



2024 Polyfest Mental Health and Wellbeing Survey

Youth insights report



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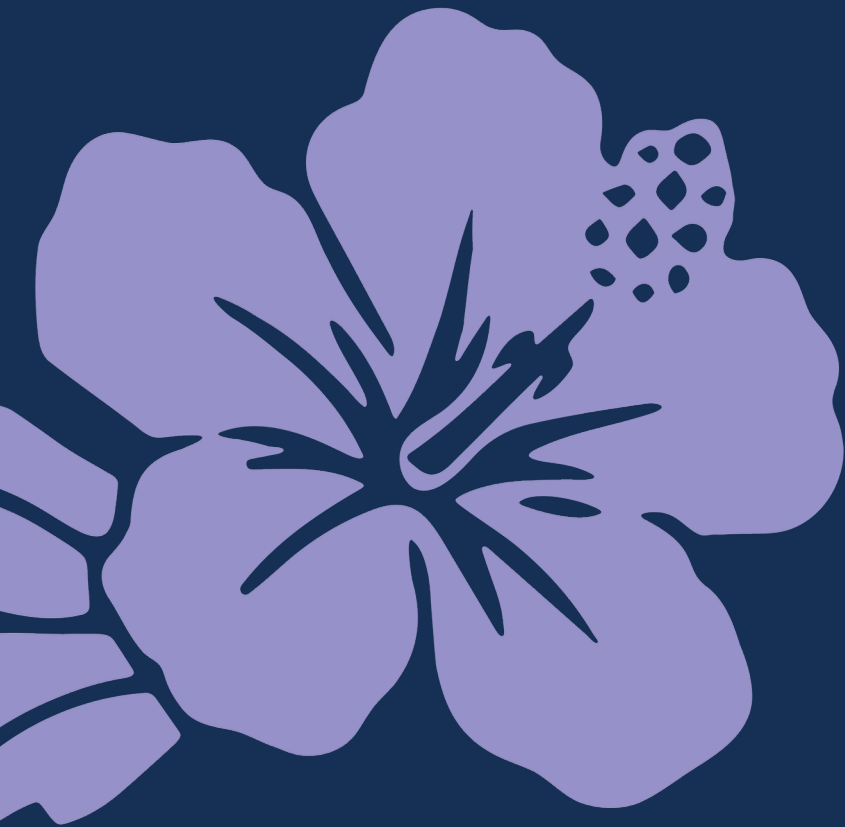


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Executive summary

Le Va, a Pasifika-led organisation dedicated to mental health and wellbeing, conducted a survey at Polyfest 2024 to gain insights into the mental health needs and support preferences of New Zealand youth aged 16-24 years. The survey aimed to explore key factors affecting youth mental health, identify preferred coping strategies and determine youth-preferred support platforms. Responses from 1,150 participants highlighted critical mental health and social needs among Pasifika, Māori and other diverse youth populations.

SURVEY METHODOLOGY

The self-administered survey, conducted at ASB Polyfest in March 2024, included 26 items covering a range of mental health factors, support preferences and demographics. Survey responses were gathered electronically, via iPads and personal devices, with data analysed to identify trends and statistically significant differences across demographic groups and correlations. Randomisation of response options for survey items aimed to minimise response bias and survey fatigue.

KEY FINDINGS

Cultural and spiritual influences on wellbeing

- **Role of culture and identity**

For most youth, cultural values and identity were foundational to their mental health and coping strategies, with 86.55% of respondents affirming the importance of cultural values. Ethnic group values were also important to Pasifika respondents, and were strongly correlated with having trusted friends, feeling accepted, experiencing a sense of belonging and feeling safe in the community. Cultural engagement was a significant factor in youth mental health.

- **Spirituality and religion**

Overall, 68.43% of respondents and 74.86% of Pasifika respondents identified with a religion, predominantly Christianity, and 66.52% viewed their religious beliefs as important. Spiritual practices, including prayer, bible reading and church attendance, were commonly reported as positive influences on mental health.

- **Ethnic differences in spiritual engagement**

The survey found variations in religious importance across ethnicities. For example, Fijian, Samoan and Tongan youth placed greater significance on their religion or spirituality compared to Cook Islands and Niuean youth, who reported lower levels of religious importance.

- **Spiritual communities as support systems**

Church groups and spiritual communities played a critical support role, particularly for religiously inclined youth. These communities were often preferred over other

mental health resources, illustrating the value of culturally resonant and community grounded support systems.

Experiences of prejudice and discrimination

- **Ethnic and gender-based prejudice and discrimination**

59.78% of respondents reported facing ethnic-based discrimination, with Cook Islands youth more likely to experience frequent unfair treatment. Gender or sexual identity discrimination was reported by 39.5% of respondents.

Mental health and wellbeing

- **Self-reported mental health**

Most participants rated their mental health positively, with 64.7% reporting "good" or "excellent" mental health. There were differences across gender and ethnic groups, with Pasifika males and Fijian youth reporting higher positive ratings than females and Cook Islands youth.

- **Hope for the future**

The majority (81.25%) expressed hope for the future, with females more likely than males to report strong optimism.

- **Factors impacting mental health**

School responsibilities, sleep quality and social media were the most commonly reported stressors. Females more frequently cited family pressures, social isolation and cultural expectations as factors negatively impacting their mental health.

Unmet needs and accessibility of services

- **Financial hardship and basic needs**

More than half (51.97%) reported financial concerns regarding access to basic essentials in their family. Financial hardship was moderately negatively correlated with ethnic group values, sense of belonging, sense of safety in the community, online and at work, feeling accepted and having trusted friends.

- **Engagement with support services**

While 46.17% had not engaged with any youth organisations, awareness of services like Le Va and Youthline indicated a need for increased outreach through popular digital platforms to enhance accessibility.

Sense of belonging and safety

- **Community connection**

Youth reported a strong sense of belonging (78.23%) within their communities, with high perceived safety at home and school. However, online spaces were less frequently seen as safe, highlighting a need for improved digital safety and protections. Sense of belonging was very strongly associated with feeling accepted and a sense of safety in the community, and moderately associated with ethnic group values, having trusted friends, feeling hopeful for the future, self-reported overall mental health and feeling safe at school, work, online and home.

- **Impact of family relationships**

Family relationships are both a source of support and a potential stressor, emphasising the importance of nurturing positive family dynamics in mental health interventions.

Preferences for support information and communication platforms

- **Information needs**

Youth expressed interest in resources on study skills, stress management and cultural identity reinforcement. Females were more likely to request resources on emotional resilience.

- **Preferred platforms**

Social media, especially Instagram and TikTok, was identified as the preferred medium for mental health content, alongside face-to-face workshops and personal stories from other youth. Church and youth groups were seen as effective support systems, especially among religiously inclined youth.

Mental health and wellbeing supports

- **Top things that have a positive impact on mental health of youth**

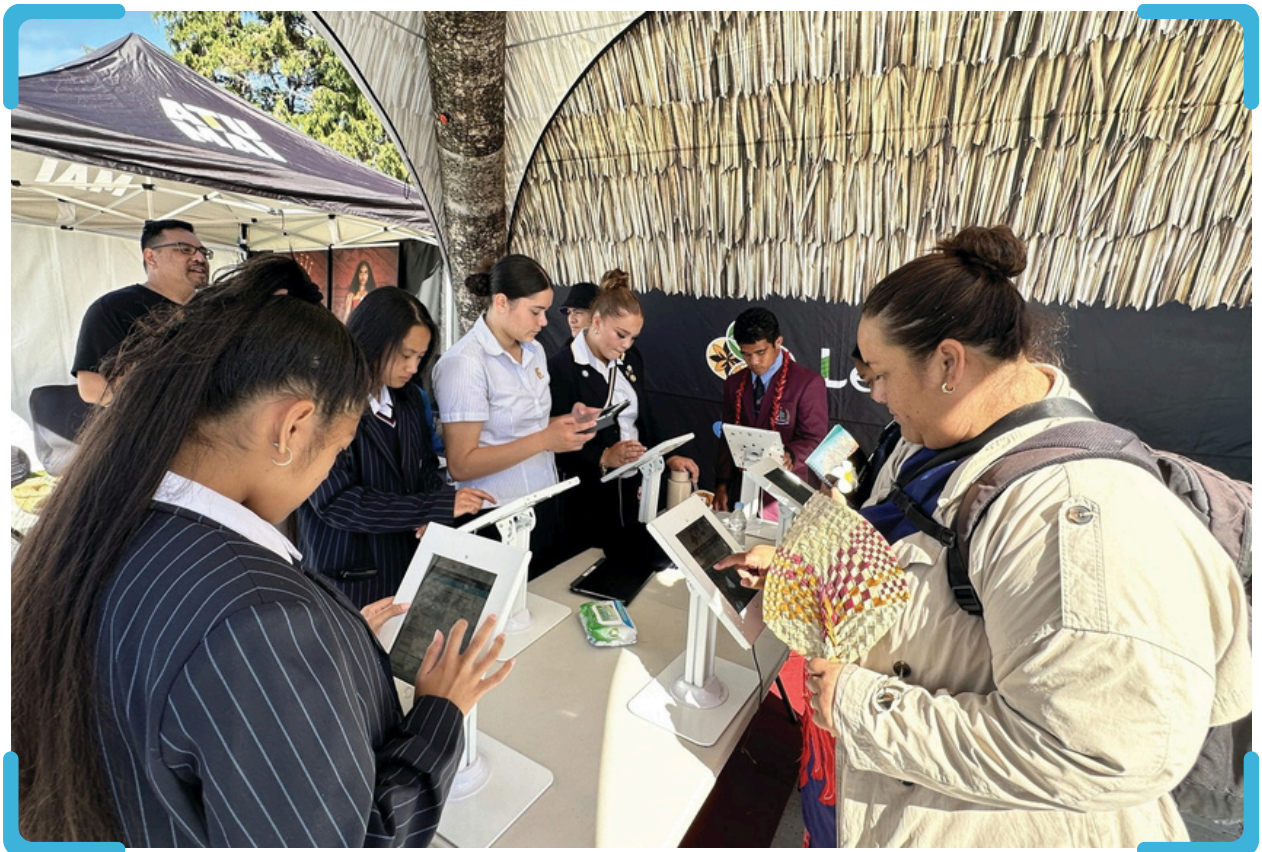
Music, family connections and religious or spiritual practices were reported as the primary ways youth cope with stress, especially among females. Physical activity, cultural engagement and outdoor activities were also important.

