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Mental Health Literacy Education through the “Why Am I Feeling Galau?” Seminar for University Students in Tana Toraja Regency, South Sulawesi

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ABSTRACT

Mental health is essential to university students' psychological well-being and academic functioning. Academic, social, financial, and personal pressures can affect students' emotional states, often described in Indonesian as “galau,” which refers to feelings of emotional distress, confusion, or uncertainty. Limited mental health literacy may hinder students' ability to recognize their emotions, manage psychological stress, and identify appropriate sources of support. This community service activity aimed to enhance students' mental health literacy and awareness through a seminar entitled “Mental Health Awareness: Why Am I Feeling Galau?” The seminar was held on October 10, 2026, at Grand Hotel Metro Permai in Tana Toraja Regency, South Sulawesi, and was attended by 160 university students. A psychoeducational approach was implemented through presentations, interactive discussions, question-and-answer sessions, and reinforcement of key mental health messages. The topics covered included emotional awareness, psychological stressors, adaptive coping strategies, the risks of self-diagnosis, mental health stigma, social support, and professional help-seeking. The seminar provided an educational platform for connecting mental health concepts with students' everyday experiences. Participants' engagement in discussions and question-and-answer sessions demonstrated their involvement in the learning process. However, because no pre-intervention or post-intervention assessments were conducted, improvements in mental health literacy or changes in participants' behavior could not be empirically established. This activity provides a foundation for developing more sustainable mental health literacy programs through collaboration among universities, communities, and mental health professionals.

Keywords: Mental Health, Mental Health Literacy, Psychoeducation, University Students, Tana Toraja.

I. Introduction

Mental health is a fundamental dimension of human well-being that influences how individuals think, regulate their emotions, establish social relationships, and engage in productive activities. It is not merely the absence of psychological disorders but also reflects an individual's ability to realize their potential, cope with life's challenges, and maintain optimal social functioning. Keyes (2007) emphasized that positive mental health encompasses emotional, psychological, and social well-being and should be continuously promoted.



Similarly, Barbui (2023) highlighted the importance of integrating mental health promotion, prevention, and professional care to create environments that support psychological well-being. Raising awareness and improving understanding of mental health are therefore essential to enhancing quality of life, particularly among young people navigating significant life transitions. University students are particularly vulnerable to psychological stress because they are transitioning into adulthood while assuming greater academic, social, and personal responsibilities. Adjusting to new educational environments, meeting academic expectations, managing financial constraints, maintaining interpersonal relationships, addressing family concerns, and facing uncertainty about employment and the future can all affect their psychological well-being. These challenges become more complex when students lack adequate skills to recognize and regulate their emotional responses. Sholihah et al. (2026) found significant positive associations between social support, self-efficacy, and positive mental health among university students. Their findings suggest that mental health is influenced not only by individuals' coping abilities but also by the quality of support available within their social environments. Mental health concerns among young people have also become an important issue in Indonesia. In a study involving adolescents aged 16–18 years in Jakarta and South Sulawesi, Pham et al. (2024) identified levels of psychological distress and depressive symptoms that varied according to respondents' characteristics. Although the study did not specifically examine university students, its findings underscore the importance of promoting mental health during adolescence to support well-being in subsequent stages of life.

In the context of higher education, Asidik et al. (2022) found that some university students had low levels of mental health literacy, including limited abilities to recognize psychological difficulties and identify available mental health services. These findings indicate that mental health information and education in higher education institutions require more systematic attention. One issue related to university students' mental health is the tendency to describe a wide range of emotional experiences using everyday expressions. Among young Indonesians, the term "galau" is commonly used to describe sadness, anxiety, disappointment, confusion, loneliness, or emotional discomfort arising from particular circumstances. Although the term is closely associated with everyday emotional experiences, it is not a diagnostic category in psychology or psychiatry. Feeling galau does not necessarily indicate the presence of a mental disorder, just as psychological distress cannot always be resolved by simply ignoring one's feelings. Understanding the distinction between normal emotional responses and psychological conditions that require further attention is essential to preventing inappropriate self-diagnosis and ensuring that symptoms requiring professional assistance are not overlooked. Mental health literacy is an important approach to strengthening individuals' understanding of their psychological well-being. Jorm et al. (1997) defined mental health literacy in terms of the knowledge and beliefs that help individuals recognize, manage, and prevent mental health problems. The concept has subsequently expanded to encompass an understanding of risk factors, stress-management strategies, attitudes toward people experiencing psychological difficulties, and knowledge of available sources of assistance. For university students, these competencies are important because they enable emotional experiences to be understood not merely as personal problems but as experiences that can be recognized and managed appropriately. Accordingly, mental health education should promote self-awareness, reflection, and healthier decision-making when individuals face life's challenges.

However, knowledge about mental health does not always translate into a willingness to seek help. In their systematic review of help-seeking among university students, Lui et al. (2024) identified preferences for self-reliance, stigma, and limited mental health literacy as recurring barriers. Similarly, Clement et al. (2015) demonstrated that mental health-related stigma can discourage individuals from accessing professional services. Negative perceptions, concerns about being judged by others, and the belief that seeking help signifies weakness may lead individuals to conceal their psychological difficulties. Mental health education should therefore emphasize that seeking assistance is a responsible form of self-care rather than an indication of an inability to cope with life's challenges. Mental health literacy can be strengthened through psychoeducation that combines the provision of information, reflection on personal experiences, and interactive communication. In a systematic review of health literacy interventions in higher education, Rosário

et al. (2024) found that educational programs may improve various student health outcomes, although their effectiveness depends on the characteristics of the interventions and how they are implemented. Lo et al. (2018) also reported that mental health literacy interventions involving health professions students and clinical educators can improve certain aspects of knowledge and attitudes toward helping others. Nevertheless, improvements in stigma-related attitudes and help-seeking behavior may not result from brief educational interventions alone. These findings highlight the importance of relevant educational materials, accessible communication, and follow-up activities that extend mental health education beyond the initial delivery of information.

