

SOCIAL CONSTRUCTION, STIGMA, AND VALUE SHIFTS IN CONTEMPORARY SOCIETAL MENTAL HEALTH

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Abstract - This article explores how social construction influences mental health in contemporary society, emphasizing stigmatization, changing values, and evolving representations of psychosocial well-being. The study is based entirely on qualitative literature review and thematic synthesis, without the involvement of field interviews or observation data. The findings indicate that stigma remains a significant barrier in achieving optimal mental health, even as educative discourse and policy transformation begin to shift public perspectives. Advancements in technology and the open flow of information enable the deconstruction of traditional narratives, yet disparities in acceptance persist due to cultural, social, and educational factors. Efforts to promote inclusive understanding require improvements in literacy, participative intervention, and supportive networks at all socio-institutional levels. The article concludes by calling for ongoing reforms and community participation to foster a just, empathetic, and mentally healthy society.

Keywords: social construction, mental health, stigma, representation, social change, psychosocial well-being, public perception.

INTRODUCTION

The modern way of life is characterised by complexity and rapid changes in values. Every individual now faces a wide range of social demands, from economic competition and cultural expectations to changes in lifestyle. Amidst this dynamic environment, mental health is slowly gaining momentum. Psychosocial aspects have become an important part of everyday life. Understanding psychological well-being is no longer just an individual issue but has become a shared concern. The processes of urbanisation, technological globalisation, and online activities that have changed the dynamics of social interaction, as studied by Oluwatoyin (2021), provide a broad field for the formation of new meanings of what is considered psychologically healthy. The processes of urbanisation, technological globalisation, and online activities provide a broad field for the formation of new meanings about what is considered psychologically healthy. Mental health has finally emerged as an increasingly complex arena of social interaction, involving various symbols, narratives, and frameworks of thinking that continue to evolve along with changes in society (Knez, 2023).

Contemporary society presents a clash between modern values and traditional cultural heritage. Perceptions of mental health are often framed within the family, educational institutions, and even digital public spaces. Often, the collective perspective that is formed influences individuals' patterns of acceptance of the psychological issues they experience. In some communities, the stigma attached to mental disorders remains, creating barriers for individuals who need access to psychosocial support. Furthermore, there is also a tendency to cover up or ignore mental health issues due to concerns about negative social judgement. This situation shows that mental health does not stand alone as a medical issue, but is constructed and reinforced through continuous social interaction (Holder et al., 2019).

The effectiveness of these efforts to manage emotions and recover is often confronted with a very strong external challenge, namely social stigma. The stigma that develops in everyday life shows how representations of mental health are often biased and prejudiced. The labels given by society greatly influence the adaptation and recovery process of individuals facing mental challenges. A mental illness is often seen as a flaw or weakness of character. This view indirectly reinforces patterns of exclusion, distancing individuals from healthy social relationships. Such realities reveal the complex social processes behind the formation of meanings related to psychological well-being. In fact, the power of stigma can build thick barriers between individuals and their environment, making the challenges they face even more difficult (Ahad et al., 2023). Therefore, building psychological well-being requires a dual approach. On the one hand, individuals need to master emotional management strategies as proposed by Irfan and Darmawan (2021). On the other hand, collective efforts are needed to deconstruct social stigma, which is the main source of pressure and obstacle to the recovery process.

The transformation of values in today's society has a significant influence on the way mental health is viewed. The influence of global trends, advances in psychological knowledge, and the rise of discourse in the digital realm have all contributed to a shift in the way psychological problems are perceived. The presence of various support groups and mental health literacy campaigns is slowly dismantling the outdated narratives that have distorted the meaning of mental illness. Collective efforts that have emerged in society, including community-based movements and individual

empowerment practices, have helped sow the seeds of social acceptance. However, this shift still faces challenges in the form of resistance, unequal access to knowledge, and diverse interpretations of the categories of mental health and illness.