- **Support networks**

Friends and family were the main sources of support, though males were less likely than females to confide in friends. Trust in friends was high (89.39%), which was very strongly correlated with feeling accepted, and strongly correlated with ethnic group values, sense of belonging, sense of safety and sense of hope for the future.

CONCLUSIONS

The survey underscores the importance of culturally safe and gender-responsive mental health support for New Zealand's diverse youth. It reveals a need for support tailored to male youth, who report more barriers to accessing mental health resources. To effectively reach youth, organisations should prioritise digital outreach via social media and ensure design and delivery of culturally resonant activities. For Le Va, enhancing visibility on preferred platforms and expanding face-to-face community presence will strengthen youth engagement and provide critical support to those experiencing discrimination or stress.



Le Va is Aotearoa's Pasifika primary prevention organisation, dedicated to supporting people of the moana to unleash their full potential. We provide clinically safe, evidence informed and co-designed resources, tools, information, training, workshops and support services aimed at improving mental health and wellbeing. Le Va embraces a holistic approach to wellbeing, integrating physical, mental, emotional, spiritual, relational and cultural dimensions.

Supporting youth is an integral part of the work undertaken at Le Va. To ensure the best possible health and wellbeing outcomes for young people, it is essential to have accurate and up-to-date information about their needs and preferred solutions. Le Va has initiated an annual survey with the primary purpose of informing the work carried out to support the community. Le Va is also aware that supporting youth is a collective effort requiring the contribution of many individuals and organisations who may find this information valuable. Le Va would therefore like to share this summary of the key findings to support others in this field.

The goals of the survey included:

- exploring the mental health and wellbeing of youth
- identifying factors that impact mental health and wellbeing
- determining the strategies and services that youth find useful.

The survey was conducted at Polyfest 2024, with the majority of respondents being from Tāmaki Makaurau Auckland. Due to the nature of the environment, the survey was open to all individuals over the age of 16; however, the results included in this report pertain only to those aged 16-24 years. Within this priority group, a total of 1,150 completed surveys were included in the analysis and reporting.

The survey was open to all individuals aged 16 and older in Aotearoa New Zealand who attended ASB Polyfest.

It was conducted from 20 to 23 March, 2024 at the Sports Bowl in Manukau during Polyfest.



SURVEY DESIGN

The self-administered survey was designed to capture a range of quantitative data regarding the mental health and wellbeing of youth and preferences for support. Questions were a combination of already existing youth wellbeing measures and bespoke Le Va items. The survey instrument was developed with research, clinical and cultural expertise and was reviewed by Le Va's Youth Advisory Group. It included a total of 26 closed response items, using a combination of likert-scale and multiple-choice response formats.

SAMPLING METHOD

A convenience sample included available and willing attendees at ASB Polyfest 2024. The survey was advertised via social media and onsite at the Le Va tent at ASB Polyfest. All those over 16 years of age were eligible to complete the survey, however, only responses from those aged 16-24 are included in the current report. The decision to include only responses from people aged 16-24 is a deliberate action to amplify the voices of those most at risk of suicide, and inform early engagement with youth.

DATA COLLECTION

Data was collected electronically using iPads (provided) or personal devices (belonging to respondents) over a four-day period during Polyfest 2024. Trained staff were available to assist participants in completing the survey if required. The survey was hosted by SurveyMonkey. Response options for survey items were randomised to help reduce response biases and improve the validity and reliability of the survey data by minimising the impacts of order effects, response patterns, survey fatigue and attention decline.

DATA ANALYSIS

The responses were analysed using statistical software to identify key trends and insights. We described the data using descriptive statistics and undertook significance testing across gender and ethnicity groups to determine differences in experiences, perspectives and needs across these groups. We considered a p-value of 0.05 or lower was a statistically significant difference. A p value is a number, calculated from the statistical test, that determines the likelihood that an observed outcome is the result of chance or not. We also undertook a Spearman rank correlation, to examine the relationship between two variables, including the strength and direction of any association. We considered a correlation co-efficient of less than 0.10 to be a very weak association between variables, between 0.10 and 0.29 to be weak, between 0.3 to 0.49 a moderate association, between 0.5 to 0.69 a strong association, and over 0.7 very strong.



Survey findings

Key findings from survey responses are presented across three subsections including: (i) demographic profile of respondents (ii) mental health and wellbeing of youth, and (iii) support seeking behaviours.

The report concludes with a summary of key messages.



DEMOGRAPHIC PROFILE OF RESPONDENTS

A total of 1,528 individuals provided survey responses, of which 82.5% (n=1,150) were youth between 16 and 24 years of age, who are the primary focus of this report. The survey achieved a 96% completion rate and took an average of five minutes and 49 seconds to complete. This analysis and report excludes incomplete survey responses.



1,150
youth

Ethnicity

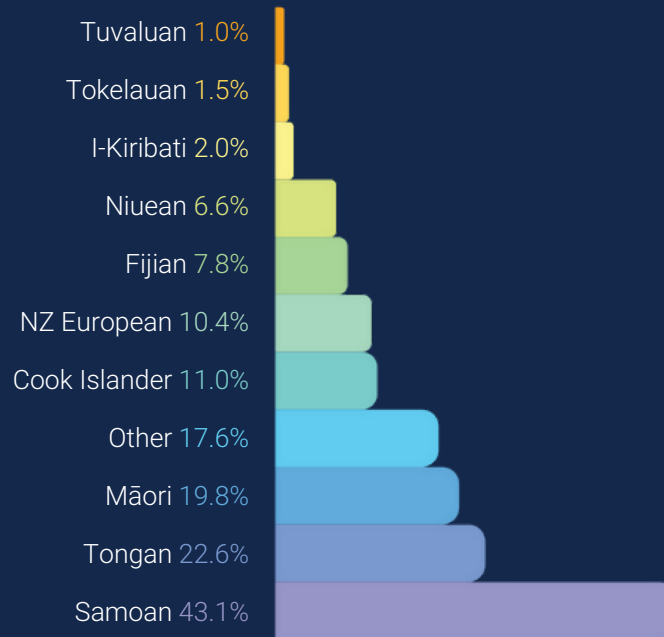


Figure 1: Ethnicity of survey respondents

The majority of survey respondents identified as Samoan (43.13%, 496), Tongan (22.61%, 260) or Māori (19.83%, 228). This was followed by the 'other' category (17.57%, 202) which includes individuals of Indian, Chinese or European descent, and 15 Pacific respondents representing various Pacific nations such as Hawaii, Tahiti, Rotuma and Papua New Guinea. Additionally, respondents identified as Cook Islander (11.04%, 127), New Zealand European (10.35%, 119), Fijian (7.83%, 90), Niuean (6.61%, 76), I-Kiribati (2.00%, 23), Tokelauan (1.48%, 17) and Tuvaluan (0.96%, 11) (Figure 1).

Responses add up to over 100 percent as individuals could select multiple ethnicities. This ensures participants could identify with more than one ethnic group and are represented in the analysis with this full ethnic identity, as reported by them. Pasifika respondents reported greater importance of their ethnic group values in comparison to non-Pasifika respondents ($p < 0.001$).

Gender & sexuality

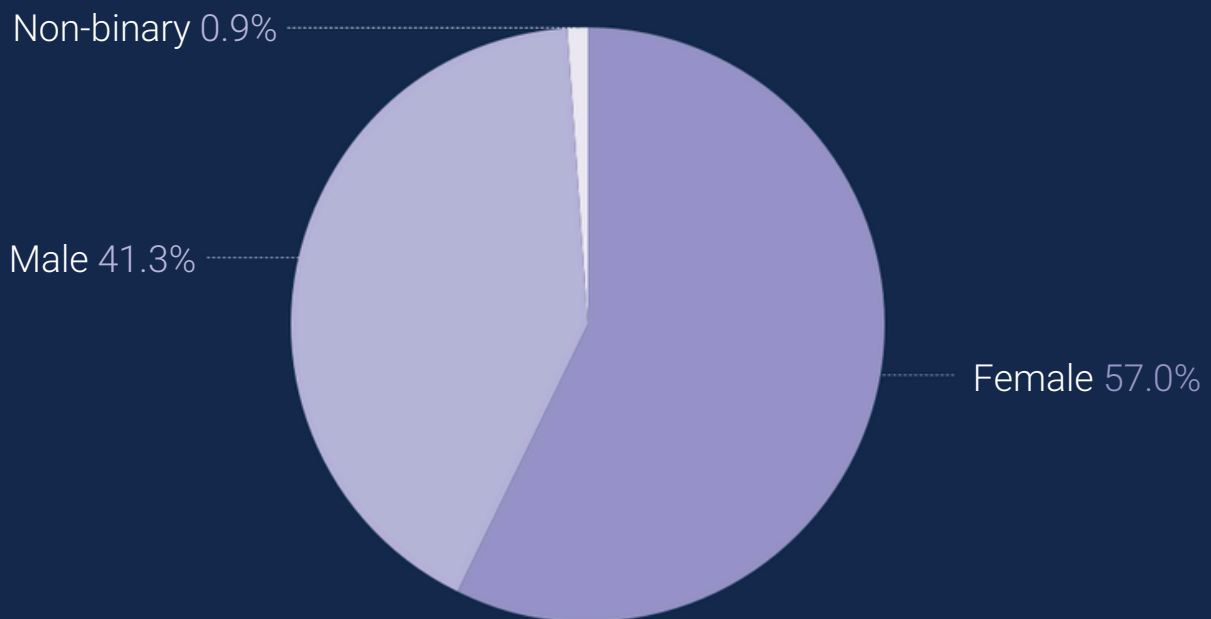


Figure 2: Gender identity of survey respondents

Among respondents, 41.30% (475) identified as male, 56.96% (655) as female and 0.87% (10) as non-binary (Figure 2). Ten respondents (0.87%) opted to define their gender themselves and submitted already existing options such as male, female or single letters.

