

Bridging the Gap: Exploring Mental Health Literacy and Help-Seeking Behaviors Among Adolescents in Palu, Indonesia

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ABSTRACT: Adolescent mental health literacy (MHL) is essential for fostering awareness, reducing stigma, and improving help-seeking behaviors. This study explores the barriers and facilitators of MHL among adolescents in Palu, Indonesia, through a qualitative phenomenological approach. Data were collected via in-depth interviews, focus group discussions, and participant observations, analyzed using thematic analysis. Findings reveal that while adolescents recognize mental health as an important aspect of well-being, their knowledge is largely shaped by social media, often leading to misinformation. Structural barriers, including the lack of mental health education in schools and limited access to professional services, exacerbate this issue. Cultural and familial stigmas further discourage open discussions and professional help-seeking. Adolescents primarily seek support from peers rather than professionals due to fear of judgment. To enhance MHL, interventions must integrate school-based education, peer support networks, and digital campaigns promoting evidence-based information. Community-based approaches, including parental education and stigma reduction initiatives, are also necessary. This study contributes to existing literature by providing culturally specific insights into adolescent MHL and suggesting targeted intervention strategies. Future research should focus on evaluating intervention effectiveness in diverse socio-cultural contexts.

Keywords: Adolescent Mental Health, Mental Health Literacy, Stigma Reduction, Health Education, Peer Support, Digital Mental Health, Indonesia.



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INTRODUCTION

Mental health literacy (MHL) among adolescents has become a vital component of public health, as it shapes awareness, reduces stigma, and promotes timely help seeking behavior (Friedberg et al., 2023; Wiedermann et al., 2024). Defined as the knowledge and beliefs enabling the recognition, management, and prevention of mental disorders, MHL plays a central role in early intervention and access to care (F. Nazari et al., 2022). This is particularly urgent in post disaster settings, where trauma intensifies psychological vulnerability and necessitates culturally relevant mental health strategies (Dunn et al., 2021).

Palu, located in Central Sulawesi, Indonesia, experienced a major earthquake and tsunami in 2018. These events triggered widespread emotional distress, especially among adolescents navigating developmental transitions under heightened stress. Although psychological support is critical in such contexts, systemic limitations such as insufficient mental health education in schools, limited service access, and pervasive stigma have impeded recovery and resilience (Bjørnsen et al., 2023; M. Nazari et al., 2023).

One of the central issues is the limited integration of structured mental health education in Indonesian schools. While some initiatives exist, they are often sporadic and lack curricular continuity. As a result, adolescents rely heavily on informal sources like social media, which though accessible often disseminate misleading information (Coyne et al., 2023; Holman et al., 2024). In tandem, stigma and cultural norms within families discourage open communication, framing mental distress as spiritual or moral weakness rather than a treatable condition (Marmura et al., 2024; S. Raghavan et al., 2024).

While earlier studies have evaluated school based and community mental health interventions, little is known about their applicability in disaster affected, culturally specific populations such as adolescents in Palu. Most interventions also fail to consider the intersection of digital influence, cultural stigma, and service accessibility as simultaneously shaping adolescent MHL.

This study fills that gap by offering an in depth qualitative exploration of adolescent mental health literacy in a post disaster context. By focusing on the lived experiences of adolescents in Palu, the study not only identifies sociocultural and structural barriers to MHL but also evaluates youth informed strategies for improvement. The novelty of this research lies in its triangulated approach combining interviews, focus groups, and observation to produce context specific insights. The findings are expected to inform the design of integrated interventions that embed mental health education in schools, harness credible digital platforms, and address cultural stigma through community engagement.

METHOD

This study employs a qualitative research approach with a phenomenological design to explore adolescents' experiences, perceptions, and barriers related to mental health literacy (MHL) in Palu, Central Sulawesi. The phenomenological method allows for an in depth understanding of how adolescents interpret and engage with mental health concepts in their socio cultural contexts (Kirchhoff et al., 2023; R. Raghavan et al., 2024). By utilizing in depth interviews and focus group discussions (FGDs), this study aims to uncover subjective experiences and common themes related to mental health awareness and access to services.

The study was conducted in Palu, a region significantly impacted by the 2018 earthquake and tsunami. Natural disasters exacerbate mental health vulnerabilities, making it a crucial location for investigating adolescent MHL (Suryaputri et al., 2023). Participants were selected using a purposive sampling strategy to ensure a diverse representation of adolescents aged 15-18 years from various high schools (SMA/SMK) in the region. The final sample comprised 10-15 adolescents, ensuring a balance of gender and socio economic backgrounds.

Data collection was conducted using semi structured in depth interviews and FGDs, which facilitated a comprehensive exploration of individual and collective experiences. In depth interviews provided a private setting for participants to share their personal encounters with mental health issues, while FGDs allowed for discussion on social norms and peer influences (S. Raghavan et al., 2024). Both data collection methods followed an interview guide developed based on existing literature and preliminary findings from initial exploratory discussions.

