

**HEALTH COMMUNICATION AS AN APPROACH IN ADOLESCENT
COUNSELING: AN EXPLORATION OF MENTAL HEALTH PRACTITIONERS****Vina Dartina^{1*}, Uud Wahyudin¹, Siti Nuriah²**¹Universitas Padjadjaran, Indonesia²Universitas Pendidikan Indonesia, Indonesia*Corresponding author, *e-mail*: vina24007@mail.unpad.ac.id

Abstract: The issue of mental health among adolescents is becoming increasingly significant in the educational and social realms, as many adolescents face emotional distress without the support of a safe space to understand and manage their feelings. This study aims to explore the application of health communication principles in adolescent counseling practices, both by practitioners in formal settings, such as schools, and non-formal community settings. Using a qualitative method with a case study approach, data were collected through in-depth interviews with three informants: a community mental health activist, an academic in the field of counseling and guidance, and an adolescent who acted as a counselee. Findings from the thematic analysis reveal that health communication is not only used to convey educational information, but also to foster empathic, participatory, and tailored interactions that are relevant to the counselee's life context. The practice is realized through the use of familiar language, supportive gestures, and easy-to-understand analogies, such as "a tank of emotions" or "a body that asks for help." Communication is understood as a medium of recovery that facilitates emotional validation, psychosocial support, and space for personal reflection. The results of this study confirm that health communication principles can enrich the adolescent counseling process, particularly in strengthening trust and facilitating a more comprehensive recovery process. This approach deserves to be developed in community-based counseling services that are adaptive to the emotional needs of today's adolescents.

Keywords: Health communication; Mental health; Counseling; Adolescent counseling; Community-based counseling

INTRODUCTION

The issue of adolescent mental health has recently become more pressing, especially in big cities like Bandung. Academic pressure, unstable social relationships, and the lack of a safe space to share stories often cause adolescents to keep emotional burdens to themselves that should be shared and addressed together. Data from the Bandung City Health Office shows a sharp increase. In 2021, more than 24,000 children showed symptoms of emotional disturbance, and this number jumped to nearly 36,000 in 2022, a number that indicates that this problem is not a momentary situation, but has begun to form a concerning structural pattern (Jabarekspres, 2023).

This situation is also reflected nationally. Based on the results of the Indonesia-National Adolescent Mental Health Survey (I-NAMHS) in 2022, around 34.9% of Indonesian adolescents experienced mental health problems in the past 12 months. Ironically, however, only 2.6% of them had accessed support or counseling services. (Ministry of Women's Empowerment and Child Protection (KemenPPPA), 2024). Anxiety disorders were the most common, with a higher prevalence among female adolescents (28.2%), while behavioral disorders were more common among male adolescents (3.5%) (GoodStats., 2024).

Based on these data, the urgency of this research lies in the need to present a mentoring approach that focuses more on the human side of adolescents, namely an approach that not only controls behavior but also explores how communication can be a bridge to recovery. In this case, guidance and counseling services in schools, communities, and the informal sphere have a vital role as a space for psychosocial recovery. (Dermawan et al., 2022) However, the quality of the relationship between counselors and adolescents is primarily determined by the way communication is built, not just talking, but presenting empathy, presence, and a sense of acceptance. (Rukmana, 2021).

The need to understand and explore communication practices in adolescent counseling in a more contextual setting is the **basis for the rationalization of this research**. Because communication is not just conveying messages, communication in this context is a process that builds a sense of security, fosters trust, and opens opportunities for self-transformation (Halian et al., 2020).

Specifically, health communication is a highly relevant lens through which to frame this process. Health communication encompasses not only physical issues but also mental and social dimensions in a holistic manner. (Putri et al., 2021) Mentioned that health communication must be educative, participatory, and contextual, especially when it touches on aspects of adolescent mental health. Meanwhile (Haro et al., 2022) Emphasized that within the framework of health communication, counseling is not just a storytelling session, but a therapeutic process that aims to build empathy and empower individuals to recognize their body signals and emotions consciously.

The **literature review** reinforces the relevance of this approach. A study at Prima Harapan Mental Rehabilitation Center in Bandung Regency demonstrates how group activity therapy is utilized as a form of communication during recovery. There, communication is not only verbal, but also realized through body language, symbols, and group interactions that strengthen self-identity (Utami et al., 2019). Within the broader community, many mental health advocates work in a more flexible and context-specific manner. They are not only psychologists, but also lecturers, counselors, and volunteers who are present among adolescents as friends and listeners. The language used is fluid and familiar, with stories, simple analogies, and even local cultural expressions that strengthen the connection.