89.39% of respondents (1,028) identified as straight/heterosexual, while 10.79% (124) identified as Rainbow/MVPFAFF+ and 4.17% (48) preferred not to answer.

Relationship status

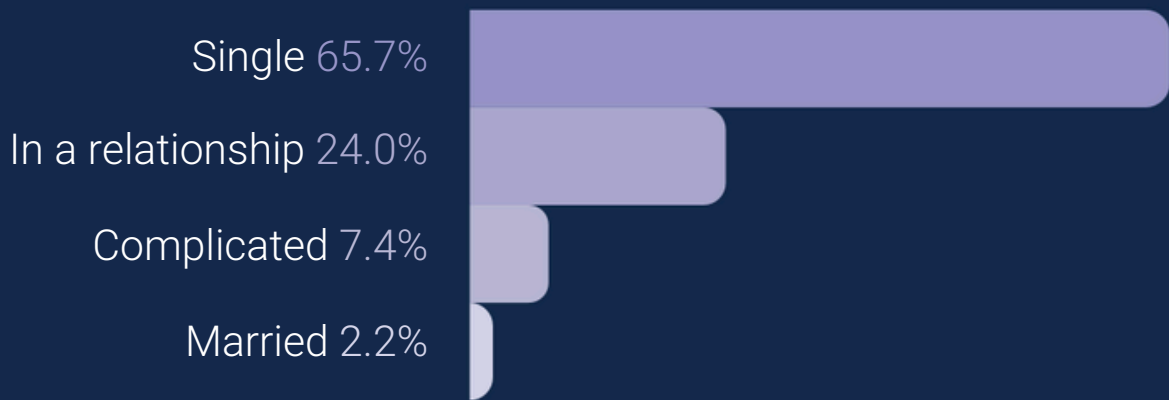
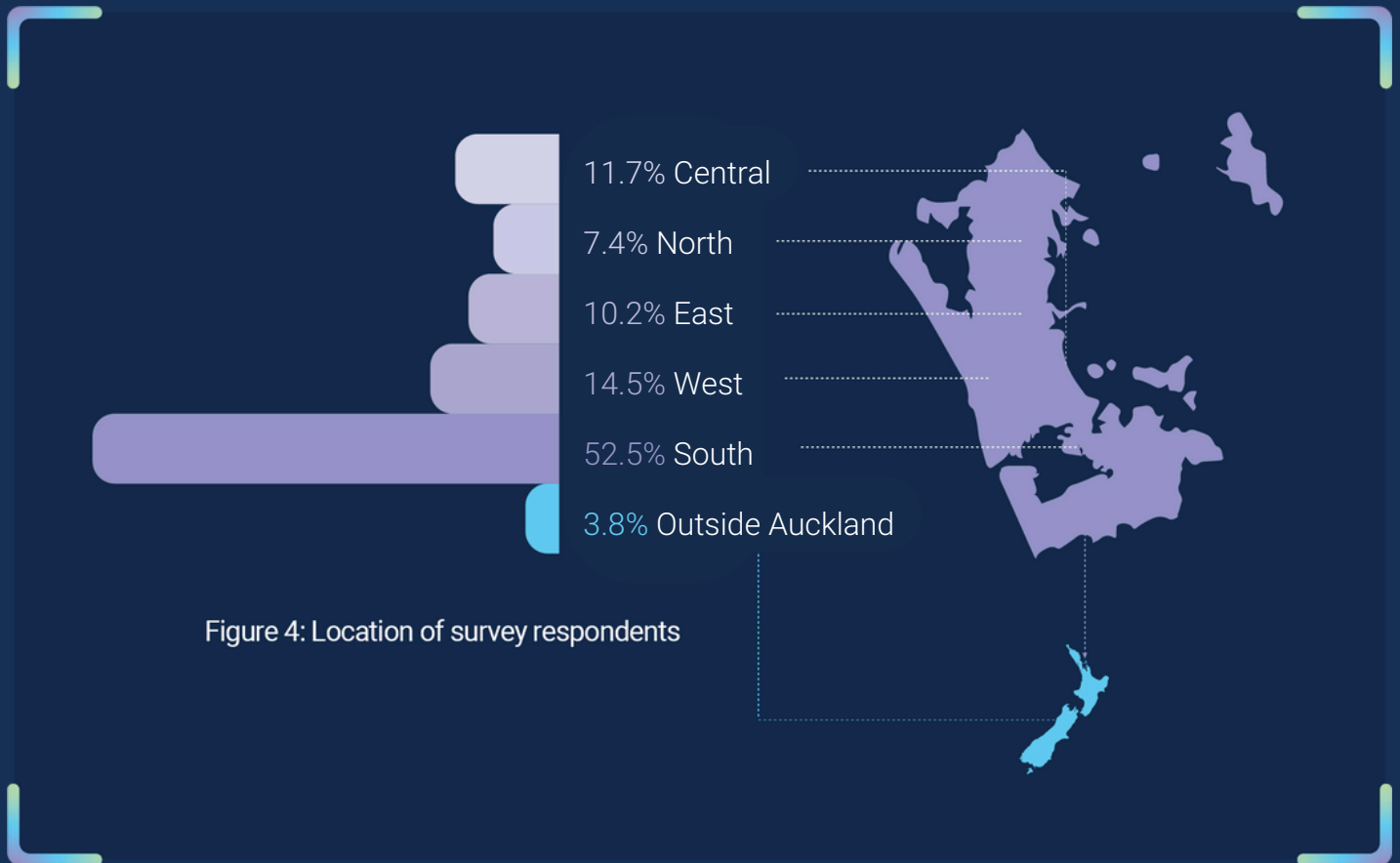


Figure 3: Relationship status of survey respondents

65.65% of respondents (755) reported being single, while 24% (276) indicated they were in a relationship and a further 2.17% (25) were married. 7.39% (85) reported their relationship status as complicated (Figure 3).

Location



96.25% of respondents (1,107) live in Auckland, with 52.52%, 604 residing in South Auckland. Other areas of primary residence included West Auckland (14.52%, 167), Central Auckland (11.65%,134), East Auckland (10.17%,117), and North Auckland (7.39%, 85). Only 3.75% of respondents (43) live outside of Auckland (Figure 4).