The in depth interviews focused on adolescents' understanding of mental health, their sources of information, barriers to accessing mental health services, and their attitudes toward seeking professional help. Sample questions included: "What do you understand by mental health?" and "Where do you usually get information about mental health?" This approach enabled the identification of knowledge gaps, misperceptions, and stigma associated with mental health (M. Nazari et al., 2023).

The FGDs consisted of 6-8 participants per group and were conducted in school or community settings, where adolescents felt comfortable sharing their experiences. The discussions focused on social perceptions, peer support, and the influence of family and cultural beliefs on mental health literacy. The dynamic nature of FGDs allowed for the emergence of collective concerns and solutions proposed by adolescents themselves (Dunn et al., 2021). These sessions also provided insights into how media, including social platforms, shape mental health literacy among adolescents (Coyne et al., 2023).

In addition to interviews and FGDs, participatory observation was employed to understand how adolescents access and discuss mental health topics in their natural environments. Observations were conducted in schools and social media platforms to document behavioral patterns, engagement with mental health content, and interactions with peers and educators (Holman et al., 2024).

Data analysis followed the thematic analysis framework proposed by Braun & Clarke (2006), which involves familiarization with data, generating initial codes, searching for themes, reviewing themes, defining and naming themes, and producing the final report. Coding was performed using qualitative data analysis software, ensuring systematic identification of key patterns and emergent themes (Kirchhoff et al., 2023). The validity of findings was maintained through data triangulation, comparing results across in depth interviews, FGDs, and observational data (Marmura et al., 2024).

Ethical considerations were rigorously adhered to throughout the study. Informed consent was obtained from all participants and their legal guardians, with detailed explanations regarding the purpose, procedure, and voluntary nature of participation. Confidentiality and anonymity were strictly maintained, with pseudonyms used in transcriptions and reports to protect participant identities (S. Raghavan et al., 2024). Ethical approval was secured from an accredited Institutional Review Board before the commencement of the study.

This methodological approach provides a robust framework for understanding adolescent MHL in Palu, ensuring comprehensive data collection and rigorous analysis. The integration of qualitative methods and ethical safeguards ensures the credibility and relevance of the findings,

contributing to evidence based interventions aimed at improving mental health literacy among adolescents in disaster prone regions.

RESULT AND DISCUSSION

This study explored the mental health literacy (MHL) of adolescents in Palu, Central Sulawesi, Indonesia, focusing on their understanding of mental health, the barriers they face, sources of information, access to mental health services, and potential interventions. The findings, derived from in depth interviews and focus group discussions (FGDs), reveal significant challenges related to stigma, cultural perceptions, and accessibility of reliable mental health information. This section presents the key findings under the themes identified during thematic analysis.

Understanding of Mental Health

The adolescents demonstrated a varied understanding of mental health, with most defining it in terms of emotional well being and stress management. Their perceptions were largely shaped by informal sources such as social media and personal experiences rather than formal education. Some participants associated mental health with happiness and stability, while others linked it to the absence of psychological disorders.

"Mental health is about how we feel and think, whether we are happy or stressed. If someone frequently feels anxious or sad for no reason, maybe they have a mental health problem" (N, male, 17 years old).

Some adolescents recognized specific mental health conditions, mentioning depression, anxiety, and stress as common issues. However, their knowledge was often superficial, with many struggling to differentiate between emotional distress and clinical mental health disorders.

"I have heard about depression and anxiety, but I am not sure how they are diagnosed. Sometimes, I think I might have anxiety, but I don't know if it's serious or not" (R, female, 16 years old).

The reliance on social media for information was evident, with participants frequently referring to Instagram and TikTok as primary sources of mental health content.

"I learn about mental health mostly from Instagram and TikTok. There are a lot of posts and videos talking about it" (A, female, 16 years old).

Barriers to Mental Health Literacy

Several barriers to improving mental health literacy among adolescents in Palu were identified, including stigma, lack of formal education, and cultural influences.

Participants highlighted the prevailing stigma surrounding mental health, which discouraged open discussions and seeking help.

"I saw my friend often cry and isolate herself, but she never talked about it. I think she was afraid of being judged" (M, female, 17 years old).

A significant number of adolescents expressed that mental health topics were rarely covered in school, with little structured education on identifying and managing psychological issues.

"We don't have special lessons about mental health at school. Sometimes, there are seminars, but they are not enough" (T, male, 17 years old).

Cultural perceptions also played a crucial role, as discussions on mental health were often discouraged within families. Many participants mentioned that when they expressed emotional distress, their concerns were dismissed as a lack of faith or personal weakness.

"In my family, mental health is not something we talk about. If I say I am stressed, they tell me to pray more" (S, female, 17 years old).

