and emotions, thereby contributing to overall mental health (15).

Character education theory can be applied using various methods and approaches (4). Teachers can utilize the Sejiwa Friends module as a program to support active and participatory learning while also providing students with opportunities to experience unpleasant situations firsthand through role-playing activities included in the module. In addition to schools educating children on violence prevention, families also play a crucial role in shaping and developing strong character in teenagers—not only in terms of academic achievement but also in ethics and morals, which influence adolescents in preventing violence. According to (16) children's behavioral problems related to character education development often stem from families that prioritize academic values and achievements over ethical considerations. This results in an education system that fosters intelligence but lacks strong character, leading to deficiencies in ethics and morals among children and increasing the likelihood of violent behavior in teenagers.

The findings of this study can be utilized by schools to establish student communities, such as the Soul Friends program, which can contribute to violence prevention within the school environment. Soul Friends can serve as students' primary support system for mental health through the "seeing, hearing, and reporting" program. This module is designed to be independently implemented by teachers to create a community of like-minded peers while enhancing their ability to prevent and address mental health issues and violence within the school setting. Although this research was conducted with a relatively small sample size and limited geographical coverage, the findings indicate significant results regarding the effectiveness of character education in preventing violence among adolescents. These results align with various theories and previous studies, suggesting that inclusive character education fosters more constructive thinking patterns and behaviors in adolescents, particularly in responding to situations with potential for violence.

Implications for Public Health

The implications of this research for public health, especially regarding mental health interventions and violence prevention programs, are substantial:

Prevention of Mental Illness: Findings suggest that character education-focused interventions for adolescents may reduce the risk of mental disorders and violent behaviors, ultimately enhancing mental health across the wider community. These efforts not only benefit individuals but contribute to societal well-being on a broader scale.

Increased Health Awareness: Programs that promote mental health awareness help increase public understanding and encourage proactive mental health management. Such initiatives inspire individuals to seek support when necessary and to engage in community activities that foster mental health.

Stigma Reduction: Education and awareness campaigns focusing on mental health can play a pivotal role in reducing societal stigma, empowering people to share their experiences and seek help without fear of judgment.

Health Policy Development: This research provides valuable insights that can guide the creation of public health policies, especially those focused on violence prevention and mental health promotion. Integrating these findings into policy frameworks is essential to improving the overall health and safety of society.

In conclusion, integrating mental health research and interventions into public health policy is critical for fostering the overall well-being of society.

Limitations and Cautions

This study on teachers' and adolescents' perceptions of mental health and character in violence prevention has some limitations that should be acknowledged:

Stigma and Discomfort: Adolescents may hesitate to discuss mental health issues openly due to stigma, which can affect the accuracy of data regarding their experiences and views on mental health.

Limited Time and Resources: Research conducted within a short timeframe or with limited resources may not capture all aspects of adolescent mental health and violence, potentially affecting the depth of findings.

Environmental and Social Factors: The social and environmental factors influencing adolescent mental health were not comprehensively addressed in this study, which may impact the overall analysis.

Recommendations for Future Research

Building upon these findings, future research should consider the following recommendations to better understand mental health and violence prevention among adolescents:

Multi-Stakeholder Involvement: Future studies should engage a broader range of stakeholders, including educators, parents, and community members, to gain a more comprehensive view of mental health challenges and to design more effective prevention programs.

Longitudinal Research: Conducting longitudinal studies can shed light on how adolescent mental health and exposure to violence evolve over time, providing insights into key contributing factors.

Stigma and Awareness: Additional research on mental health stigma is needed to understand how societal views affect youth behavior and attitudes towards seeking help, as this is crucial in shaping supportive interventions.

Implementing these recommendations can facilitate a deeper understanding of youth mental health and aid in developing effective strategies to prevent violence and promote emotional well-being among adolescents.

CONCLUSION

The findings of this study underscore the significant influence of adolescents' mental health on both their tendency toward violent behavior and their emotional well-being. Key conclusions drawn include: This research makes a significant contribution by highlighting the relationship between teachers' and students' perceptions of mental health and character as a strategic approach to violence prevention. These findings emphasize the importance of collaboration among schools, families, and communities in fostering an environment that supports students' character development and mental well-being.

The implications of this study include the need for holistic, school-based programs and educational policies that integrate mental health and character education. We encourage educators to implement character-based approaches, policymakers to develop inclusive policies, and researchers to expand studies across diverse socio-cultural contexts to enhance the effectiveness of violence prevention efforts.

AUTHOR'S CONTRIBUTION STATEMENT

All authors made substantial contributions to the study, overseeing its execution, progress, drafting, and revising the manuscript. Muhammad Irwan contacted relevant authorities, conceptualized the study, designed the framework, and was responsible for proofreading and critically revising the content. Irfan and Sari Rahayu Rahman handled sample collection and processing. Irfan conducted statistical analysis, data interpretation, and data collection. Laksmyn Kadir oversaw study implementation, proofreading, and content revision. Risnah engaged with authorities and managed draft editing. All authors reviewed and approved the final manuscript.

CONFLICT OF INTEREST

The authors declare no conflicts of interest or personal affiliations that could have influenced the work presented in this paper.

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