Religion & spirituality

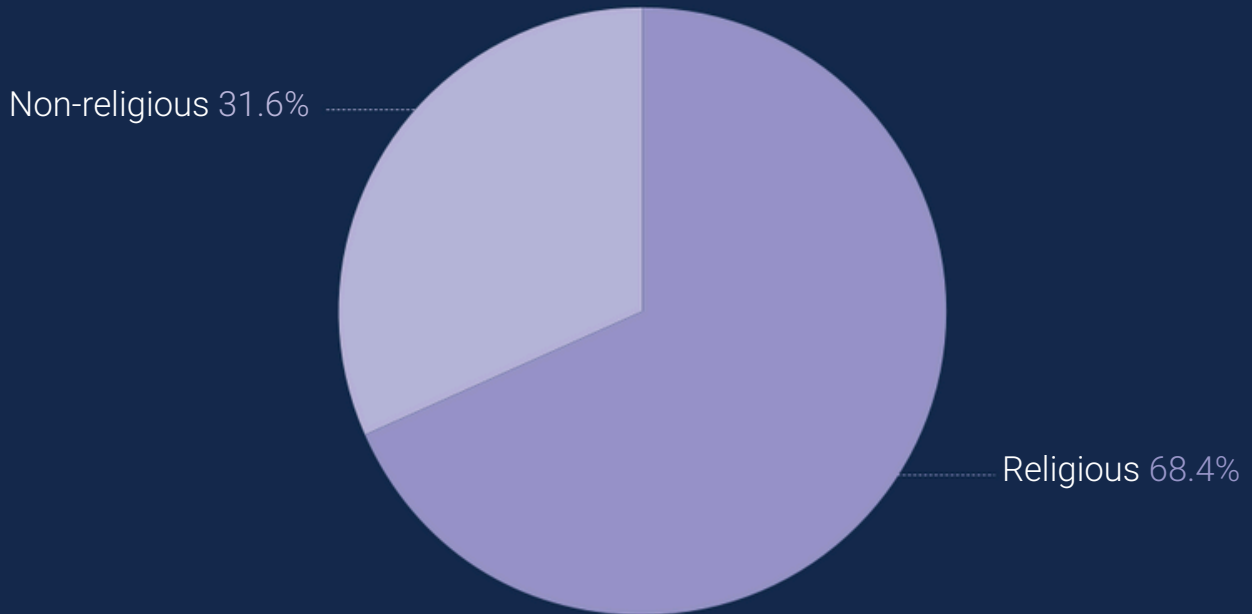


Figure 5: Religious vs. non-religious identification among respondents

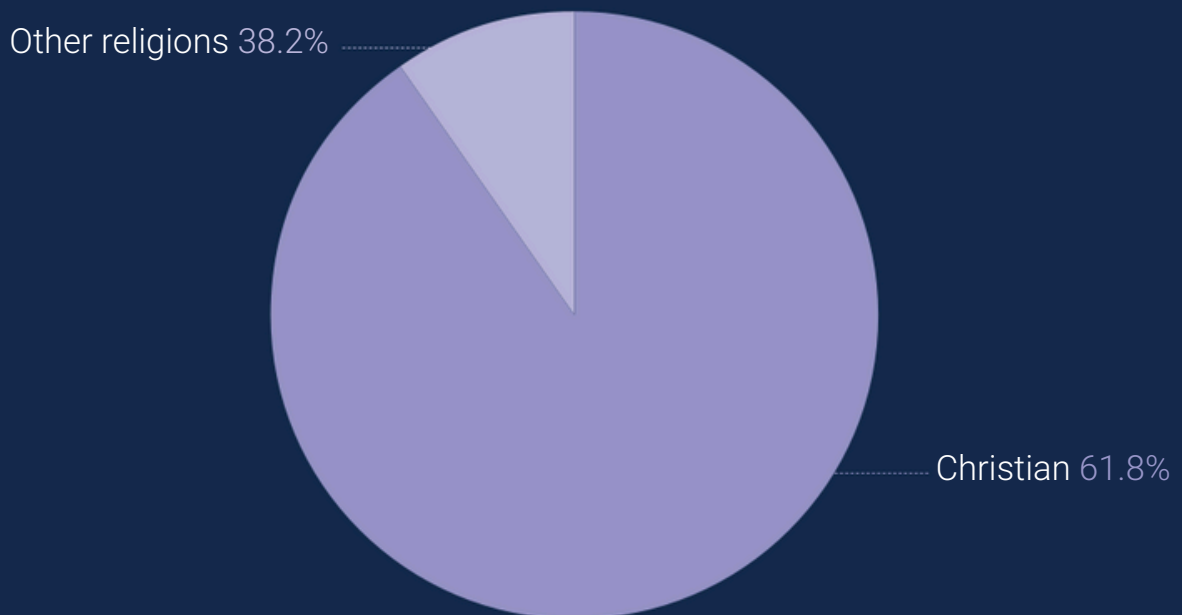


Figure 6: Christian vs. other religions among religiously affiliated respondents

Religion & spirituality

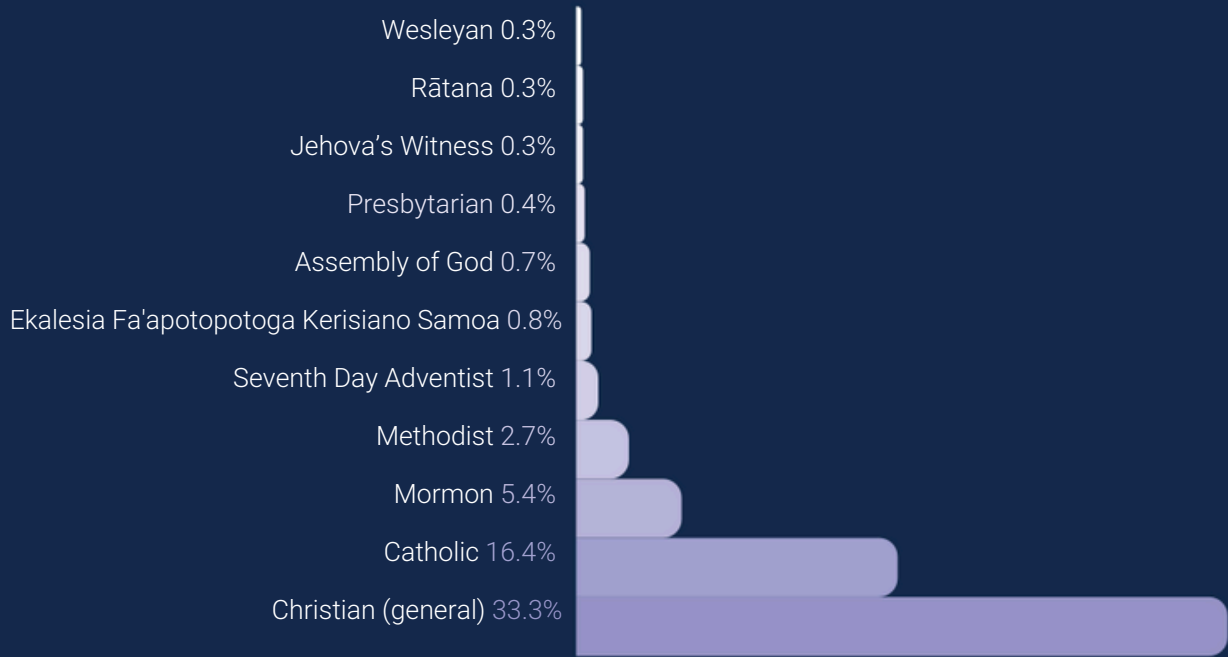


Figure 7: Breakdown of Christian identification by general and denominational affiliations

Among the respondents, 68.43% (787 individuals) identified with a religion (Figure 5). Of these, 711 participants fall under the Christian umbrella (Figure 6). Specifically, there are 383 who identified as Christian, 189 as Catholic, 62 as Mormon, 31 as Methodist, 13 Seventh Day Adventist, 9 as Ekalesia Fa'apotopotoga Kerisiano Samoa, 8 as Assembly of God, 5 as Presbyterian, 4 as Jehova's Witness, 4 as Rātana and 3 as Wesleyan (Figure 7). Other religious affiliations included Hinduism (20), Islam (11), Buddhism (8), Sikh (4) and Bahá'í (3).

42.17% (485) of participants saw their spirituality/religion as very important or important (24.35%, 280), while 24.09% (277) held a neutral stance and 2.26% (26) saw it as unimportant or very unimportant (7.13%, 82). Among Pasifika respondents, 74.86% identified with a religion. There were significant differences across ethnic groups in how important respondents perceived their spirituality and/or religion:

- Cook Islands (26.77%) and Niuean (26.32%) respondents

were less likely to report their religion/spirituality as very important in comparison to Fijian (51.11%), Samoan (54.44%) and Tongan (54.62%) respondents.

- Cook Islands (3.15%) and Niuean respondents (2.63%) were also more likely to report their religion or spirituality as being unimportant in comparison to Samoans (0.20%).

MENTAL HEALTH AND WELLBEING OF YOUTH

Self-reported overall mental health



Figure 8: Self-reported overall mental health of survey respondents

Overall, 64.7% of participants rated their mental health positively, as either excellent (23.83%) or good (40.87%). A further 30.43% rated their mental health as average/okay and 4.87% rated theirs negatively (poor (3.83%) or very poor (1.04%)) (Figure 8). There were differences in self-reported mental health across respondent groups, as follows:

- Pasifika males tended to rate their mental health more positively than the females. Specifically, 71.16% of Pasifika males rated theirs positively (excellent or good) and 26.32% as average/okay. In contrast, 60.31% of females rated theirs positively and 33.74% rated theirs as average/okay.
- Significant differences were seen in ratings of poor, average/okay and excellent with males rating their mental health as excellent (28.00%) more often than females (20.92%), and females rating their mental health as poor (4.89%) more often than males (1.68%).
- Cook Islands (18.11%) and Niuean (13.16%) respondents had a lower percentage of participants who rated their mental health as excellent in comparison to Samoan (26.81%), Tongan (27.31%) and Fijian (28.89%) respondents.

Self-reported overall mental health was moderately correlated with having trusted friends ($r_s(1,150) = 0.43, p < 0.001$), feeling accepted ($r_s(1,150) = 0.5, p < 0.001$), ethnic group values ($r_s(1,150) = 0.4, p < 0.001$), sense of belonging ($r_s(1,150) = 0.49, p < 0.01$), sense of safety ($r_s(1,150) = 0.48$ (community), 0.47 (online), 0.44 (school), 0.49 (work), 0.49 (home)) and feeling hopeful about the future ($r_s(1,150) = 0.49, p < 0.001$). These results underscore the importance of cultural identity, social connections and security in fostering good mental health.