Starting from this condition, this research aims to explore in more depth how health communication principles are applied in adolescent counseling practices by mental health activists, particularly those working outside formal systems, such as schools or clinical services. This study aims to investigate how they establish empathic and supportive counseling relationships through warm and open communication. In addition, this study aims to describe the verbal and nonverbal forms of communication used in counseling interactions, particularly those that can help adolescents open up and reduce resistance.

Equally important, the study also examined how the health communication approach they applied was adapted to the adolescents' diverse social and cultural backgrounds. On the other hand, the challenges that arise during the mentoring process are also an important part that needs to be understood, including the communication strategies used by the activists to overcome them in a contextual and humane manner.

Under these conditions, this study generally **aims to** describe the application of health communication principles in counseling relationships built between mental health activists and adolescents. This research also aims to explore the various forms of communication, both verbal and non-verbal, that can create a therapeutic and reflective atmosphere of interaction. In addition, this research aims to analyze how the health communication approach is adapted to the social, cultural, and psychological conditions of adolescents and identify the challenges faced during its practice. Thus, the results of this study are expected to enrich both practical and theoretical understanding of health communication in the context of adolescent guidance and counseling more broadly.

The State of the Art of this research lies in the explorative focus on health communication-based counseling practices in non-formal and community contexts. To date, most studies have examined counseling from an institutional or clinical perspective. This study aims to go beyond that by examining how communication is used flexibly, culturally relevant, and capable of forming a genuine safe space for adolescents. Thus, the findings of this study are expected to enrich interdisciplinary perspectives in the realm of communication and counseling, as well as make a real contribution to practitioners in the field.

METHOD

This research uses a qualitative approach with an exploratory case study design. This design was chosen because it enables researchers to gain a deep understanding of communication phenomena that occur in real-life contexts. Exploratory case studies, as explained, are suitable for use when the boundary between the phenomenon being studied and its context is not entirely clear. This method not only highlights "what" happens, but also explores "why" and "how" a process takes place, especially in dynamic social practice. In the context of this research, the case study approach is considered relevant for exploring health communication practices in adolescent counseling conducted by non-clinical and community-based mental health professionals (Frank et al., 2024).

The choice of this method is based on the primary objective of the research, which is to explore the communication strategies employed by a mental health activist in assisting adolescents through empathic, participatory, and contextually relevant counseling practices. This research does not focus on statistical measurement, but on a thorough understanding of the meanings, processes, and relationships built in health communication practices in the field (Creswell & Poth, 2011). The main object of this research is the health communication practices carried out by an activist in the process of counseling adolescents, with special attention to how communication strategies are formed, delivered, and adjusted to the social and psychological conditions of the adolescents being assisted.

The scope of this research is limited to informal counseling practices that take place in communities or non-formal social settings. This research does not evaluate the effectiveness

of therapy or the success of clinical healing, but rather highlights how health communication approaches are implemented reflectively by activists in real situations. To obtain data, the researcher used in-depth interview guidelines as the main instrument. This guideline was developed based on the principles of health communication and the relational approach in counseling. In addition to interviews, data were also obtained from field notes and related supporting documentation, such as narratives of experiences or community communication materials.

The research was conducted in Bandung City, an area with high social dynamics and concern for adolescent mental health issues. The city is also known for its active communities and social initiatives addressing psychosocial assistance issues, making it an appropriate and relevant location for the exploratory needs of this research. Data collection techniques were employed through in-depth interviews with three purposively selected key informants: a mental health activist, serving as the primary subject; a guidance and counseling lecturer, acting as an academic informant; and an adolescent who had been a counselee, providing triangulation of the service user experience. This selection of informants aims to ensure diversity of perspectives and increase the contextual validity of the data. (Creswell & Poth, 2018).

Data analysis was conducted using a thematic analysis approach. This technique allows researchers to identify patterns of communication, key themes, and meanings that emerge from interviews and field notes. The analysis process began with open coding, grouping the codes into thematic categories, then drawing reflective interpretations of the narratives found. To maintain the validity and trustworthiness of the results, researchers triangulated sources, double-checked the results with informants (member checking), and compiled an audit trail or documentation trail of the analysis process, following established guidelines. (Creswell & Poth, 2018a).