Warin (2021) analysed the relationship between social factors and individual well-being, both mental and physical, confirming that a person's psychological condition cannot be separated from the social dynamics around them. This analysis, which links social structures to individual experiences, opens up space for critical questions about how social constructions of mental health itself are formed and work. Among these changes is the need to unravel how social constructions are actually formed, developed, and influence individuals and society at large. The process of interpreting the symptoms, causes, and ways of dealing with mental health issues is often trapped in dominant narratives. Each layer of society has a different way of interpreting it, influenced by social, cultural, and educational backgrounds. Reflection on these social constructs is important in order to find the root of the problem as well as alternative mindsets that are more inclusive and fairer. Critical studies of the dynamics of mental health representation help strengthen understanding and open space for the renewal of social values that support broad psychosocial well-being.

Society faces a major challenge in removing stigma and building authentic appreciation for mental health diversity. The process of societal acceptance of individuals with certain psychological conditions is still highly vulnerable to bias (Ordu, 2023). Fear of discrimination causes some people to prefer to remain silent and endure suffering without adequate support. Discourse on mental health often stops at the level of rhetoric, without fully touching on behavioural change. The representations created in the media and public institutions determine how society learns to give meaning to and from attitudes towards this issue. This situation highlights the importance of systematic efforts to unravel all the social aspects that shape the relationship between individuals and mental health.

Mental health is no longer merely a personal issue, but has become a major determinant of the quality of communal life. The success of society in managing values, symbols, and narratives regarding psychosocial well-being will greatly determine the socio-economic future of modern humans. The elimination of stigma, guaranteed inclusion, and the opening of spaces for support are indicators of the achievement of a humane civilisation. Newly established values will bring about a paradigm shift, enabling the growth of solidarity at the micro to macro levels. Therefore, analysis of the social construction of mental health is a valuable contribution to strengthening collective awareness and social practices that are more just and equitable for all levels of society.

The role of the family as a support system becomes increasingly vital and complex when faced not only with the demands of work, but also with rapid changes in social values, particularly those related to mental health. Changes over time have brought society into an era where information and understanding about mental health are much more accessible. However, the speed of information flow has not fully kept pace with the progressiveness of value changes at the local level. Most narratives are formed and published through digital media and develop faster than the adjustment process at the family and community levels. As a result, there is often a gap between new understandings that emerge in the global public sphere and actual practices and behaviours in the surrounding environment. This sometimes causes confusion and even rejection of modern ideas related to mental health. Social media not only directly affects individual mental health, but also acts as a channel that accelerates the dissemination of mental health discourse, which then creates social dynamics and tensions at the local level when new ideas encounter established values and practices (Aisyah & Issalillah, 2021). In situations of tension such as this, the role of the family as the primary social unit that directly faces the conflict between old values and new discourse becomes crucial. The family's capacity to provide adaptive, harmonious, and responsive support on mental health issues will determine whether this tension leads to rejection and conflict, or rather becomes an opportunity for learning and updating shared values (Aliyah et al., 2022). Thus, the concept of family support (Hariani & Mardikaningsih, 2023) needs to be understood not only as a buffer against work stress but also as an essential cultural filter and mediator in helping family members navigate the currents of changing values, including the complex discourse on mental health.

Finally, discussions about the social construction of mental health are closely related to the need to unravel the roots of stigma formation and explore how representations are produced and consumed in society. This assessment is necessary for the transition towards a healthier understanding of psychological well-being to be effective and sustainable. Thus, analytical approaches that focus on stigma, representation, and value change can make a positive contribution, both to science and to the realisation of a more supportive and dignified society.

The problems faced in society are closely related to the strength of social constructs that frame the principles of mental health. The meaning of mental illness is often trapped in stereotypical tendencies, so that all recovery efforts are burdened by the fear of stigma. At the community level, various negative labels are easily attached to individuals who show certain symptoms. This creates significant barriers to accessing support services, even before individuals realise they need help. The presence of this stigma automatically creates distance, thickening the walls of separation that are difficult to penetrate with empathy or rational understanding. Various segments of society experience a repetition of old narratives that fail to accommodate change, slowing down the process of collective value transformation.