Feelings of hope for the future

Reponse to: 'I am hopeful for the future'

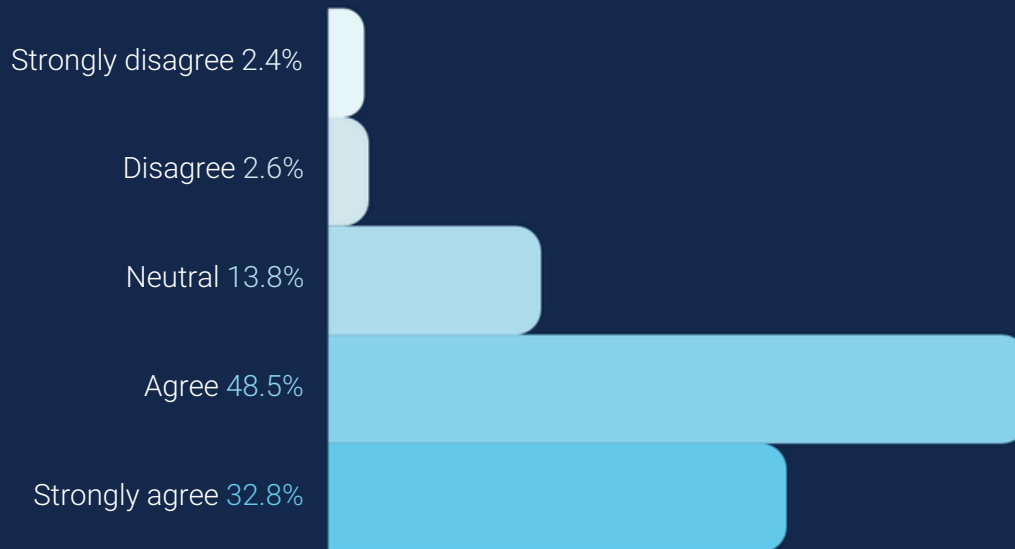


Figure 9: Feelings of hope for the future among survey respondents

Most survey respondents (81.25%) reported feeling hopeful for the future (agree or strongly agree), while 13.78% were unsure (neither agree or disagree) and 4.97% were not (2.62% disagree, 2.35% strongly disagree) (Figure 9).

Feelings of hope for the future differed across gender and ethnic groups:

- Females (36.20%) were significantly more likely to strongly agree that they were hopeful compared to males (28.42%).
- Fijian (37.08%), Samoan (36.16%) and Tongan (35.38%) respondents most frequently selected "strongly agree," compared to Niuean (18.42%) and Cook Islands (23.81%) respondents. This difference was statistically significant.

Having trusted friends ($r_s(1,150) = 0.51, p < 0.001$), feeling accepted ($r_s(1,150) = 0.53, p < 0.01$), ethnic values ($r_s(1,150) = 0.54, p < 0.001$), sense of belonging ($r_s(1,150) = 0.55, p < 0.01$) and sense of safety at home ($r_s(1,150) = 0.52, p < 0.01$) were strongly associated with greater hope for the future. Further, there was a moderate relationship between feelings of hope for the future and self-reported overall mental health ($r_s(1,150) = 0.49, p < 0.01$) and sense of safety online, at school and work ($r_s(1,150) = 0.46$ (online), 0.45 (school), 0.43 (work), $p < 0.001$). These results highlight the importance of cultural identity, social connections and security in fostering hope.

Self-reported understandings of 'good mental health'

Response to: 'I know what good mental health means'

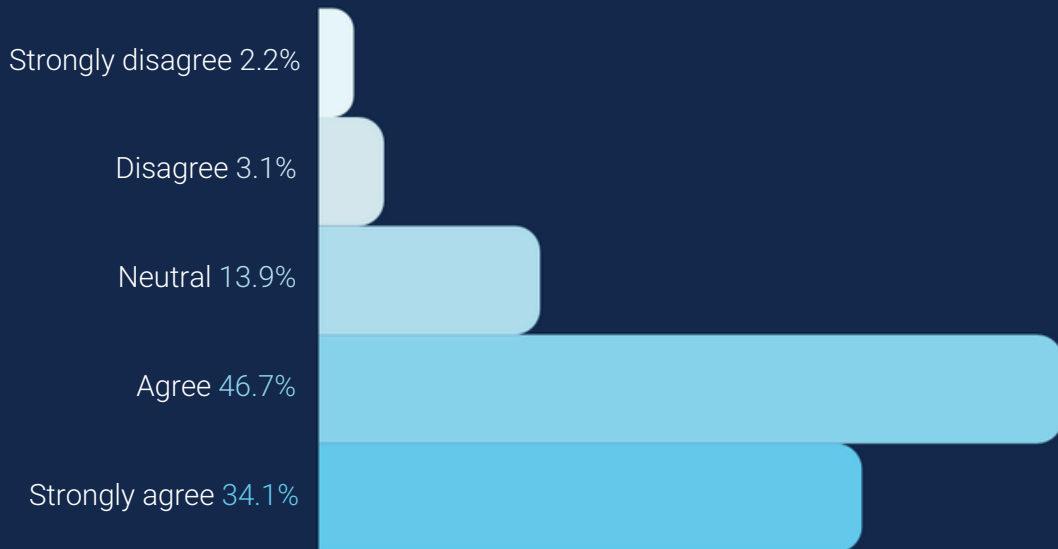


Figure 10: Understanding of good mental health among survey respondents

When asked whether they know what good mental health means, 80.81% strongly agreed (34.07%) or agreed (46.74%) that they know what this means. 13.91% neither agreed nor disagreed, 3.08% disagreed and 2.20% strongly disagreed with the statement 'I know what good mental health means' (Figure 10). Responses differed across gender and ethnic groups:

- Female participants self-reported having a better understanding of good mental health in comparison to males. This difference was statistically significant for the strongly agree response option, with females (36.30%) strongly agreeing more than males (28.42%).
- Cook Islands respondents had significantly lower agreement (23.39% strongly disagree) that they know what good mental health means, in comparison to Samoan (37.14%) and Tongan (35.97%) respondents.

Factors negatively impacting on mental health and wellbeing of youth

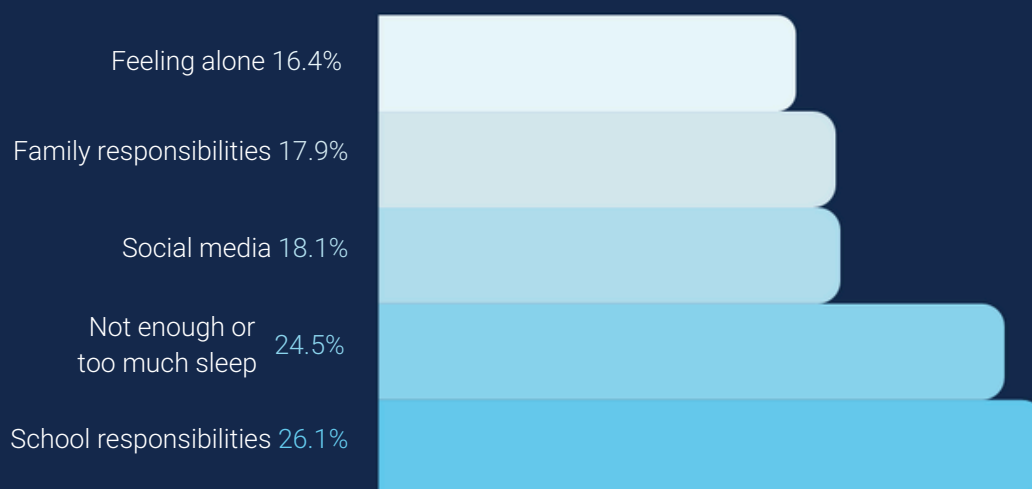


Figure 11: Top five factors negatively impacting the mental health and wellbeing of survey respondents

Respondents identified a number of factors that may negatively impact on their mental health and wellbeing. School responsibilities were most frequently reported as having a negative impact on the mental health of youth participants, with 26.1% of respondents reporting school responsibilities were making their mental health worse right now (Figure 11). There were significant differences in school responsibilities being reported as having a negative impact on mental health and wellbeing among:

- Females (31.76%) in comparison to males (17.89%).
- Samoans (25.20%) in comparison to people who identify as Cook Islands (15.75%).

There were significant negative correlations between financial hardship and several key social and emotional factors impacting on the mental health and wellbeing of youth. Specifically, financial hardship was moderately negatively correlated with sense of belonging ($r_s = -0.42$), indicating that individuals experiencing greater financial stress tended to report lower levels of belonging. Similarly, a moderate negative correlation was found between financial hardship and ethnic group values ($r_s = -0.44$), feeling accepted ($r_s = -0.36$), and having trusted friends ($r_s = -0.35$), all of which indicate that greater financial hardship is linked to social and emotional risk factors, such as feeling less accepted and having fewer trusted social connections. Furthermore, financial hardship was also negatively correlated with feeling safe online ($r_s = -0.35$) and at work ($r_s = -0.33$). All correlations were statistically significant ($p < 0.001$), suggesting a robust relationship between financial hardship and these social and emotional factors. Pasifika respondents were more concerned about having enough money to buy basic essentials compared to non-Pasifika respondents ($p < 0.0001$), highlighting the inequitable impacts of financial hardship within Pasifika communities.