In community service practice, educational approaches can also function as preventive health promotion strategies. Through a community outreach program addressing anemia and stunting prevention among adolescent girls, Mulka et al. (2024) demonstrated an approach to community-based health education that included an assessment of participants' understanding. Although their activity focused on physical health, it illustrates how preventive education can address the needs of a target population through the provision of relevant health information. In mental health contexts, similar approaches must account for the sensitivity of personal psychological experiences and the importance of creating safe and supportive communication environments. Seminars incorporating discussions and question-and-answer sessions may provide an initial platform for introducing mental health issues to university students. However, any changes in knowledge, attitudes, or behavior must be evaluated using appropriate assessment methods. Mental health education in Tana Toraja Regency, South Sulawesi, represents an effort to expand students' access to scientifically grounded and easily understandable mental health information. Educational activities conducted outside formal classroom settings provide opportunities for students to discuss psychological concerns related to academic life, social relationships, family circumstances, and future aspirations. In this activity, the theme "Why Am I Feeling Galau?" was selected because the term is familiar to students. It served as an entry point for discussing emotional awareness, psychological stressors, the relationship between thoughts and behavior, adaptive coping strategies, stigma, social support, and the importance of seeking assistance for psychological difficulties. This approach was intended to make discussions about mental health more accessible while maintaining scientific accuracy.

The preceding literature highlights the need for mental health education that is accessible, contextually relevant, and aligned with students' experiences. Previous studies have established the importance of mental health literacy and social support, as well as the barriers that can prevent individuals from seeking help. However, translating these concepts into community-based educational activities requires adaptation to the characteristics of the participants and the local context. This community service activity used the term "galau" as a communication tool to connect everyday emotional experiences with a more scientifically informed understanding of mental health. In addition to delivering information, the activity emphasized participant engagement and interaction as essential components of the educational process. Accordingly, this activity provides a description of psychoeducation implementation and identifies lessons that may inform the development of future mental health promotion initiatives. Against this background, a community service program was implemented through a seminar entitled "Mental Health Awareness: Why Am I Feeling Galau?" for university students in Tana Toraja Regency, South Sulawesi. The activity aimed to introduce fundamental mental health concepts, help students recognize their emotions and the factors contributing to them, introduce adaptive coping strategies, and strengthen awareness of social support and professional help-seeking. Through presentations and interactive discussions, the seminar sought to provide an educational environment that encouraged openness about mental health and fostered more supportive attitudes toward individuals experiencing psychological distress. The activity was also intended to serve as an initial step toward developing sustainable mental health literacy programs involving universities, student organizations, communities, and mental health professionals.

II. Literature Review and Hypothesis Development

2.1. Mental Health and Psychological Vulnerability among University Students

Mental health refers to a state of psychological well-being that enables individuals to recognize their potential, cope with life's challenges, establish healthy interpersonal relationships, and function productively in society. It extends beyond the absence of psychological disorders to encompass positive emotions, life satisfaction, adaptability, and social functioning. Keyes (2007) described positive mental health, or flourishing, as a state characterized by emotional, psychological, and social well-being. From this perspective, mental health promotion should aim to strengthen individuals' capacity to cope with life's demands rather than focus exclusively on the treatment of psychological disorders. In higher education, students encounter various changes and challenges that can affect their psychological well-being, including academic adjustment, interpersonal relationships, financial constraints, and uncertainty about the future. These circumstances may elicit different emotional responses depending on individuals' adaptive capacities and the support available to them. Asidik et al. (2022) found that nearly half of the respondents in their study had low levels of mental health literacy, while mental health difficulties were associated with factors related to personal experiences and social interactions. Similarly, Sholihah et al. (2026) reported positive associations between social support, self-efficacy, and mental health among university students. Taken together, these findings support educational approaches that address mental health knowledge, emotional experiences, and social support as interconnected components of mental health promotion.

2.2. Mental Health Literacy and Recognition of Emotional States

Mental health literacy refers to the knowledge and skills required to recognize mental health difficulties, understand their contributing factors, identify appropriate sources of assistance, and make informed decisions about psychological well-being. Jorm et al. (1997) introduced the concept as knowledge and beliefs about mental disorders that facilitate their recognition, management, and prevention. Subsequently, Kutcher et al. (2016) emphasized the importance of understanding how to achieve and maintain positive mental health, recognize mental disorders, reduce stigma, and improve help-seeking behavior. Mental health literacy therefore extends beyond the acquisition of information to include the practical application of relevant knowledge in everyday situations. Recognizing emotional states is an important component of mental health literacy, particularly when individuals use colloquial expressions to describe their psychological experiences. Among Indonesian university students, the term "galau" can facilitate discussions about sadness, anxiety, disappointment, confusion, and emotional distress. Although it does not constitute a clinical diagnosis, the term can serve as a starting point for reflecting on the relationships among personal experiences, thoughts, emotions, and behavior. O'Connor and Casey (2015) identified several dimensions of mental health literacy assessment, including the recognition of mental disorders, knowledge of risk factors, self-help strategies, and awareness of professional assistance. Accordingly, educational approaches that incorporate familiar language may help bridge everyday understanding and scientific knowledge, provided that the information remains accurate and does not encourage inappropriate self-diagnosis.