Stigma is also reinforced by patterns of representation that are continuously produced in various social media. Discourse distributed by the media, school environments, workplaces, and religious spaces contributes to the construction of social constructs about who deserves sympathy and who should be avoided. Representations that are cornering,

prejudiced, and lacking in nuance are often reflected in jokes, folklore, and everyday expressions. As a result, society is trapped in a repetitive pattern that distorts the essence of mental health as a rational and human problem. When social acceptance fails to grow, affected individuals are more likely to experience a decline in their quality of life. The choice to withdraw becomes a social inevitability that continues from generation to generation (Romanova, 2023). The psychological burden caused by this kind of social stigma can be an additional factor that increases a person's mental workload, for example in operational work. In this case, measurements of workload and mental fatigue, as conducted by Irfan (2022), also need to consider this social-stigmatisation dimension as a variable that can affect the psychological well-being and performance of workers beyond mere technical task demands.

Such a situation calls for a reinterpretation of the values of communal living and new social symbols that are worthy of adoption by society. On the one hand, major changes in the way of thinking and acting are often constrained by the influence of tradition and pressure from certain social groups. Moreover, mass awareness efforts do not instantly change individual mindsets. Diversity in life experiences, educational backgrounds, and the strength of local cultures mean that change is gradual and involves negotiation. In this process, individuals play an active role as subjects who continue to face social pressure, even though they are open to accepting new ideas rationally. In this case, structured and sustained efforts, such as through education, are crucial, as demonstrated by Kurniawan and Seran (2024) regarding its role in reducing mental health stigma in schools. Therefore, education cannot stand alone but must be seen as one of the main tools working in this complex field of social change to systematically encourage a reinterpretation of values and reduce resistance to new ideas about psychosocial well-being.

In an era of value disruption accompanied by technological advances, today's society is faced with a tug-of-war between new knowledge and old narratives (Walsh & Foster, 2021). Individuals often feel torn between two extremes: the demand to accept mental health as part of well-being and the social pressure that perpetuates outdated stigma. Value uncertainty and information disparity add a new dimension to the inner struggles experienced by the current generation. The available choices are not necessarily in line with the comfort and essential needs of individuals or social groups.

This study is crucial at the present time. The mental health of individuals and community groups today is greatly influenced by communication patterns, virtual interactions, and increasingly complex social expectations. The globalisation of information has given rise to new challenges, where values are changing rapidly, while society's understanding may not necessarily be able to adapt well enough. Amidst rapid structural changes and technological developments, society often faces the dilemma of reconciling tradition with modern views on mental health. Vulnerability is exacerbated by the pressures of life and limited knowledge, causing values to merge sporadically without a clear direction.

In addition, changes in lifestyle and the emergence of social media as a digital public space have shifted patterns of interpersonal relationships to become more open and prone to judgement. The process of representing mental health no longer takes place privately or is limited to the family circle, but has spread to vast virtual spaces. The lack of balance between open discourse and privacy protection causes vulnerability in the acceptance of one's mental identity. Exploring mental health issues is essential to building a safe, friendly social ecosystem that is oriented towards effective recovery. Therefore, research on the social construction of mental health is highly relevant and strategic in formulating the direction of future value changes.

The purpose of this paper is to unravel the social processes that play a role in building, maintaining, and changing society's views on mental health. This research aims to present a new theoretical understanding of the dynamics of stigma, representation, and value change in modern society. In addition to contributing to the development of a theoretical framework for mental health studies, the results of this analysis are expected to be useful as a practical reference for strengthening policy and public education strategies to improve the quality of psychosocial well-being in general.

RESEARCH METHODS

The main approach used in this study is a qualitative literature study oriented towards thematic synthesis. Data collection was carried out systematically by searching scientific works, reference books, and journal articles relevant to the social construction of mental health in contemporary society. The author used a focused search strategy through leading databases such as ProQuest, Scopus, and ScienceDirect. The selection of literature prioritised recency, relevance to the research issue, and the novelty of the analysis. Each source was read critically to select the main concepts that explain the various dynamics of stigma, representation, and value shifts in society. This method of literature study allows for the identification of key ideas from various perspectives, while synergistically connecting them to the major themes being examined.