Factors negatively impacting on mental health and wellbeing of youth

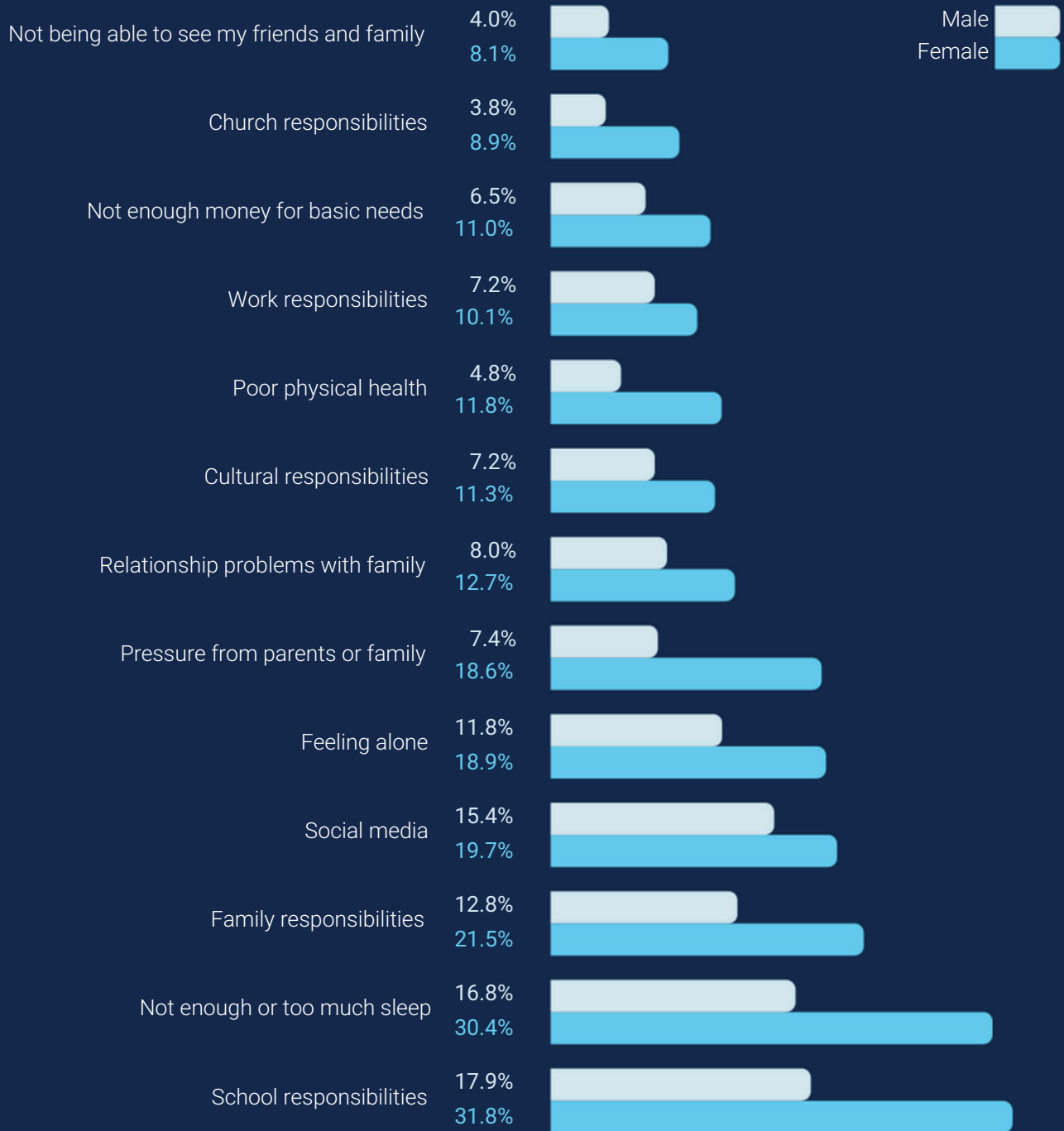


Figure 12: Comparison of factors negatively impacting mental health and wellbeing of male vs. female survey respondents

Other factors that were reported as having a negative impact on their mental health included:

- having not enough or too much sleep (24.52%)
- social media (18.09%)
- family responsibilities (17.91%)
- feeling alone (16.35%)
- pressure from parents/family (14.09%).

Several factors negatively impacting the mental health and wellbeing of Pasifika youth were reported by a significantly higher proportion of females compared to males (see Figure 12).

- School responsibilities (earlier highlighted).
- Not enough or too much sleep (30.38% for females, compared to 16.84% for males).
- Family responsibilities (21.53% for females, compared to 12.84% for males).
- Social media (19.69% for females, compared to 15.37% for males).
- Feeling alone (18.93% for females, compared to 11.79% for males).
- Pressure from parents or family (18.63% for females, compared to 7.37% for males).
- Relationship problems with family (12.67% for females, compared to 8.0% for males).
- Cultural responsibilities (11.30% for females, compared to 7.16% for males).
- Poor physical health (11.76% for females, compared to 4.84% for males).
- Work responsibilities (10.08% for females, compared to 7.16% for males).
- Not enough money for basic needs (10.99% for females, compared to 6.53% for males).
- Church responsibilities (8.85% for females, 3.79% for males).
- Not being able to see my friends and family (8.09% for females, 4.0% for males).

Some youth (19.13%) reported that none of the factors are having a negative impact on their mental health, and the following factors were less often reported as having an impact on their current mental health:

- Poor housing/living conditions (3.91%).
- Physical harm (3.57%).
- Family member with a disability (2.61%).
- Poor physical health of a family member (2.43%).

Some responses given by those who selected 'other' were skin problems, lack of motivation, pressure of being successful, sports, grief and work.

Prejudice and discrimination

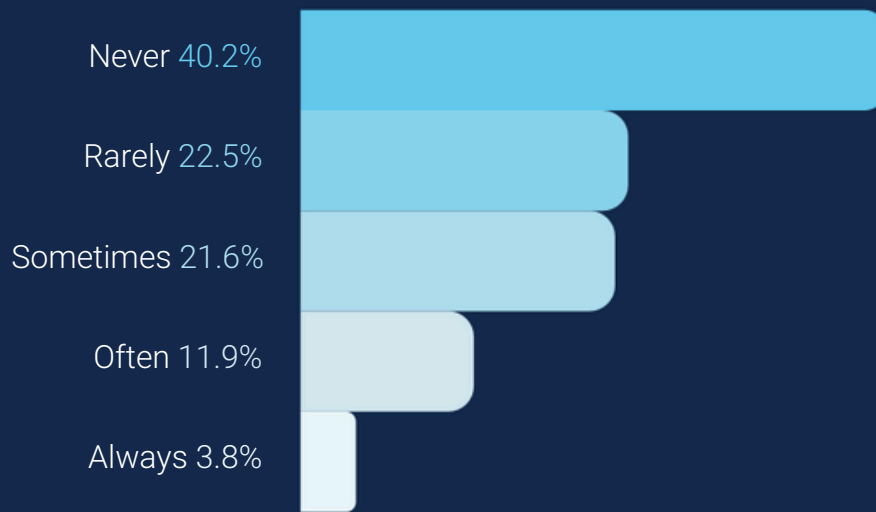


Figure 13: Frequency of unfair treatment due to ethnicity in the last 12 months

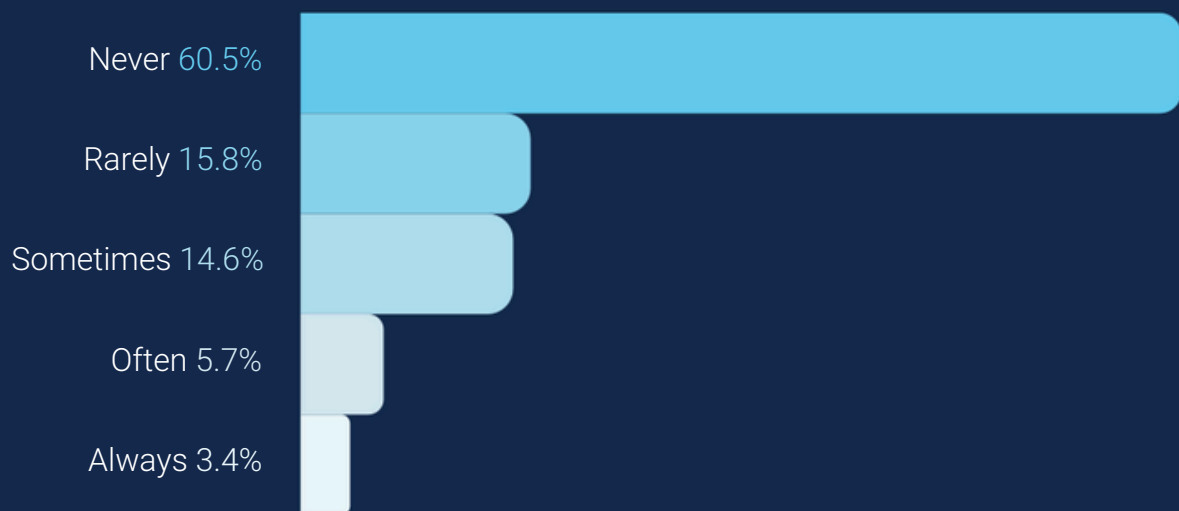


Figure 14: Frequency of gender-based unfair treatment in the last 12 months

A significant portion of youth reported being treated unfairly or being made to feel 'different' due to their ethnicity (59.78%) (Figure 13), or gender/sexual identity (39.5%) in the past 12 months (Figure 14). For those who reported being treated unfairly or made to feel different due to their ethnicity, responses varied, with respondents reporting they rarely (22.53%), sometimes (21.63%), often (11.85%) or always (3.77%) experienced unfair treatment. Responses differed across ethnic groups:

- Cook Islands respondents (21.67%) were significantly more likely to report that they often experienced unfair treatment due to their ethnicity, in comparison to Fijians (9.09%), Niueans (9.59%), Samoans (11.55%) and Tongans (12.10%).
- Conversely, Niueans, Samoans and Tongans were significantly more likely to report that they never experienced unfair treatment (47.95%, 41.37%, 42.74% respectively) in comparison to Cook Islands respondents (30.83%).

Regarding gender and/or sexual identity, overall 60.49% never felt unfairly treated, while 39.5% did feel unfairly treated due to gender and/or sexual identity in the past 12 months - 15.80% rarely, 14.57% sometimes, 5.71% often and 3.42% always. There were no significant differences between males and females. Responses from Rainbow communities suggest that experiences of being treated unfairly were common for this group. However, the sample size for this community is not sufficient to undertake statistical testing.