2.3. Psychoeducation as an Approach to Improving Mental Health Literacy

Psychoeducation is an educational approach designed to provide psychological knowledge, foster awareness, and introduce practical skills that help individuals understand and address mental health difficulties. It may involve presentations, interactive discussions, reflection on personal experiences, and the introduction of stress-management strategies. Psychoeducation is particularly relevant in higher education, where students need scientifically accurate information delivered in an accessible and engaging manner. In a

systematic review of mental health literacy interventions involving health professions students and clinical educators, Lo et al. (2018) found that educational interventions could improve mental health knowledge and certain related attitudes. Their findings highlight the importance of designing interventions that address the characteristics and needs of the intended participants rather than focusing solely on information delivery. Further evidence of the potential benefits of educational interventions was reported by Yamaguchi et al. (2020), who observed improvements in mental health knowledge and several indicators related to help-seeking following a classroom-based mental health literacy program for secondary school students. Although the participants differed from university students, the findings support the potential role of structured education in strengthening mental health literacy. Similarly, Rosário et al. (2024) found that health literacy interventions in higher education may improve various health outcomes, with their effectiveness depending on intervention design, components, and implementation. In the context of community service, Mulka et al. (2024) described a preventive health education activity that included an assessment of participants' understanding. Although their program focused on anemia and stunting prevention, it illustrates the importance of tailoring health information to the needs of the target population and incorporating appropriate evaluation measures.

2.4. Adaptive Coping Strategies for Managing Psychological Stress

Coping strategies refer to the cognitive and behavioral efforts individuals use to manage internal or external demands that they perceive as stressful. Folkman and Moskowitz (2004) explained that coping involves appraising situations, regulating emotional responses, and selecting appropriate actions when confronted with stress. The effectiveness of a coping strategy depends on the nature of the problem, the resources available, and the extent to which an individual's response fits the circumstances. Consequently, no single coping strategy is effective in every situation. Instead, coping is an adaptive process that requires flexibility, self-awareness, and reflection. For university students, adopting adaptive coping strategies is important when dealing with academic pressure, family difficulties, interpersonal relationships, and uncertainty about the future. Educational activities can introduce practical strategies, including time management, maintaining regular sleep patterns, engaging in physical activity, communicating with trusted individuals, practicing self-reflection, and seeking professional assistance when necessary. Conversely, prolonged avoidance, excessive social withdrawal, and neglect of emotional difficulties may hinder effective problem-solving. In the "Why Am I Feeling Galau?" seminar, coping strategies were introduced as a means of strengthening students' self-management skills. These strategies were not presented as substitutes for professional care but as initial approaches to managing everyday stressors.

2.5. Mental Health Stigma and Help-Seeking Behavior

Mental health stigma refers to negative attitudes, beliefs, and judgments directed toward individuals experiencing psychological difficulties. It may manifest as social stereotyping, discrimination, or negative self-perceptions. Corrigan et al. (2014) explained that stigma can discourage individuals from seeking and engaging in mental health care. Such barriers may arise from fear of being judged by others, concerns about being labeled, or the belief that psychological difficulties indicate personal weakness. Similarly, Clement et al. (2015), in their systematic review, reported an association between stigma and help-seeking behavior, although the nature and magnitude of this association varied across individual characteristics and study contexts. Help-seeking behavior refers to the process of obtaining support for psychological difficulties from informal sources or professional services. Gulliver et al. (2010) identified stigma, limited recognition of psychological problems, and preferences for self-reliance as important barriers to help-seeking among young people. These findings are consistent with those of Lui et al. (2024), who examined barriers and facilitators associated with seeking help for depression and anxiety among university students. Mental health education should therefore extend beyond introducing symptoms and basic coping strategies to emphasize that

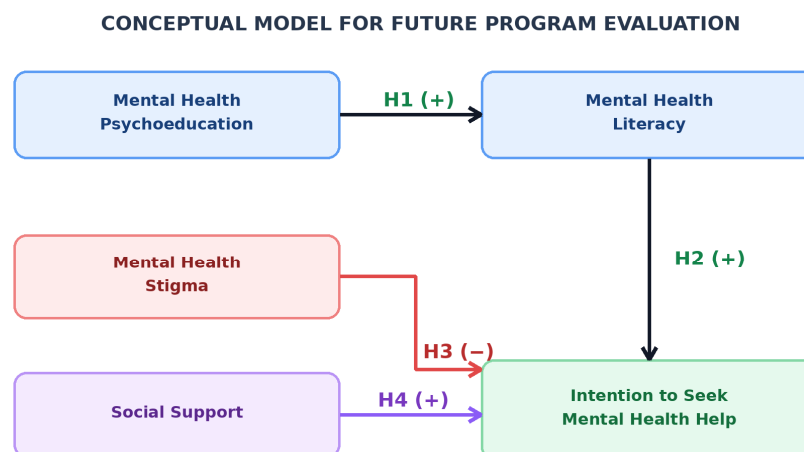
seeking assistance is a normal and responsible response to psychological difficulties. Seminars may provide an initial opportunity to correct misconceptions and introduce available sources of support. However, changes in actual help-seeking behavior require further assessment.

2.6. Social Support as a Protective Factor for Mental Health

Social support comprises interpersonal resources obtained through relationships with family members, friends, partners, educators, and communities. It may take the form of emotional care, informational assistance, practical help, and social acceptance. Cohen and Wills (1985) proposed that social support contributes to well-being through both direct effects and mechanisms that buffer the impact of psychological stress. According to the stress-buffering hypothesis, the perception that support is available when needed may help individuals cope more effectively with challenging situations. The quality of social relationships is therefore an important consideration in maintaining psychological well-being. For university students, social support may alleviate feelings of isolation, strengthen their sense of belonging, and provide opportunities to share experiences and receive assistance. Sholihah et al. (2026) found a positive association between social support and mental health among university students, while Gulliver et al. (2010) identified encouragement and support from others as potential facilitators of help-seeking. Mental health education should therefore emphasize the importance of supportive relationships, nonjudgmental listening, and referrals to appropriate sources of assistance. Strengthening mental health literacy may consequently benefit not only individuals but also the development of social environments that are more responsive to psychological well-being.

