

HEALTH-RELATED GOALS AND GOALS OBSTACLES IN EMERGING ADULTHOOD

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Abstract

Aim: This study was conducted to investigate the description of the content of mental health-related goals that emerging adults try to achieve and goal-related obstacles. Additionally, it examined the relationship between subjective perceived mental health, action crisis (ACRIS scale,) and dispositional mindfulness (FFMQ 18). Content analysis identified categories of achieved goals and goal-related obstacles; and correlations. **Sample:** 400 Slovak respondents participated in an online study, with an age range of 20-30 years ($M = 22.5$ years, $SD = 2.66$). **Results:** Most respondents set mental-health-related goals. Overall were e.g., emotional stability, and coping with stress. Goal-related obstacles include lack of time, laziness, or lack of skills. Examining the relationships, we found that a higher rate of action crisis is associated with poorer mental health, and a higher frequency and intensity of obstacles are associated with a higher rate of action crisis in young adults, but the intensity and frequency of obstacles are not related to reported mental health. **Conclusion:** The results highlight the importance of investigation of mental-health-related goals, mindfulness, and action crisis research in emerging adulthood, as the relationship between mental health and the obstacles themselves has not been demonstrated.

Keywords: *Mental health, emerging adulthood, goals, obstacles, action crisis, mindfulness.*

1. Introduction

The research aim was inspired by the study by Milyavskaya and Nadolny (2016). Reflecting on the deteriorating health situation among young people and the growing number of preventable health problems, Milyavskaya and Nadolny (2016) asked their young American respondents about their current physical health, and whether they set and achieved physical health-related goals. However, in health research, it is also necessary to emphasize the specifics and importance of plans in the field of mental health, which is often (especially when researching goals) neglected. While depression is one of the leading causes of illness and disability in adolescents and young adults, half of all mental health disorders in adulthood begin as early as age 14 (Konstantopoulou et al., 2020; WHO, 2021). Therefore, this research addresses the issue of insufficient focus on goals in the mental health field among young Slovaks, represented by spontaneously stated experienced obstacles and the concept of mindfulness and action crisis assessed by a standardized scale. The aim of this work is to investigate the subjective mental health of young adults and to create categories of the most common goals of young Slovaks in the field of mental health, and their obstacles. Additionally, find out whether the variable as dispositional mindfulness and action crisis is related to the current mental health of young adults.

2. Methods

2.1. Participants

The research sample consisted of 400 participants (62% female), in the age range of emerging adulthood: 20-30 years ($M = 22.5$ years, $SD = 2.66$). The mean age of men was 23.3 years with a standard deviation of $SD = 2.26$ and the mean age of women was 23.1 years with a standard deviation of $SD = 2.75$.

2.2. Measurements

Health goal. According to the authors of Milyavskaya and Nadolny (2016), respondents were asked to answer whether they were currently achieving any goal in the field of mental health (yes/no). If they answered yes, respondents had space to write a specific goal that they had been trying to accomplish.

Then they were asked to list the most obstacle that had got in the way of them pursuing the goal. After each obstacle, participants were asked to rate selected obstacle characteristics: frequency, intensity.

Dispositional Mindfulness (FFMQ 18) The original FFMQ questionnaire (Baer et al., 2006) is a 39-item self-report questionnaire measuring the five mindfulness facets using a 5 point Likert scale formatted with responses ranging from 1="Never or very rarely true" up to 5="Very often or always true". The questionnaire used in this study is a shortened version of the FFMQ questionnaire adapted from Medvedev et al (2018). The short version was shown to be useful for comparisons of mindfulness and its facets at a group level or when investigating the associations of mindfulness with other variables. Items included questions such as: "I pay attention to physical experiences, such as the wind in my hair or sun on my face".

At the end of test battery, participants answer questions according to action crisis. Action crisis was measured using the ACRISS scale (Brandstätter & Schüler, 2013). Respondents answered by expressing agreement or disagreement on a 7-point Likert scale (1 - "strongly agree", 7 - "strongly disagree") to 6 items.