Strict inclusion and exclusion criteria were applied to ensure the validity of the findings. The selected literature specifically discussed the issues of the social construction of mental health, the role of stigma, changes in representation, and the formation of psychosocial values. Sources outside the scope of the main topic or those containing field research-based data were ignored to maintain methodological consistency. The coding process was carried out through keyword identification, theme grouping, and narrative content analysis. At this stage, it was important to exercise caution in order

to avoid interpretative bias. The coding results were then organised into thematic categories that served as the basis for the main discussion of the manuscript.

To ensure the quality of the research, iterative reviewing and thematic triangulation techniques were used, as suggested by Noblit and Hare (2005), as well as a strategy of validating findings through comparative clarification of themes, as described by Thomas and Harden (2008). The accuracy of the synthesis was evaluated through critical discussion of the main sources, remapping of the connections between theories, and independent assessment of the cohesion of the resulting description. The author also adapted the quality assurance model from Gough, Oliver, and Thomas (2012) to increase the transparency of the article selection and synthesis process. Thus, this study is expected to produce a strong conceptual understanding that is relevant to the development of scientific discussion in the social and psychological fields.

RESULTS AND DISCUSSIONS

Social Stigma and Mental Health in Contemporary Society

The stigma surrounding mental health is a product of social interaction rooted in the collective meaning-making process of society. For a long time, negative judgements about individuals with psychological disorders have been ingrained in everyday discourse. The labels attached to them are not merely individual views, but the result of cultural constructs that have been passed down from generation to generation. This process begins with differences in perception regarding what is considered "normal" and the rejection of any behaviour that falls outside the bounds of common understanding. In family, school, and community settings, stories or jokes about people with psychological problems are often used as a tool to reinforce narratives of social unworthiness. This becomes the initial foundation that facilitates the reproduction of stigma in various places and times (Holder et al., 2019).

This analysis of the mechanisms of discrimination and individual responses to it provides a relevant framework for understanding similar dynamics in the context of mental health stigma. Society often defines mental health within certain social standards. Those who exhibit different symptoms are considered deviant and are often excluded from social circles. This rejection of difference results in covert and overt forms of discrimination, where individuals with specific mental conditions feel alienated even before they are able to fully recognise themselves. Such conditions reinforce a cycle of doubt and anxiety, as affected individuals are forced to contend with a negative social identity. These experiences foster fear and even form deep trauma that affects long-term quality of life (Sawaf, 2022). In the face of this harmful social pressure, self-care practices can serve as an important defence mechanism and source of psychological resilience for individuals, as researched by Binti Ismail (2021). Thus, efforts to maintain mental well-being must involve two strategies: first, deconstructing discriminatory social norms; and second, strengthening individual capacity through adaptive self-care practices. This dual strategy recommendation is in line with the findings of Pakpahan et al. (2022) on the importance of combining individual coping strategies and collective efforts to combat stigma in the face of discrimination, albeit in a different context.

Social stigma is constructed by a multi-layered communication network. News about mental disorders is often spread through informal conversations, the media, or digital timelines that frame the issue in a sensational manner. Instead of providing understanding, the messages received by the public reinforce the impression that psychological disorders are a disgrace that must be hidden. Visual media and popular narratives in films, news, and online channels more often portray figures with psychological conditions as threats or even objects of ridicule. Such representations perpetuate the misconception that people with mental disorders cannot function productively in society.

The process of labelling people with mental disorders creates invisible but very real and effective social boundaries. Individuals diagnosed with mental health issues tend to be treated differently, whether in the workplace, educational settings, or their neighbourhoods. This difference in treatment often causes them to experience barriers to obtaining fair access to health services, education, and personal relationships. As a result, many choose to hide their condition in order to remain accepted in the community. Internalised stigma develops along with experiences of rejection, exacerbating social isolation and narrowing opportunities to obtain adequate support (Maxson, 2022).