2.7. Conceptual Framework and Hypothesis Development

The literature reviewed above provides a conceptual foundation for using psychoeducation to strengthen mental health literacy through information delivery, personal reflection, and interactive discussion. Greater mental health literacy may help individuals recognize emotional states, understand available coping strategies, and determine when professional assistance is needed. Mental health stigma and social support are also relevant factors that may influence individuals' willingness to seek help. These relationships provide a basis for developing a conceptual framework to guide future evaluative research associated with community service activities.



Source: Conceptual synthesis of the reviewed literature. These relationships were not tested in the Tana Toraja seminar.

Figure 1. Conceptual Framework

a. Effects of Psychoeducation on Mental Health Literacy

Psychoeducation provides structured information about psychological conditions and appropriate ways of responding to them. Lo et al. (2018) and Yamaguchi et al. (2020) provided empirical evidence supporting the potential of educational interventions to improve aspects of mental health literacy. Similarly, Rosário et al. (2024) emphasized the importance of designing interventions that address the needs and characteristics of the target population. In the context of the "Why Am I Feeling Galau?" seminar, education about emotional awareness, psychological stress, coping strategies, and available support resources may contribute to improved mental health literacy when implemented systematically and evaluated using appropriate measures. Based on this rationale, the following hypothesis is proposed for future research:

H1 : Mental health psychoeducation has a positive effect on university students' mental health literacy.

b. Effects of Mental Health Literacy on Help-Seeking Intentions

Recognizing psychological difficulties and knowing where to obtain assistance are important prerequisites for making informed help-seeking decisions. Jorm et al. (1997) and Kutcher et al. (2016) identified knowledge of mental health problems and awareness of available support as central components of mental health literacy. Meanwhile, Gulliver et al. (2010) and Lui et al. (2024) identified difficulties in recognizing psychological problems as potential barriers to help-seeking. Conceptually, individuals with higher levels of mental health literacy may be better equipped to recognize when assistance is needed and identify appropriate services. Accordingly, the second hypothesis is formulated as follows:

H2 : Mental health literacy has a positive effect on university students' intentions to seek mental health assistance.

c. Effects of Mental Health Stigma on Help-Seeking Intentions

Mental health stigma may influence individuals' perceptions of the social and psychological consequences of seeking assistance. Fear of being perceived as weak, judged negatively, or discriminated against may discourage individuals from disclosing their psychological difficulties. Corrigan et al. (2014) identified stigma as a factor influencing engagement with mental health care, while Clement et al. (2015) reported associations between stigma and barriers to help-seeking in their systematic review. Higher levels of perceived stigma may therefore be associated with greater reluctance to access mental health support. Based on this reasoning, the third hypothesis is proposed as follows:

H3 : Mental health stigma has a negative effect on university students' intentions to seek mental health assistance.

d. Effects of Social Support on Help-Seeking Intentions

Social support can foster a sense of security and acceptance while reinforcing the understanding that psychological difficulties do not have to be faced alone. Cohen and Wills (1985) emphasized the importance of interpersonal support in coping with stress, while Gulliver et al. (2010) found that encouragement from others may facilitate help-seeking. Sholihah et al. (2026) further highlighted the relevance of social support to mental health among university students. Conceptually, students who perceive higher levels of social support may be more willing to disclose psychological difficulties and consider seeking assistance. Accordingly, the fourth hypothesis is formulated as follows:

H4 : Social support has a positive effect on university students' intentions to seek mental health assistance.

III. Research Method

3.1. Activity Design and Approach

The community service activity was conducted through a mental health education seminar entitled “Mental Health Awareness: Why Am I Feeling Galau?” using a psychoeducational approach focused on mental health promotion and prevention. The approach aimed to enhance participants’ understanding of mental health, raise awareness of emotional experiences, introduce strategies for managing psychological stress, and encourage openness to social support and professional help-seeking. A seminar format was selected because it enabled mental health information to be delivered to a relatively large audience while facilitating direct interaction between participants and speakers. The activity incorporated presentations, interactive discussions, question-and-answer sessions, and reinforcement of key mental health messages tailored to university students’ experiences. The psychoeducational approach was selected because mental health literacy plays an important role in strengthening individuals’ ability to recognize and respond appropriately to psychological difficulties. Kutcher et al. (2016) explained that mental health literacy encompasses knowledge of positive mental health, recognition of mental disorders, stigma reduction, and improved help-seeking. Similarly, Reis et al. (2022) documented various mental health literacy training programs developed in higher education while highlighting the need for more consistent evaluations of their effectiveness and long-term benefits. Rosário et al. (2024) also identified potential benefits of health literacy interventions employing various educational strategies for improving student health outcomes. Based on these considerations, the seminar was designed as an educational platform that connected mental health concepts with concerns relevant to participants’ everyday experiences. Methodologically, the activity adopted a descriptive approach that focused on program implementation, the scope of the educational content, and participant engagement during the seminar. The description was informed by the principles of transparent intervention reporting outlined by Hoffmann et al. (2014), who emphasized the importance of specifying the intervention format, procedures, materials, providers, and delivery methods to facilitate understanding and replication. Accordingly, the program was not designed as an experiment or clinical study but as a community-based mental health education activity whose implementation was described and evaluated descriptively.