Fear of being labeled as weak or mentally unstable prevented adolescents from discussing their mental health openly.

"People think that if you talk about mental health, it means you are weak. That's why many of my friends don't want to discuss it" (D, female, 16 years old).

Sources of Information and Access to Mental Health Services

Most adolescents relied on peer discussions and social media for information on mental health, with only a few being aware of available mental health services. While they found online content helpful, they acknowledged the challenge of distinguishing credible information from misinformation.

"There are many accounts discussing mental health, but I don't know which ones are reliable" (J, male, 18 years old).

Despite the presence of mental health services in Palu, such as counseling at community health centers (puskesmas) and hospitals, most adolescents were unaware of how to access them.

"I have heard that some health centers have psychologists, but I don't know how to get an appointment" (L, female, 16 years old).

Comfort in seeking help was another issue. Participants expressed hesitation to visit professionals due to concerns about privacy and stigma.

"I don't feel comfortable seeing a psychologist. What if people find out and think I am crazy?" (W, female, 16 years old).

Schools were identified as potential sources of support, yet not all students felt that teachers or school counselors were adequately trained to address mental health concerns.

"I sometimes talk to the school counselor, but they don't always understand. Some just say, 'stay positive' instead of giving real advice" (K, male, 17 years old).

Suggested Interventions

Participants suggested several strategies to improve mental health literacy, including incorporating mental health education into school curriculums, leveraging social media for awareness campaigns, and creating peer support programs.

Many adolescents emphasized the need for structured mental health education within schools.

"We should have a proper class about mental health, not just occasional seminars" (R, female, 16 years old).

Social media campaigns were also recommended as a means of engaging youth with reliable and accessible content.

"Schools or the government should create mental health content that is easy to understand, like videos or infographics" (F, male, 17 years old).

The role of peer support networks was highlighted as an alternative to traditional counseling services.

"Having a support group at school where we can share experiences without fear of being judged would be really helpful" (A, female, 17 years old).

Participants also proposed increasing the visibility and accessibility of professional mental health services by improving outreach and reducing stigma.

"If psychologists could come to schools regularly and talk to students, it might help more people feel comfortable seeking help" (H, male, 18 years old).

The findings underscore the urgent need for a multi faceted approach that includes education, social media engagement, and improved mental health service accessibility to enhance mental health literacy among adolescents in Palu.

Understanding of Mental Health

The findings from in depth interviews and focus group discussions (FGD) indicate that adolescents in Palu have a varied understanding of mental health. Many participants associate mental health with emotional stability and stress management, which aligns with previous studies emphasizing the importance of emotional regulation in mental health literacy (Yoon et al., 2024). However, there is a lack of comprehensive knowledge regarding specific mental health disorders, their symptoms, and appropriate coping strategies. This limited understanding is concerning, as previous research suggests that inadequate mental health literacy (MHL) can impede early intervention and appropriate help seeking behavior (M. Nazari et al., 2023).

The predominant sources of mental health information among participants are social media platforms, including Instagram and TikTok. While digital platforms can serve as effective tools for disseminating information (Raghavan et al., 2024), they also pose risks of misinformation, as unverified content can spread widely. These findings underscore the necessity of improving digital

health literacy to help adolescents critically evaluate online mental health content (Barbosa et al., 2022). Schools and community programs should integrate digital literacy training to equip students with the skills needed to assess the credibility of online information.

Barriers to Mental Health Literacy

Several barriers to improving MHL among adolescents in Palu were identified, including limited access to reliable mental health education in schools, stigma, and cultural beliefs. The lack of structured mental health education in schools aligns with findings from previous studies suggesting that mental health is often overlooked in standard curricula (Bjørnsen et al., 2023). Participants expressed that while occasional seminars on mental health are conducted, they lack depth and follow up discussions, rendering them ineffective in fostering long term knowledge retention.

Stigma remains a significant obstacle, with many participants indicating reluctance to discuss mental health issues due to fear of being perceived as weak or different. This aligns with research indicating that stigma is a major deterrent to help seeking behavior among adolescents (Suryaputri et al., 2023). Cultural influences further exacerbate this issue, as some participants reported that their families dismiss mental health concerns as personal weaknesses or spiritual deficiencies. Studies suggest that integrating culturally sensitive mental health education can help bridge this gap by addressing misconceptions and fostering open discussions within families (Timilsina et al., 2025).

Sources of Information and Access to Mental Health Services

The study revealed that adolescents primarily rely on their peers for emotional support, as they feel more comfortable discussing personal challenges with friends rather than family members or professionals. This finding supports previous research highlighting the significance of peer support programs in improving mental health outcomes among youth (Goodwin et al., 2023). Structured peer support initiatives in schools could be an effective intervention to promote help seeking behaviors and reduce stigma.

