

Strengthening Youth Mental Health in the Digital Age

The Congress of the Alliance of Liberals and Democrats for Europe (ALDE) Party convening in Vienna, Austria, on 3-4 of July 2026:

Notes that:

- mental health constitutes a major and measurable public health and socio-economic challenge across the European Union, affecting over one in six people – approximately 84 million citizens – according to OECD estimates. The impact is similar across Europe as a whole, with about 140 million people in the WHO European Region living with a mental health condition;
- the total economic burden of mental ill-health in the EU is estimated at over 4% of GDP annually (more than EUR 600 billion), including direct healthcare expenditure, social protection costs, and productivity losses, making it one of the largest avoidable economic burdens in Europe;
- even before the COVID-19 pandemic, mental health outcomes were deteriorating in several European countries; the pandemic significantly accelerated this trend, with some countries reporting more than a doubling of depressive symptoms among young people;
- the post-pandemic context has also intensified burnout, anxiety, and depression among health and care workers, adding systemic pressure to already strained health systems;
- almost one in two young Europeans report unmet mental health care needs, revealing a structural gap between demand and accessible services;
- stigma remains a major barrier to care, with significant variation across Europe. In several societies, social stigma continues to discourage help-seeking behaviour despite rising awareness campaigns;
- digital environments are now a central determinant of youth mental health: algorithmic content delivery, social comparison dynamics, cyberbullying, and addictive design features contribute to psychological strain, while also offering new opportunities for peer support and access to services;
- the European policy response, including the EU mental health strategy and its flagship initiatives, recognises three priorities: prevention, access to care, and mental health in crisis contexts. However, many flagship initiatives remain process-oriented rather than outcome-driven, lacking binding targets, coverage benchmarks, or enforcement mechanisms comparable to other EU health initiatives;
- structural inequalities in mental health systems persist across Europe, driven by workforce shortages, uneven service distribution, and different models of care delivery. Some EU countries illustrate both the constraints and the potential of reform: ones limited by workforce shortages despite reform efforts, others advancing system-wide access through reimbursement and decentralised care models;
- the EU mental health strategy is further constrained by institutional limits: while it can coordinate, fund, and recommend, it cannot directly determine national workforce planning, service organisation, or health spending structures;
- monitoring and accountability remain underdeveloped, with insufficient binding indicators, targets, or integration into the European Semester, despite calls from civil society actors for stronger enforceable frameworks;
- digital mental health tools are increasingly integrated into policy discussions, but evidence of effectiveness, equity of access, and regulatory consistency remains uneven across the European region.

Believes that:

- mental health is a core pillar of human dignity, equal opportunity, and economic resilience, and must

be treated with the same policy seriousness as physical health;

- a new approach is required: combining personal freedom, technological innovation, empowering children, young people, and their families to guide their digital engagement and targeted public safeguards to protect vulnerable groups without restricting open digital societies;
- youth mental health is shaped by a combination of structural social pressures, digital environment design, and unequal access to care, requiring integrated rather than fragmented policy responses;
- prevention must be prioritised, particularly through education systems, digital literacy, and early intervention in schools and communities;
- education is key to improving understanding of mental health challenges and remains one of the most effective tools for raising awareness and breaking stigma;
- digital platforms should be held accountable for design choices that systematically increase psychological harm, while preserving innovation and freedom of expression;
- access to care must be treated as a matter of equality, not geography or income;
- policy effectiveness must be judged not by the number of initiatives launched, but by measurable improvements in access, outcomes, and equity, taking into account national contexts and supported by harmonised indicators and monitoring frameworks;
- EU-level coordination should move towards stronger convergence of standards while respecting national competence in healthcare delivery.

Calls on:

- the European Commission to upgrade its mental health framework into a fully fledged EU strategy with clear measurable targets, guidelines and benchmarks, and reinforced accountability mechanisms, while respecting Member States' competence in healthcare systems;
- Council of Europe member states to significantly expand youth mental health services, particularly school-based counselling, early intervention systems, and community mental health networks;
- Council of Europe member states to combat stigma and discrimination surrounding mental health while strengthening prevention and early intervention policies, ensuring that mental health services are treated with the same urgency and accessibility standards as physical healthcare;
- the EU to establish clear outcome indicators on mental health access, waiting times, workforce ratios, and youth prevalence rates, integrated into the European Semester;
- strengthening enforcement of digital regulation to mitigate algorithmic risks to minors, including addictive design patterns, harmful recommendation systems, and inadequate content moderation;
- national governments to introduce an enforceable minimum age for access to social media or to specific features of social media that pose the greatest risks to the psychosocial health of minors;
- the development of EU-wide standards for digital mental health tools, ensuring clinical validity, data protection, transparency, and equitable access;
- the development of innovation-friendly regulatory pathways for digital mental health tools, including fast-track assessment procedures for evidence-based apps and telehealth services, to ensure that promising innovations reach young people without unnecessary bureaucratic delay;
- increased investment in mental health workforce development, including incentives for training psychiatrists, psychologists, and mental health nurses, and addressing regional disparities across EU member states and the wider WHO European region;
- systematic scaling of best practices from Council of Europe member states;

- addressing psychosocial risk factors in the workplace through a review of existing EU frameworks and evidence-based national measures, tackling burnout and work-related stress as structural determinants of mental health;
- a renewed European commitment to ensuring that digital transformation strengthens, rather than undermines, youth mental health, social cohesion, and equal access to care across all EU member states and the wider WHO European region;
- national governments to recognise and use the potential of digital technologies to improve access to mental health services, facilitate early intervention, and strengthen peer support.