3.2. Date and Venue

The seminar was held in person on October 10, 2026, at Grand Hotel Metro Permai in Tana Toraja Regency, South Sulawesi Province, Indonesia. The face-to-face format facilitated two-way communication between speakers and participants, particularly when discussing mental health concerns that required contextual explanation. It also provided opportunities for participants to ask questions and seek clarification regarding emotional experiences, psychological stress, and strategies for managing challenges related to their academic and social lives. Conducting the activity in Tana Toraja Regency formed part of an effort to broaden university students’ access to mental health education in the region. As a community service initiative, the seminar provided a nonformal learning environment in which participants could access mental health information through presentations and interactive communication. The program consisted of a single seminar session; therefore, its scope was limited to introductory education and awareness-raising rather than the provision of ongoing psychological support.

3.3. Target Group and Participants

The program targeted university students in Tana Toraja Regency, South Sulawesi, and was attended by 160 students. This group was selected because university life involves various challenges, including academic demands, social adjustment, interpersonal relationships, family concerns, financial pressures, and decisions about the future. These circumstances may contribute to psychological stress and highlight the

importance of developing emotional awareness, stress-management skills, and the ability to access appropriate social support. Student participation was intended to strengthen mental health literacy through the provision of information and opportunities to discuss issues relevant to everyday life. The educational approach was not intended to diagnose participants or classify them according to their psychological conditions. Instead, all participants were regarded as potential beneficiaries of mental health promotion. The total of 160 participants represents the program's direct reach rather than a research sample selected through probability sampling. Consequently, the findings from this activity are not intended to represent the mental health status of all university students in Tana Toraja Regency.

3.4. Stages of Implementation

The program consisted of four interconnected stages: preparation, educational presentations, interactive discussions, and reinforcement of key mental health messages. These stages provide a systematic account of the implementation process and clarify how each activity relates to the program's objectives. Moore et al. (2015) noted that process evaluations of interventions should consider both implementation and context to ensure that practical experiences can inform future program development. In accordance with this principle, the stages of the seminar are described below.

- a. Preparation Stage: This stage involved coordinating the seminar, determining its theme, preparing the venue, developing educational materials, coordinating with the speakers and moderator, and addressing technical requirements. The educational content focused on mental health issues relevant to university students, particularly emotional awareness, psychological stressors, coping strategies, stigma, social support, and help-seeking. The theme "Why Am I Feeling Galau?" was adopted as a communication strategy to connect everyday emotional experiences with a more scientifically informed understanding of mental health.
- b. Educational Presentation Stage: During this stage, the speakers introduced fundamental mental health concepts, explained the relationship between life experiences and emotional responses, and discussed factors that may affect students' psychological well-being. The material connected mental health concepts with common academic, family, and social situations. Particular emphasis was placed on explaining that sadness, anxiety, disappointment, or confusion does not necessarily indicate the presence of a mental disorder. Participants were also introduced to the importance of considering the intensity, duration, and impact of emotional experiences on daily functioning when determining whether further assistance might be necessary.
- c. Interactive Discussion and Question-and-Answer Stage: Participants were invited to ask questions, seek clarification, and discuss mental health concerns related to university life. This stage was an important component of the program because it extended the presentations into a two-way communication process. Discussions addressed emotional experiences, responses to stress, problem-solving, and the importance of relying on credible information sources. All discussions remained within the scope of general mental health education and were not intended to serve as diagnostic assessments or individual counseling sessions.
- d. Mental Health Message Reinforcement Stage: This stage reinforced the key principles of psychological well-being introduced during the seminar. The messages emphasized recognizing and understanding one's emotional state, avoiding self-diagnosis based on insufficient information, adopting adaptive coping strategies, communicating with trusted individuals, and seeking professional assistance when psychological distress is severe, persistent, or interferes with everyday functioning. Reinforcement activities also encouraged mutual respect and discouraged negative judgments toward individuals experiencing mental health difficulties.

3.5. Educational Content and Delivery Strategies

The seminar content was developed to address the general mental health education needs of university students by integrating psychological knowledge, emotional awareness, stress management, and help-seeking. The topics covered included fundamental concepts of mental health and mental health literacy, the recognition and understanding of emotions, the everyday meaning of “galau,” common sources of psychological stress among university students, and the relationships among events, thoughts, emotions, and behavior. Additional topics included stress management, adaptive coping strategies, distinctions between everyday emotional responses and conditions requiring further attention, mental health stigma, social support, and help-seeking behavior. The material was delivered through an accessible approach grounded in students’ everyday experiences. The term “galau” served as an entry point for discussing emotional experiences arising from academic, social, family, and personal challenges. This approach encouraged participants to understand their emotional responses in relation to the circumstances they experienced rather than relying solely on popular expressions. The material also introduced the relationships among events, thoughts, emotions, and behavior as a simple framework for reflecting on individual responses to stress. To address psychological stress management, the educational sessions introduced coping strategies applicable to everyday life, including maintaining regular sleep patterns, engaging in physical activity, managing time effectively, developing supportive communication, reflecting on personal experiences, and seeking assistance from trusted individuals. The material also emphasized that self-management strategies cannot replace professional care for severe psychological difficulties or conditions requiring specialized intervention. Presentations were complemented by discussions and question-and-answer sessions, allowing participants to clarify the information presented. This approach is consistent with Lo et al. (2018), who reported that mental health education interventions may improve knowledge and certain aspects of attitudes, although reducing stigma and promoting help-seeking may require more comprehensive approaches.