2.3. Analytical procedure

The descriptive data, correlations were computed in Jamovi 0.9.2.8. The collected data were part of a bigger project related to goal-directed behavior and overcoming goal-related obstacles. Nevertheless, the presented pattern of results is unique to this study. Two independent coders rated each description of the goal and the obstacles. The coders were in good agreement (95%) and any discrepancies were resolved by the lead author.

3. Results

Content analysis evaluated the goals of young Slovaks, which are reported below in Table 1. Most respondents (80%) set goals in the area of mental health. As presented in Table 1, the preliminary analyses revealed that 61% of the goals were related to psychological self-care activities. The most common obstacles include obstacles on side of person or lack of time.

Table 1. Percentage of reported goals and goal obstacles.

	Category	Example	(%)
SELF-	Emotional stability	overcome anxiety; to learn to manage emotions; emotional stability; not to get immediately upset about something that happens to me; better emotional regulation; to be in emotional balance; be happy	22
	Positive thinking	to take life more positively; to see things in a better light	9.7
PSYCHOLOGICAL CARE (61%)	Coping with stress	don't allow yourself to be stressed; to cope with stress; to learn how to reduce stress	15
	Self-esteem	to build better self-esteem; to learn to love yourself; to accept myself with all my qualities. think about my needs;	12
	Coping with mental disorder	to get out of depression; to take regular medication; look for psychologist	2.3
SELF-DEVELOPMENT (24%)	Skills and abilities	to learn to communicate with people; self-control skills; mindfulness techniques; techniques how to change rumination	15
	Productivity	stop procrastinating; better time management;	8
FAMILYGOALS (12%)	Independence	to become independent from parents; to detach emotionally from parents	8.6
	Family relationships	reconcile with mom	2.4
OBSTACLES	Me	me; lack of effort; lack of family support; doubts, subjective obstacles	36
	Time trouble	lack of time, time pressure, insufficient time	24
	Skills	lack of skills; lack of information; lack of competence	15,8
	Stress	a lot of stress, pressure from school	4

Examining the relationships between the variables, we found that a higher rate of action crisis was related to poorer mental health, $r = -.36$, $p < .01$. Supported by results that higher frequency and intensity of obstacles were associated with a higher rate of action crisis $r(\text{frequency}) = .27$, $p < .01$; $r(\text{intensity}) = .31$, $p < .01$ in young adults, but the intensity and frequency of obstacles were not related to reported mental health.

The analysis revealed a negative significant correlation between mindfulness and action crisis, $r = -.34$, $p < .01$; and positive relation between mindfulness and mental health $r = .21$, $p < .01$.

4. Discussion

Goals are very important in a person's life. Therefore, the main goal of this study was to explore what mental-related goals young people set and reach. Based on the sample of 400 young Slovak, the study has found, that goals in the area of mental health vary. The most represented category is goals focused on psychological self-care mainly in the form of emotional stability and coping with stress. Most young adults want to improve their abilities to manage their emotions. The sub-category coping with stress was related to stress reduction, which confirms that the period of young adulthood is to some extent a stressful period. Within the second most represented category, we can conclude that emerging adults are interested in their self-development, which they want to either maintain or acquire.

After sorting the obstacles mentioned by the respondents we found that the most mentioned obstacle was a subjective obstacle on side of a person, for example, lack of effort or laziness. The other most mentioned obstacles were lack of time or trouble with time regulation.

Additionally, the study analysed whether there is a relationship between subjectively perceived mental health, action crisis, and dispositional mindfulness. Results confirmed that higher rate of action crisis is related to poorer mental health. It is in relation to the general definition of action crisis that describe it as significant intrapsychic conflict to stay or deviate from the path to the goal. An action crisis is defined as a critical phase in the pursuit of a goal in the event that the goal appears difficult to reach (Brandstätter, Schüler, 2013) and action crisis is associated to lower levels of subjective well-being and health (Brandstätter, Herrmann, Schüler, 2013). Opposite, it was confirmed a significant relationship between mindfulness and mental health. This creates a hypothesis about the possible protective effect of mindfulness in problematic goal achievement.

Acknowledgments

APVV-19-0284 Factors of choosing and achieving long-term goals in young people in the transition to adulthood.

VEGA 1/0145/23 If achieving a health goal becomes problematic - what then? Overcoming an action crisis as a critical phase in achieving the goal.

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