In social life, stigma is often reinforced by the influence of norms and customs that have been deeply ingrained in society for a long time. Any behaviour that is considered out of the ordinary will immediately receive negative judgement. Even in groups that promote solidarity, mental health issues are rarely discussed openly. This closed attitude towards discussion makes educational efforts difficult to develop. Society prefers to ignore or let mental health issues pass without intervention. This shows how dominant certain values are in shaping collective perceptions and inhibiting social change (Kecmanović, 2010).

Fear of stigma causes most individuals with mental disorders to be reluctant to seek professional help. This attitude stems from direct or indirect experiences of discrimination experienced by others around them. When someone shows the courage to open up, the response they receive is often rejection or mere sympathy without concrete solutions. It is also common to assume that mental health problems are the result of personal weakness or a lack of faith, and therefore should be avoided. This perception reinforces feelings of guilt and increases barriers to recovery.

A culture of silence, supported by patriarchal social systems and local authority hierarchies, makes it difficult to create a safe space for individuals with specific psychosocial needs. Discussions about mental health are still considered taboo, something that is inappropriate to bring up in public, let alone acknowledge as a significant issue. In fact, in some cases, families prefer to ostracize members who are considered problematic rather than seek recovery-based solutions. This shows how closely social constructs and the processing of stigma are linked at the core family level (Nascimento & Leão, 2019).

Stigma is also reinforced by the lack of mental health literacy in various levels of society. The information that circulates is often biased, not based on valid data, and even contains myths and terminological errors. As a result, the public's perception of mental illness becomes blurred and easily manipulated by popular opinion. The general public tends to believe in ancient narratives or stories passed down from generation to generation, rather than being open to scientific studies and professional recommendations. Misleading narratives and limited literacy hinder efforts to build a common understanding and foster healthy social solidarity.

On the other hand, social pressure and expectations of success add to the psychological burden of individuals facing mental health issues. It is not uncommon for individuals to be forced to project a perfect image, even though internally they are struggling with anxiety or depression. The social image imposed by the environment widens the gap between emotional reality and the social reality that must be projected. The process of hiding these inner wounds ultimately leads to psychological exhaustion and even worsens the chances of recovery (Cannie, 2019). This depressed psychological condition can be understood as a consequence of the dominance of external motivation (in the form of social pressure to succeed and appear perfect) over internal motivation to take care of oneself and accept one's mental condition as it is, as discussed in a study on emotional well-being by Vitrianingsih and Issalillah (2021).

Eddine et al. (2021) in their research proposed the integration of employee well-being into the performance evaluation system as part of quality human resource management, which emphasises a supportive work environment as the foundation of productivity. However, the reality in many workplaces is often contrary to this ideal principle, especially for employees with a history of mental health issues. In the workplace, stigma surrounding mental health influences recruitment policies, promotions, and even inter-employee relationships. Individuals with a history of mental disorders are often considered incapable of shouldering significant responsibilities. This assumption is reflected in limited opportunities, reluctance of superiors to place trust in them, and the creation of policies that keep them at a distance. This imbalance in treatment fosters inequality and prevents individuals from obtaining their economic and social rights. In the long term, this situation reinforces isolation and increases the risk of repeated marginalisation (Ordu, 2023). Although the government has designed legal measures to guarantee rights, their implementation faces a thick wall of stigma and discrimination in the workplace, which can actually thwart the good intentions of social protection (Wuryani et al., 2023). Therefore, creating a work environment that truly supports psychological well-being (as advocated by Darmawan, 2022) requires two things: proactively building support systems (work-life balance, organisational support) and aggressively deconstructing the destructive stigma that still lurks in organisational culture.

Adolescents and children are also vulnerable to stigmatisation in their social environment. Bullying, exclusion at school, and peer pressure often arise due to a lack of understanding about the diversity of psychological needs. Reluctant to express their feelings, many of them end up carrying the burden alone without any support. Low social sensitivity among educators and a lack of specific educational tools add to the list of challenges faced by children and adolescents with mental health issues.