3.6. Evaluation and Analysis of Program Implementation

The program was evaluated descriptively, with a focus on seminar implementation and participant engagement in the educational process. Evaluation information was obtained from observations conducted during the activity, participation in discussions and question-and-answer sessions, and event documentation. Particular attention was given to the implementation of each seminar stage, the delivery of mental health education content, opportunities for interaction between speakers and participants, and observable forms of participation. This approach was intended to describe the implementation process rather than assess participants’ clinical conditions or individual psychological changes. A descriptive narrative analysis was used to summarize the seminar’s implementation, attendance, coverage of educational content, and interactions throughout the activity. Photographic documentation provided supporting evidence of the event and illustrated the presentations, discussions, and participant attendance. The available information was organized according to the implementation stages to provide a coherent account of the activity and demonstrate its alignment with the objectives of mental health education. Moore et al. (2015) emphasized the importance of understanding both implementation and context in process evaluation. Accordingly, the present evaluation was limited to implementation aspects supported by the available information and documentation.

The activity did not include pre-intervention and post-intervention assessments (pre-tests and post-tests), a comparison group, or statistical hypothesis testing. Consequently, the results cannot establish that the seminar directly improved mental health literacy, reduced stigma, changed help-seeking behavior, or enhanced psychological well-being. Attendance and participation in discussions were treated as indicators of program reach and implementation rather than measures of intervention effectiveness. This limitation is consistent with Reis et al. (2022), who emphasized the need for consistent outcome measurement and reporting when evaluating mental health literacy programs for university students. This descriptive evaluation

provides a basis for identifying areas for improvement in future community service programs, particularly in relation to educational materials, communication strategies, participant engagement, and evaluation procedures. Subsequent initiatives could incorporate validated mental health literacy instruments, pre-intervention and post-intervention assessments, and follow-up evaluations to examine knowledge retention and potential behavioral changes. In this way, the implementation experience gained from the seminar can inform the development of more systematic, measurable, and sustainable mental health education programs.

IV. Results and Discussion

4.1. Implementation of the Mental Health Awareness Seminar

The community service seminar entitled “Mental Health Awareness: Why Am I Feeling Galau?” was held on October 10, 2026, at Grand Hotel Metro Permai in Tana Toraja Regency, South Sulawesi, and was attended by 160 university students. The face-to-face program consisted of an opening session, educational presentations, interactive discussions, and a question-and-answer session. The topics covered included an introduction to mental health, emotional experiences commonly described as “galau,” psychological stressors, adaptive coping strategies, social support, mental health stigma, and the importance of seeking professional assistance when necessary. The number of participants reflects the program’s direct reach but does not, in itself, demonstrate improvements in knowledge or changes in behavior. The presentations connected mental health concepts with students’ everyday experiences, including academic demands, social relationships, family concerns, and uncertainty about the future. Figure 2 documents a presentation session involving dialogue between the speaker and the moderator. This interactive format provided opportunities for participants to receive contextualized explanations and engage directly with the material, distinguishing it from a purely one-way health education session. Similar interactive approaches were adopted in community service programs conducted by Fadhilah et al. (2024) involving psychology students and by Amri et al. (2026) involving students in vocational higher education. Both programs emphasized adapting mental health education to the needs of the target population, although they differed in participant characteristics and implementation design.



Figure 2. Presentation and discussion during the “Mental Health Awareness: Why Am I Feeling Galau?” seminar.

Figure 3 presents a mental health education session delivered by a speaker, while Figure 4 documents a group photograph of the participants and organizers. Together, these photographs provide visual documentation of the seminar’s implementation as an in-person educational activity involving university students. However, the photographs are not used to draw conclusions about participants’ knowledge levels,

psychological conditions, or satisfaction with the program. Distinguishing evidence of program implementation from evidence of educational outcomes is essential for maintaining methodological rigor in community service reporting.



Figure 3. Mental health education session during the “Mental Health Awareness: Why Am I Feeling Galau?” seminar.



Figure 4. Participants and organizers of the Mental Health Awareness seminar in Tana Toraja Regency.

4.2. Discussion

a. “Why Am I Feeling Galau?” as an Approach to Mental Health Literacy

The phrase “Why Am I Feeling Galau?” was a defining feature of the seminar’s communication approach. The term “galau” served as a bridge between everyday emotional experiences and more structured explanations of mental health. In everyday usage, it may refer to confusion, sadness, disappointment, worry, or distress arising from a particular situation, but it does not constitute a clinical diagnosis. Accordingly, the educational materials did not encourage participants to interpret every unpleasant emotion as a mental disorder. Instead, they encouraged participants to identify their feelings, reflect on the situations that triggered them, and recognize appropriate actions to take when assistance was needed. During the discussions, emotional awareness was explored through reflective questions about participants’ feelings,

accompanying thoughts, behavioral responses, and the possible consequences of those responses. This approach aligns with the concept of mental health literacy as the ability to recognize psychological difficulties, consider appropriate initial responses, and identify available sources of support (Asidik et al., 2022). For comparison, Fatimah et al. (2024) delivered mental health literacy psychoeducation for Generation Z through discussions, simulations, and practical exercises in psychological skills, whereas Mawardah and Buja (2026) used a massive open online course (MOOC) to address mental health and anxiety among university students. The distinctive feature of the Tana Toraja seminar was its use of a familiar expression to introduce face-to-face mental health education, rather than any demonstrated effect of the expression itself on mental health literacy outcomes.