Correlation testing indicated no or weak relationships between experiences of discrimination and other variables including having trusted friends, feeling accepted, ethnic group values, sense of belonging, sense of safety, feelings of hope for the future and self-reported mental health. While Pasifika reported feeling safer at home in comparison to non-Pasifika respondents ($p=0.0269$), there were weak or negligible correlations between experiences of prejudice and discrimination and feeling safe in the community, online, at school, work and home.

Factors positively impacting on mental health and wellbeing of youth

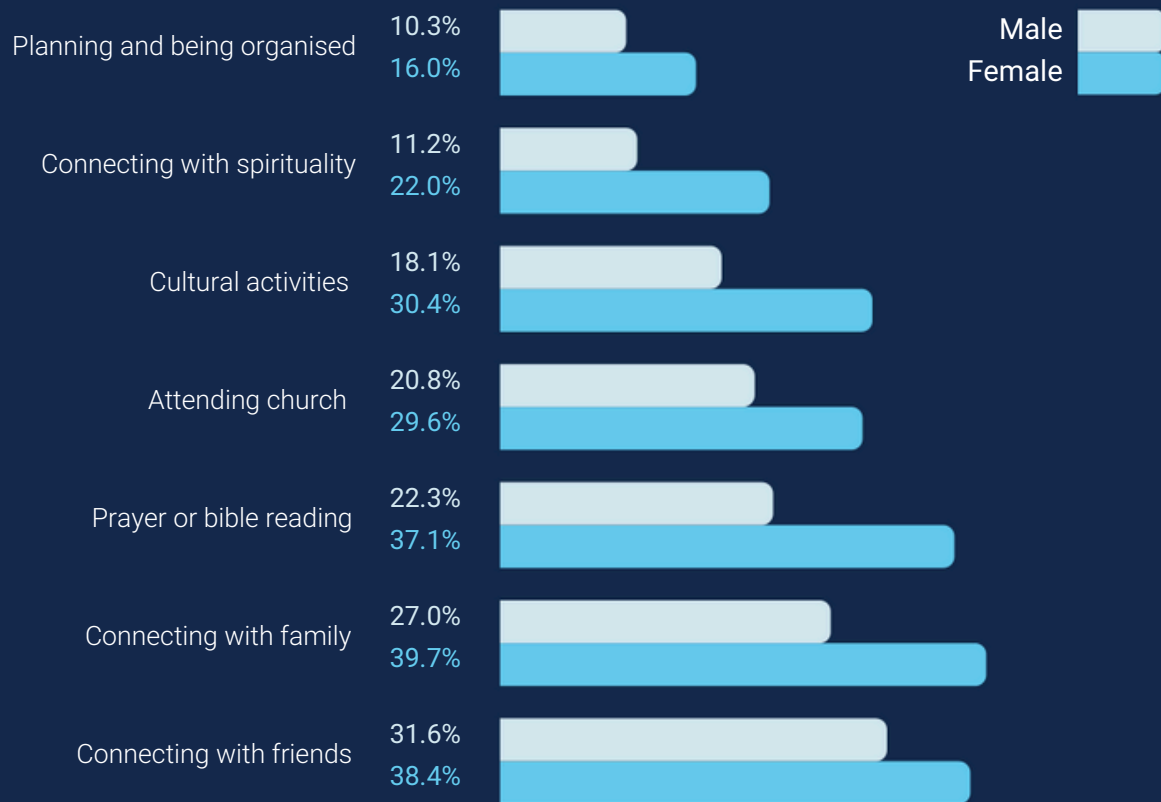


Figure 15: Comparison of factors positively impacting mental health and wellbeing of male vs. female survey respondents

When asked about the things that would help their mental health, listening to music was most reported by youth as contributing to better mental health (49.39%).

Respondents who identified as female were significantly more likely to report that listening to music makes their mental health better. Further, there were a number of significant differences across gender groups, with females identifying that the following made their mental health better more than males (Figure 15):

- Connecting with friends (38.43% for females compared to 31.58% for males).
- Connecting with family (39.69% for females compared to 26.95% for males).
- Prayer or bible reading (37.1% for females compared to 22.32% for males).
- Attending church (29.62% for females compared to 20.84% for males).
- Cultural activities (30.38% for females compared to 18.11% for males).
- Connecting with spirituality (21.98% for females compared to 11.16% for males).
- Planning and being organised (16.03% for females compared to 10.32% for males).

Youth also reported the following as positively impacting their mental health:

- More than a third of respondents reported connecting with friends (38.43%) and family (34.09%) as helpful, and nearly a third reported prayer/reading the bible (30.52%) and outdoor activities (30.17%) were helpful.
- A quarter of youth participants thought attending church (25.65%), engaging in cultural activities (25.04%) and regular exercise (24.17%) helped them.

Looking at the least selected strategies, responses in the "other" category (2.09%) included sleep, walks, significant others, God and eating. Some of these answers were available as options. The strategies that were selected the least were volunteer work (8.96%), digital detox (6.70%) and professional therapy/counselling (3.65%).

Unfortunately, nearly 7.83% (90 individuals) indicated that none of the activities would improve their mental health as nothing can improve it. Importantly, males were significantly more likely to report that nothing can improve their mental health. This finding is consistent with males being less likely to report feeling hopeful for the future (earlier highlighted).

SUPPORT SEEKING BEHAVIOURS

Who youth go to for help

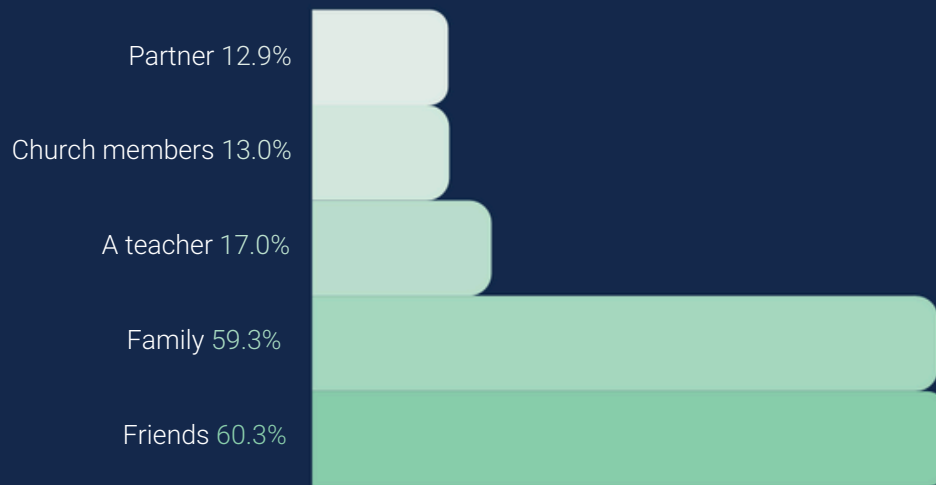


Figure 16: Top five people survey respondents turn to when seeking help

We asked youth “Who do you talk to when you need help?” and found that the top three preferences are:

- friends (60.26%, 693)
- family (59.30%, 682)
- a teacher (16.96%, 195).

This was followed by church members (13.04%, 150), or their partners (12.87%, 148) and counsellors (9.65%, 111) (Figure 16).

There were differences in responses across gender groups:

- Males were significantly less likely to report talking to friends when in need of help in comparison to females (55.37% and 64.43%, respectively).
- Males were also significantly more likely to talk to someone in an online gaming community in comparison to females.

Overall, respondents reported a high level of trust in their friends, with 89.39% of respondents strongly agreeing or agreeing that they trust their friends. This finding is consistent with reported feelings of belonging, with majority of respondents reporting that they experience a sense of belonging (26.34% strongly agree, 51.89% agree, 17.47% neutral, 1.84% disagree, 2.46% strongly disagree), and feel they are accepted by others (30.91% strongly agree, 52.01% agree, 12.35% neutral, 2.28% disagree, 2.45% strongly disagree). Other key insights around support seeking behaviours include:

- When it comes to seeking help online, only 4.26% (49) would turn to online gaming friends, and 4.35% (50) would use an internet chat service.
- 7.04% (81) stated they wouldn't seek help from any of the listed options as they do not ask for help, with 38 males and 41 females selecting this option.

Helpful wellbeing information for youth



Figure 17: Top five types of wellbeing information survey respondents would find most helpful

When asked what wellbeing information and support they would find helpful, the most selected options were resources about (Figure 17):

- study skills (36.27%)
- how to worry less (30.31%)
- talking and listening better (29.74%)
- managing stress (25.82%)
- problem-solving techniques (24.51%).

Unfortunately, 7.89% of participants indicated that none of the options provided would help as nothing improves their mental health. Within this group, Fijian participants selected this answer the most, followed by the Niuean and Cook Islander participants.