Stigma does not stop at the affected individuals or groups, but also spreads to family members. Siblings or parents of individuals with mental disorders are often the targets of stereotypes in the community. As a result, the entire family is positioned as incapable or failing to educate their children, and must accept indirect exclusion. Social stigma spreads through symbolic representation mechanisms, reinforcing the polarisation between those who are considered "normal" and those who are labelled "problematic".

The formation, reinforcement, and reproduction of stigma against mental health occurs through various social mechanisms that are almost unconscious. The roles of narrative, communication, literacy, and value systems are intertwined in constructing rigid identity boundaries for individuals with specific psychological conditions. This cycle of stigma has far-reaching consequences in the social, economic, and emotional lives of communities. Without a collective paradigm shift, social stigma will continue to be a fundamental obstacle to achieving fair and humane psychosocial well-being for all segments of society.

Shifts in Values and Representations of Psychosocial Well-being

Changes in values within modern society have created a new landscape in terms of mental health. The presence of social media, the global flow of information, and access to education have made psychosocial issues more accessible to various segments of society. Discourse on mental health has now moved from private spaces to the public sphere, opening up wider opportunities for participation by individuals, groups, and communities. The scope of discourse and interaction between stakeholders has given rise to a new, more open form of understanding. Amidst these changes, society is faced with the need to redefine the meaning of psychosocial well-being in line with the ever-evolving dynamics of the

times (Zweifel, 2021). In this case, social media presents a paradox: on the one hand, it can be a risk factor that is detrimental to individual mental health, but on the other hand, it serves as a catalyst that democratizes discourse and shifts the collective understanding of mental health towards a more open and inclusive direction (Khayru & Issalillah, 2022).

The representation of mental health in the public sphere is greatly influenced by advances in science and technology. Online media has become the primary means of disseminating information, while also shaping new perceptions of mental health. Digital-based education programmes and mental health literacy campaigns are changing the way individuals interact and share personal experiences more openly. Virtual spaces allow for the exchange of various expressions, narratives, and reflections without geographical boundaries. This phenomenon provides opportunities for the growth of collective insight into mental health, encouraging society to be more empathetic and removing discriminatory social barriers (Heary et al., 2017).

On the other hand, value changes do not always occur uniformly. Diversity in cultural backgrounds, religions, and education levels also influences how quickly communities accept new ideas about mental health. Differences in value systems create varying patterns of adaptation between regions and social groups. Integrating new understandings often requires repeated adaptation, symbolic negotiation, and adjustments in perspective in order to be accepted without resistance. The shift in values is gradual, driven by encounters with global discourse and growing empirical experience.

The representation of psychosocial well-being has begun to shift from a problem-centric orientation towards recovery and empowerment. Mental health identity is no longer positioned as a burden, but rather as part of the process of growing and developing as a whole human being (Casados, 2017). Empowering individuals to manage psychological pressure has become a new focus. Community-based mentoring programmes and online discussion forums help break the collective silence that has silenced minority voices. These efforts provide a safe space where personal narratives can be accepted as a valid source of knowledge.

Educational, advocacy, and literacy efforts continue to be strengthened to encourage changes in public attitudes towards mental health. The involvement of social actors such as community leaders, educators, and psychology professionals is expected to be able to oversee the process of transforming collective representations (Dhamanik et al., 2020). Acceptance of the diversity of psychological experiences is the main foundation for building effective solidarity within the community. Campaigns in the mass media and educational institutions foster new imaginations about a future without discrimination, ensuring that every individual has equal rights to psychosocial well-being.

The transformation of values on mental health issues is also influenced by the presence of public figures who openly share their personal experiences. Open acknowledgement from community leaders, celebrities, or community activists has a positive domino effect. Their courage inspires others to accept themselves with open arms. The concept of self-acceptance has developed into a core value in the modern narrative of well-being. Society is increasingly encouraged to form responsive and sustainable social support networks, placing diversity of experience as a collective strength (Pyich, 2023).