b. Recognizing Emotions Without Self-Diagnosis

A central component of the educational program was distinguishing everyday emotional responses from conditions that may warrant further assessment. Grief following a loss, anxiety before examinations, disappointment when goals are not achieved, and tension arising from interpersonal conflict are experiences that may occur in student life. However, these experiences alone are insufficient to establish a clinical diagnosis. Participants were therefore introduced to the importance of considering the duration, intensity, and frequency of psychological difficulties, as well as their effects on academic performance, sleep, social relationships, and daily functioning. This approach aimed to promote awareness without encouraging self-diagnosis. Discussing the risks of self-diagnosis is particularly relevant in an environment where psychological information is widely available on social media. The key message emphasized the importance of evaluating the reliability of information sources and consulting qualified professionals when difficulties persist, worsen, or substantially interfere with daily life. Fatimah et al. (2024) similarly incorporated early symptom recognition and emotion management into their psychoeducation program, while Mawardah and Buja (2026) addressed the identification of psychological difficulties and the use of reliable information sources. The Tana Toraja seminar covered similar topics; however, no outcome measures were collected to determine whether participants subsequently changed their information-seeking behaviors or approaches to self-diagnosis.

c. Psychological Stressors and the Relationships Among Thoughts, Emotions, and Behavior

The seminar explained that experiences described as “galau” do not necessarily arise from a single cause. Potential contributing factors include academic workload, unmet goals, financial circumstances, family relationships, peer conflict, romantic relationships, self-image, social comparison, social media exposure, and uncertainty about the future. These factors were presented as potential sources of stress commonly discussed in student life, rather than as survey findings identifying the primary causes of psychological difficulties among the 160 participants. This distinction is important to avoid implying that all participants experienced the same challenges. To facilitate reflection, the speakers introduced the simple sequence “event–thought–emotion–behavior.” This sequence served as an educational tool to illustrate how different interpretations of an event may lead to different emotional responses and influence subsequent behavior. These relationships are dynamic and should not be interpreted as a universally linear causal sequence. A contextually relevant approach was also adopted in the community service program conducted by Amri et al. (2026), which incorporated the recognition of academic stress and adaptive coping strategies into learning activities for vocational students. This comparison suggests that familiar, relatable examples can help communicate educational content, although learning outcomes still need to be assessed using appropriate instruments.

d. Strengthening Adaptive Coping Strategies

After addressing emotional awareness and potential sources of stress, the seminar introduced a range of adaptive coping strategies. These included time management, adequate sleep, physical activity, communication with trusted individuals, participation in meaningful activities, self-reflection or journaling, and limiting social media exposure when it becomes a source of stress. These strategies were presented as options that could be adapted to individual circumstances and needs rather than as universal solutions. The

speakers also emphasized that self-management strategies do not replace professional support when symptoms are severe, persistent, or substantially impair daily functioning. The emphasis on coping strategies was consistent with the community service program conducted by Fatimah et al. (2024), which incorporated stress and emotion management skills into psychoeducation, and the program conducted by Amri et al. (2026), which addressed academic stress and adaptive adjustment strategies. Rosário et al. (2024) reported that health literacy programs in higher education may contribute to improvements in various health outcomes, although their effects can vary depending on the design of the intervention. In the Tana Toraja program, the documented outcome was the introduction of a range of coping strategies through the seminar. Whether participants subsequently applied these strategies in their daily lives was not examined through follow-up evaluation.

e. Social Support and Help-Seeking Behavior

The discussion of help-seeking behavior emphasized that mental health difficulties do not have to be managed alone. Self-help, social support, and professional assistance were introduced as complementary sources of support rather than as steps that must be followed in a fixed sequence. Professional assistance may be necessary immediately when symptoms are severe, daily functioning is substantially impaired, or personal safety is at risk. This clarification is important to ensure that participants do not delay seeking professional care under the mistaken assumption that self-help and informal support must always be attempted first. During the seminar, social support was discussed in terms of open communication with family members, friends, lecturers, or other trusted individuals, as well as the importance of listening without judgment. Damayanti et al. (2026) provided a more structured comparison through a mental health seminar at Universitas Pendidikan Indonesia, training in the production of positive content, and the development of a WhatsApp channel to support ongoing education. Meanwhile, Lui et al. (2024) identified stigma, preferences for managing problems independently, and limited mental health literacy as barriers to students' help-seeking behavior. The Tana Toraja seminar introduced messages about seeking assistance and accessing social support; however, it did not assess changes in participants' intentions or actual behavior regarding the use of mental health services.

f. Stigma and the Development of a More Supportive Environment

Stigma was addressed because individuals experiencing psychological difficulties may encounter dismissive reactions, such as being labeled weak, ungrateful, or attention-seeking. Such responses can discourage individuals from disclosing their difficulties and seeking help. The seminar emphasized the importance of using nonjudgmental language, respecting others' experiences, and avoiding labeling or diagnosing peers. Participants were encouraged to understand that providing support does not necessarily mean solving another person's problems; rather, it can begin with listening and helping the individual access appropriate assistance. The systematic review by Clement et al. (2015) found that stigma is associated with barriers to seeking mental health support. Mehta et al. (2015) further explained that anti-stigma interventions can produce changes, although evidence of sustained effects varies according to intervention type and follow-up duration. In the context of community service, Fatimah et al. (2024) identified stigma reduction as one of the objectives of their mental health literacy psychoeducation program. Unlike programs that employ pre-intervention and post-intervention assessments, the "Why Am I Feeling Galau?" seminar can currently be reported only as having provided education about stigma, rather than as evidence that participants' stigmatizing attitudes decreased.