Helpful wellbeing information for youth

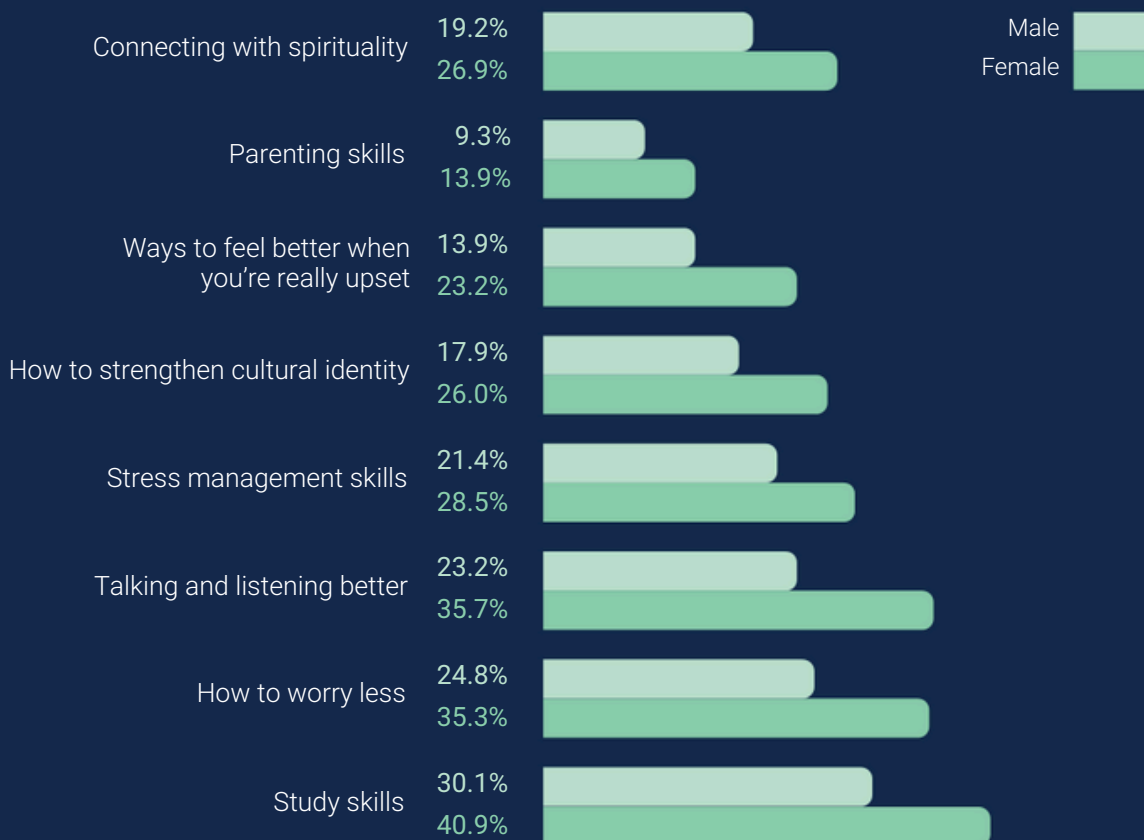


Figure 18: Comparison of wellbeing information considered most helpful by male vs. female survey respondents

Statistically significant differences in the type of wellbeing information and support believed to be helpful across gender groups illustrates how perceptions of wellbeing needs and helpful supports vary based on gender, potentially influencing the design and delivery of tailored wellbeing interventions (Figure 18):

- Study skills (40.92% for females compared to 30.11% for males).
- How to worry less (35.27% for females compared to 24.84% for males).
- Talking and listening better (35.73% for females compared to 23.16% for males).
- Stress management skills (28.49% for females compared to 21.36% for males).
- How to strengthen cultural identity (25.95% for females compared to 17.89% for males).
- Ways to feel better when you're really upset (23.21% for females compared to 13.89% for males).
- Parenting skills (13.89% for females compared to 9.26% for males).
- Connecting with spirituality (26.87% for females compared to 19.16% for males).

Youth preferences for accessing wellbeing information and support platforms

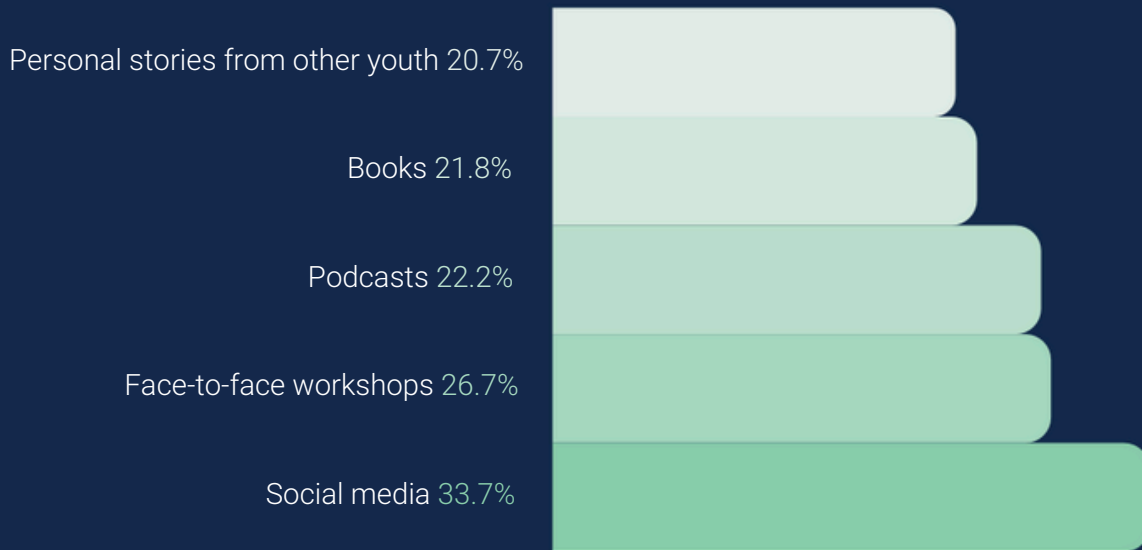


Figure 19: Top five preferred platforms for displaying wellbeing information among survey respondents

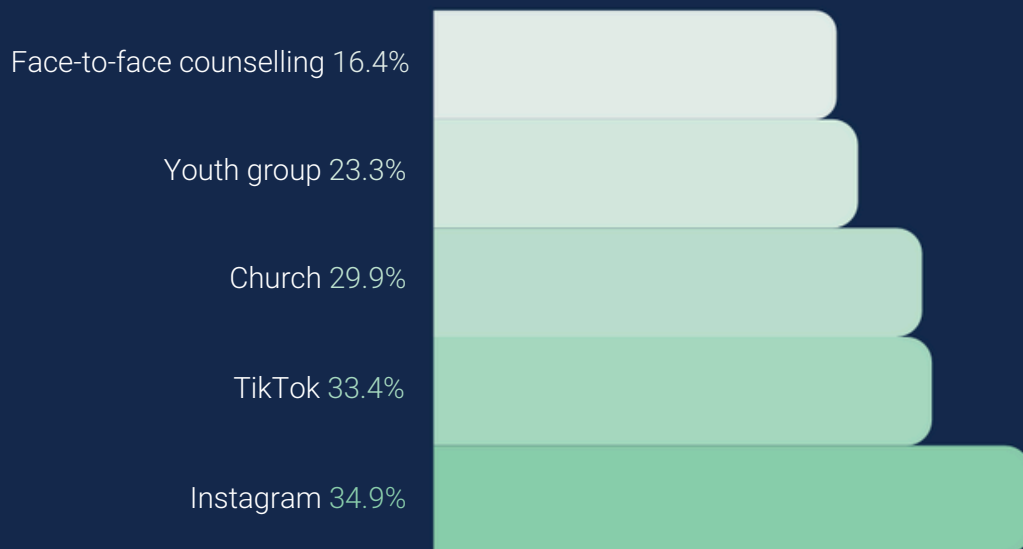


Figure 20 : Top five platforms perceived as most supportive for youth wellbeing among respondents

There were clear preferences among youth around how or where information should be displayed or accessed (Figure 19):

- Social media (33.74%).
- Face-to-face workshops (26.70%).
- Podcasts (22.17%).
- Books (21.83%).
- Personal stories from other youth (20.70%).

Only 12.61% preferred posters/factsheets, 9.22% online eLearning modules, or 6.43% pre-recorded webinars.

Our youth participants perceive the platforms that provide the best support for youth wellbeing are:

- Instagram (34.87%)
- TikTok (33.39%)
- Church (29.91%).

This is followed by youth group (23.30%), face-to-face counselling (16.43%) and youth mentoring (13.13%) (Figure 20).

Perceptions around the platforms that are best for support provision differed across gender groups, with females more likely to identify face-to-face counselling, youth mentoring, youth group, text message support and books.



Overall Summary

In conclusion, Le Va's 2024 Polyfest survey provides valuable insights into the mental health and wellbeing of New Zealand's youth, particularly within Pasifika and Māori communities. Findings reveal that while many young people feel optimistic and rate their mental health positively, significant stressors such as school responsibilities, sleep quality, family responsibilities and social media impact their wellbeing. Additionally, experiences of ethnic and gender-based discrimination remain prevalent, affecting the mental health of many.

Cultural identity and spirituality were critical factors in supporting youth resilience. Many youth turn to music, family connections, religious practices and cultural activities to manage stress, demonstrating the importance of culturally and community grounded supports. Family and friends remain the primary support networks, though male youth face additional barriers to seeking help. The preference for digital platforms like Instagram and TikTok, alongside face-to-face support within church and youth groups, highlights the need for mental health resources that are accessible and culturally resonant.

Consistent with their preference for informal supports such as friends and family, more than 46% of youth surveyed have not engaged with formal support services, underscoring the importance of outreach initiatives that align with youth preferences and build capacity within the community to respond to mental health distress. Moving forward, a focus on culturally safe and community-centric support systems and strengthened digital engagement will be essential to meet the unique mental health needs of Aotearoa's youth, empowering them to thrive within their communities.



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Igniting communities, creating change