However, resistance to value change still arises from some circles. Attachment to old traditions, concerns about social system disruption, and limited access to information are factors that hinder the renewal of perspectives. Challenges in the form of prejudice, stereotypes, and discrimination are still found in everyday life. Old perceptions of people with psychological disorders as a burden or threat sometimes still arise, despite many efforts to reform the narrative. Layered social processes require perseverance and persistence in promoting change towards shared well-being.

Yıldız et al. (2021) in their research emphasise that emotional regulation skills are critical foundations for students' mental well-being and academic success. Understanding the importance of emotional regulation and psychosocial well-being does not stop at the individual level, but has inspired a broader shift in values that is reflected in institutional policies. This shift in values is also reflected in institutional policies that increasingly accommodate the psychosocial needs of society. Educational institutions have begun to design more inclusive curricula, offering character education and emotional regulation training. Health services have developed collaborative approaches that involve families, communities, and professionals to support recovery efforts. Local and central governments are revising insurance and public service policies to ensure the affordability of psychosocial assistance. These policy updates reflect a new process of representation that emphasises social justice and equal rights to mental health.

Recognising the importance of protecting individuals with psychological needs, the community is encouraging the formation of support groups and trusted counselling spaces. Online discussion forums, peer support groups, and networks of psychological consultants have emerged in response to actual needs. Participation-based mentoring schemes allow individuals to find their identity without excessive pressure. The principles of accepting differences and valuing vulnerability form the basis of new relationships within the community. These changes reinforce the direction of social transformation towards a supportive environment (Muekendi, 2023).

Meanwhile, the younger generation acts as agents of change in spreading new values related to mental health. Digital intelligence and easy access to technology enable them to organise massive social movements. Narratives of diversity, acceptance, and appreciation of psychological experiences are major topics on social media, blogs, and public discussion forums. The exploration of the meaning of identity and psychological well-being is accepted as part of a healthy and positive search for identity. Cross-generational support is the main driver in building a strong and sustainable solidarity network.

The shift in values is also reinforced by collective experiences in facing global crises, such as pandemics, which show the importance of psychological flexibility and mental strength in maintaining life balance. Society is learning to accept uncertainty, strengthen social networks, and develop emotional resilience. The values of togetherness, mutual support, and helping one another have become the new foundation for managing psychosocial dynamics. These shared experiences add to the richness of perspectives, emphasising the importance of social networks that are responsive to psychological needs.

Ultimately, the entire dynamic of shifting values and representations builds a social identity that is far more open and responsive to the psychosocial diversity of society. New values of acceptance, respect, and empowerment become an important foundation for building a social ecosystem that is friendly to mental health. The renewal of meaning, representation, and collective experience will continue to be a source of inspiration for positive change towards a just and empathetic society.

CONCLUSIONS

The social construction of mental health in contemporary society is formed through a long and complex process, featuring interactions between stigma, old values, and the ever-evolving dynamics of psychosocial health representation. Society is undergoing a transition in perception from traditional mindsets to a more inclusive understanding, although there are still major challenges in the areas of stigma and collective bias. The transformation of values, increased literacy, and openness to discussion in the public sphere are key to creating an environment that supports mental health as a whole. A shared awareness of the importance of eliminating discrimination and building social solidarity is the main foundation for the realisation of psychosocial well-being that is just and humane.

Analysis of the social construction of mental health provides an important basis for policy change, strengthening educational programmes, and developing more progressive and sustainable community empowerment strategies. Shifts in values and new patterns of representation need to be responded to with adaptive policies, targeted community interventions, and psychosocial literacy-based assistance. All stakeholders, from educational institutions and the government to community leaders, have a central role in promoting a social ecosystem that is inclusive and friendly to every individual, regardless of their psychological background.

Systematic efforts to improve mental health literacy must continue, both through formal education and participatory public campaigns. Strengthening social networks, support communities, and providing accessible counselling services should be a cross-sector priority. The elimination of stigma should be accompanied by concrete actions, ranging from policy reform to mild interventions at the family level, in order to create a social environment that is truly supportive of the recovery and personal development of individuals with psychosocial needs.

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