RESULT AND DISCUSSION

This study demonstrates that the application of health communication in community-based adolescent counseling practices plays a crucial role in fostering empathetic, educational, and culturally relevant relationships. The communication process between mental health activists and adolescent counsees is not linear or one-way, but dialogic and relational. Communication is understood as a process of shared meaning formation, where information, emotions, and social context become an inseparable unit. Findings from the thematic analysis reveal that health communication in adolescent counseling encompasses eight primary aspects: trust building, verbal and nonverbal communication strategies, psycho-educational communication, adaptation to local culture and language, addressing communication resistance, emotional turning points, the role of community, and perceptions of ideal communication.

The principles of health communication in this context are reflected in the counselor's efforts to build an equal and non-patronizing relationship, as recommended by humanistic and reflective approaches. Educational communication is conveyed through the clear and straightforward presentation of information about body language, stress, and emotions. For example, the use of analogies such as "the emotional tank" or "the brain that is busy storing

unfinished business" is a way to ground the concept of mental health without being judgmental. Communication is also conducted in a participatory manner by inviting adolescents to reflect on their own emotions, rather than just as objects of learning. This aligns with the concept of health communication, which emphasizes the active participation of individuals in understanding and managing their health. (Mulyani, 2024) This principle is also supported by theories in health communication, which state that individual empowerment through active involvement and empathy is the central pillar in changing healthy behavior. (Kushner & Mechanick, 2016).

The non-verbal dimension of health communication is also an essential factor that is often overlooked in formal approaches. In this study, mental health advocates employed gentle eye contact, supportive silence, and simple gestures, such as nods, as a form of communication that conveys acceptance. These actions create a much-needed safe space for adolescents to start opening up. This finding reinforces previous studies that state non-verbal communication is an integral part of effective therapeutic communication, especially in the context of adolescent mental health. (Suciati & Putri 2024).

Another strength of this health communication practice in counseling is its ability to adapt to the cultural and linguistic context of adolescents. It utilizes everyday language, local terms such as Sundanese expressions, and a casual communication style that fosters a sense of emotional closeness. Sentences such as "being emotionally exhausted is normal" not only convey psychological meaning, but also build social recognition that what adolescents feel is valid. This language adaptation is significant, given that adolescents often feel alienated by the technical or formal language used in conventional counseling services. In this context, health communication is more effective when managed in a culturally-sensitive manner, in line with recent literature emphasizing the critical role of cultural responsiveness in health equity and adolescent care (Kibakaya, E. C., & Oyeku, S. O., 2021)(Kibakaya & Oyeku, 2022); Lamasigi et al., 2021)

However, communication in adolescent counseling practice does not always go smoothly. The most prominent challenge is the emergence of resistance, whether in the form of silence, subtle rejection, embarrassment, or fear of opening up. Adolescents who have had negative experiences, such as being judged or misunderstood by teachers or other adults, tend to build protective walls. In this case, an empathic and non-coercive health communication approach is efficient. The activists in this study chose to be 'fully present' without verbal pressure, maintaining a supportive presence until the adolescent felt safe enough to start talking. Such a strategy aligns with the principles of reflective communication, which prioritize validation and accompaniment over encouragement to talk (Wecht et al., 2024).

One of the most transformative aspects of health communication practice identified in this study was the capacity of communication to serve as a healing medium. A simple affirmative sentence, such as "You are strong because you are still surviving," proved to be a profound emotional turning point for adolescents. It is not just verbal support, but a form of existential validation of the adolescent's emotional experience. This strengthens the argument that communication in a counseling context is not merely a tool, but a form of intervention itself. In many recent studies, this form of communication is referred to as healing dialogue, characterized by genuine affection, validation, and emotional connection. (Fitrianur et al., 2024; Schrooten & de Jong, 2017).

Another interesting finding was the recognition of communities as an effective medium for health communication. These communities, which lack the administrative or bureaucratic pressures of formal institutions, were found to be more accessible to adolescents. Community activists are present as friends, listeners, and facilitators, not as authorities or power holders. Communication within the community is more flexible, personalized, and emotionally friendly. This condition aligns with the findings of various studies that peer counseling and community-based approaches can reach vulnerable adolescent groups more effectively than formal services, which tend to be rigid and exclusive (Fanaqi et al., 2020; Pokharel, n.d.; Suseno & Said, 2023).