g. Achievements, Evaluation Limitations, and Directions for Program Development

The documented achievements of the seminar include the delivery of an in-person educational activity for 160 university students, the presentation of mental health-related content, and opportunities for discussion and questions, as documented in the event photographs. Figures 2 and 3 illustrate the presentation format, while Figure 4 documents the participants and organizers together. This visual evidence supports the

description of program implementation but is insufficient to establish that participants' knowledge increased, stigma decreased, or help-seeking behavior changed. The distinction between program implementation and intervention effectiveness can be illustrated by comparing this activity with previous community service programs. Fatimah et al. (2024) used pre- and post-psychoeducation assessments involving 59 students, while Widowati et al. (2025) reported comparisons of assessments conducted before and after school-based education. In another area of preventive health, Mulka et al. (2024) also implemented pre-tests and post-tests in an anemia and stunting prevention program for adolescent girls. These comparisons do not imply that the target populations or health issues were equivalent. Rather, they demonstrate the importance of using appropriate evaluation instruments when reporting changes in participants' understanding as program outcomes. The Tana Toraja activity did not include pre-tests, post-tests, a comparison group, or follow-up assessments. Consequently, the evaluation was limited to documented program implementation and participation. Future activities could incorporate an appropriate mental health literacy questionnaire, assess participants' understanding before and after the educational intervention, and conduct follow-up assessments several weeks after the seminar. Peer-support training, information on referral pathways, and digital educational materials could also be considered as program extensions. The seminar and digital communication channel model described by Damayanti et al. (2026) offers one potential approach, subject to local needs and available resources.

h. Relevance of the Activity for University Students in Tana Toraja Regency

Conducting the seminar in Tana Toraja Regency represented an effort to provide mental health education to students beyond the formal classroom setting. The use of a familiar everyday expression helped situate discussions of mental health within participants' academic and social experiences. Attendance by 160 students demonstrates the activity's direct reach, while the face-to-face format facilitated presentations and opportunities for questions. However, this number cannot be used to determine the prevalence of psychological difficulties, the level of demand for mental health services, or the mental health literacy levels of all university students in Tana Toraja Regency. A target-group-oriented approach was also evident in the community service activity conducted by Mulka et al. (2024), which developed preventive health education for adolescent girls in response to local concerns. Although the health topics differed, both approaches underscore the importance of adapting community service content to its specific context. In the field of mental health, Fatimah et al. (2024), Amri et al. (2026), and Damayanti et al. (2026) illustrate different strategies, including psychoeducation, the integration of educational content into learning activities, and digital support for continuing education. The Tana Toraja seminar contributes to this range of approaches by using the term "galau" as a communication tool, although its comparative advantage has not been empirically evaluated. In terms of sustainability, the activity may serve as a foundation for collaboration among universities, student organizations, community groups, and mental health professionals to develop further educational initiatives, structured peer-support programs, and clear information about accessing mental health services. More systematic process documentation and outcome measures aligned with the program's educational objectives will be necessary to evaluate its benefits more convincingly. The principal contribution of "Mental Health Awareness: Why Am I Feeling Galau?" therefore lies in its documented delivery of mental health promotion relevant to students' experiences, as well as its identification of evaluation needs for future community service activities.

V. Conclusion

The community service seminar entitled "Mental Health Awareness: Why Am I Feeling Galau?" was held on October 10, 2026, at Grand Hotel Metro Permai in Tana Toraja Regency, South Sulawesi, and was attended by 160 university students. The seminar was implemented as a preventive and promotive mental health education initiative using a psychoeducational approach that combined presentations, interactive discussions, and question-and-answer sessions. By using the familiar expression "galau" as an accessible

communication tool, the seminar addressed emotional experiences, potential sources of psychological stress, adaptive coping strategies, and psychological well-being. It also provided opportunities for participants to learn about mental health, the risks of unsupported self-diagnosis, the importance of social support, the effects of stigma, and appropriate help-seeking behavior. The activity demonstrated the feasibility of delivering contextualized mental health education to a relatively large group of university students through direct interaction with speakers while maintaining a focus on scientifically informed content. However, the evaluation was limited to program implementation, participant involvement, and event documentation. Therefore, the activity cannot establish measurable improvements in mental health literacy, attitudes toward stigma, or help-seeking behavior. The seminar should consequently be regarded as an initial step toward sustained mental health education rather than as evidence of demonstrated changes in participants' knowledge or behavior. To strengthen the sustainability and effectiveness of future initiatives, collaboration among universities, student organizations, local governments, communities, and mental health professionals should be encouraged. Subsequent programs could incorporate peer-support training, emotional regulation skills, academic stress management, healthy social media practices, and stigma reduction campaigns. Universities should also improve access to information about counseling services and referral pathways to help students identify appropriate sources of professional assistance when experiencing psychological distress.

Educational materials and activities should be adapted to local social and cultural contexts to ensure their relevance to university students in Tana Toraja Regency. In addition, future programs should incorporate validated mental health literacy instruments administered before and after the intervention through pre-tests and post-tests. These assessments could be complemented by measures of stigma-related attitudes, understanding of coping strategies, and intentions to seek professional help. Follow-up assessments conducted several weeks after the activity would also help examine knowledge retention and the potential application of the material in everyday life. Such evaluation procedures would provide a stronger basis for assessing program outcomes and developing more participatory, evidence-informed initiatives that support student empowerment and foster caring, inclusive, and psychologically supportive higher education environments. The implementation team expresses its sincere gratitude to everyone who supported and contributed to the "Mental Health Awareness: Why Am I Feeling Galau?" seminar in Tana Toraja Regency, South Sulawesi. Special appreciation is extended to the speakers, moderator, and organizing committee for their dedication and cooperation in ensuring the smooth implementation of the event. The team also thanks all participating university students for their active engagement in the seminar and discussions. The support and contributions of these individuals were essential to the successful delivery of this educational activity, which aimed to strengthen mental health awareness and literacy among university students.

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