While some participants were aware of existing mental health services, such as counseling at health centers, there was widespread uncertainty regarding access and procedures. This aligns with studies indicating that low awareness and accessibility issues hinder adolescents from utilizing mental health services (Shoghli et al., 2023). To improve service utilization, policymakers and educational institutions should work towards integrating mental health support within school environments and ensuring that adolescents are informed about available resources.

Another barrier identified is the discomfort and fear associated with seeking professional mental health assistance, driven by stigma and societal judgment. Many participants expressed concerns about being perceived as "weak" or "abnormal" if they sought help from a psychologist. Addressing these concerns requires targeted anti stigma campaigns, as research indicates that reducing stigma can significantly increase help seeking behavior (Coyne et al., 2023).

Intervention Strategies

Several intervention strategies were suggested by participants, emphasizing the role of schools, community based programs, and digital media in improving MHL. One key recommendation was incorporating mental health education into school curricula. Evidence suggests that school based interventions are among the most effective strategies for enhancing MHL and reducing stigma (R. Raghavan et al., 2024). Implementing structured lessons on mental health, resilience building, and emotional regulation could provide adolescents with essential knowledge and coping mechanisms.

Community based interventions were also highlighted as a potential solution, particularly through the establishment of mental health discussion groups and counseling services within local communities. Research supports the efficacy of community based approaches in increasing accessibility to mental health education, particularly in areas with limited professional resources (Yoon et al., 2024). Collaborations between schools, community leaders, and healthcare providers could facilitate sustainable mental health initiatives tailored to local needs.

Given the high reliance on social media for information, leveraging digital platforms for mental health awareness campaigns could be an effective strategy. Previous studies have shown that well designed social media campaigns can significantly improve mental health knowledge and reduce stigma among adolescents (F. Nazari et al., 2023). Schools and local governments should consider working with digital content creators to produce educational materials that are engaging and evidence based.

Limitation

This study has several limitations that should be acknowledged. First, the findings are based on qualitative data from a specific urban setting in Palu, which may limit the generalizability of results to other regions with different sociocultural contexts. Further research involving diverse geographic and socioeconomic backgrounds is necessary to validate these findings. Additionally, while efforts were made to establish rapport with participants, self reported data may be influenced by social desirability bias, potentially affecting the accuracy of responses. Future studies could incorporate longitudinal designs to track changes in MHL and intervention effectiveness over time.

Another limitation is the reliance on participant narratives without direct assessment of mental health literacy levels through standardized measures. Incorporating validated mental health literacy scales in future research could provide a more comprehensive understanding of the specific knowledge gaps among adolescents. Finally, while the study explores perceived barriers and suggested interventions, additional quantitative research is needed to assess the impact of various intervention strategies on MHL improvement.

Implication

The findings from this study have several important implications for future research, policy development, and mental health interventions. Schools should integrate structured mental health

education programs within their curricula to ensure that adolescents receive accurate and consistent information. Additionally, training programs for educators should be implemented to equip them with the necessary knowledge and skills to support students' mental health needs effectively.

At the community level, peer support initiatives and culturally sensitive outreach programs should be developed to reduce stigma and encourage open discussions about mental health. These initiatives should be co designed with adolescents to ensure their relevance and effectiveness. Policymakers must prioritize mental health awareness campaigns that utilize digital platforms to reach a broader audience, particularly given the significant role of social media in information dissemination among youth.

Future research should explore the effectiveness of different intervention strategies in improving MHL and reducing stigma in various sociocultural settings. Longitudinal studies assessing changes in adolescents' mental health literacy over time, following targeted interventions, would provide valuable insights into best practices for sustaining MHL improvements. Moreover, interdisciplinary collaborations between educators, healthcare professionals, and policymakers will be crucial in developing holistic approaches to addressing mental health literacy challenges among adolescents.

CONCLUSION

This study provides an in depth exploration of adolescent mental health literacy (MHL) in Palu, Indonesia, highlighting key barriers and potential intervention strategies. The findings indicate that while adolescents have a basic understanding of mental health, there are significant gaps in knowledge, particularly regarding symptoms, treatment options, and professional help seeking behaviors. The predominant reliance on social media for information, coupled with the limited availability of structured mental health education in schools, contributes to misinformation and stigma. Cultural factors, including familial and societal perceptions, further hinder open discussions about mental health.

The study underscores the need for a multi faceted approach to improving adolescent MHL, including school based mental health education, community engagement programs, and digital literacy campaigns to ensure access to accurate information. Peer support initiatives and destigmatization efforts also emerged as crucial strategies. These findings contribute to the broader discourse on adolescent mental health by emphasizing the contextual and cultural influences that shape MHL. Future research should explore longitudinal impacts of targeted interventions and assess the effectiveness of digital mental health campaigns in promoting accurate knowledge and help seeking behaviors among adolescents in similar socio cultural settings.

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