Finally, in the view of all informants, the ideal communication is patient, unhurried, and non-judgmental. This kind of communication allows adolescents to feel that they are not just "fixed" but actually "accompanied". This finding reinforces the urgency of integrating health communication approaches in all forms of adolescent psychosocial assistance services. Reflective and contextualized health communication not only conveys mental health messages but also creates emotional experiences that are healing and empowering.

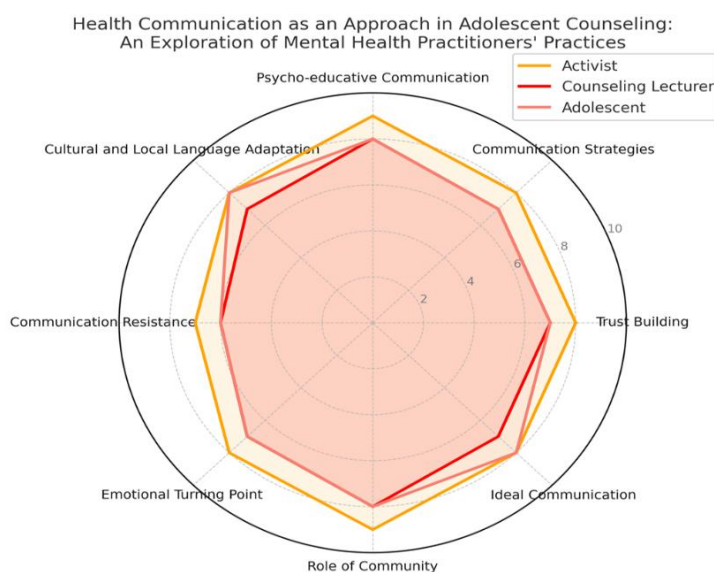
Table 1. Thematic Analysis and Findings

Theme	Mental Health Activist	Counseling lecturer	Teens	Summary of Findings
Trust Building	Build relationships through light conversations, such as discussing music or movies.	Relationships are built through dialogue, not just questions and answers.	Feeling safe when not asked directly, being chatted with casually.	Trust is built through informal engagement and two-way dialogue.
Communication Strategy	Humanistic, reflective approach, using body & emotion metaphors.	Emphasizes empathic, and reflective communication.	Nods, sitting on the same level, and simple sentences provide a sense of security.	Effective communication strategies incorporate reflection, empathy, and emotional closeness.
Health Communication (Psycho-educative)	Educate about body signals and emotions with down-to-earth language.	It is essential to give an understanding of stress and psychological signals.	Explanations such as 'emotional tank' and 'body signals' are helpful.	Psycho-educational explanations are adequate if they are presented in language relevant to current conditions.
Local Cultural and Language Context	Using Sundanese terms and slang to bring people closer together.	Local language strengthens emotional connections in counseling.	Language like 'it is normal for you to be emotionally exhausted' feels empowering.	Local languages and everyday expressions reinforce connectedness.
Challenges and Resistance	Silence, subtle rejection, or shyness that prevents opening up.	Adolescents are afraid of being judged, embarrassed, or withdrawn.	Fear of being judged, and uncomfortable if directly assessed by the teacher.	Resistance often arises due to fear and previous negative experiences.

Theme	Mental Health Activist	Counseling lecturer	Teens	Summary of Findings
Emotional Recovery and Turning Point	Affirmative sentences such as 'You are strong because you are still holding on'.	Engage the counselee in the direction of the conversation.	Feeling understood when the companion is silent but fully present.	Affirmative communication and full presence are key to recovery.
The Role of Community in Counseling	Community as an early recovery space, free from clinical pressure.	Community is a strategic entry point to mental health services.	Communities are closer and more flexible than formal services.	The community becomes an initial safe space that is inclusive and more welcoming.
Reflections and Perceptions on Ideal Communication	Communication should be fully present, reflective, and non-patronizing.	Communication frees adolescents to find their narrative.	Ideal communication is patient, unhurried, and non-judgmental.	Ideal communication, according to all parties, is reflective and non-authoritative.

To illustrate the interrelationships between the themes summarized in Table 1, this study presents them in the form of a conceptual model. The figure illustrates how health communication dynamics emerge in adolescent counseling practices, featuring eight key elements, ranging from trust-building strategies and communication approaches to psycho-educational methods and the use of cultural context and local language. In addition, the model also includes aspects of resistance, emotional turning points, the role of the community in the counseling process, as well as reflection on the ideal form of communication. All of these elements are interconnected and form an empathic, contextual, and deep interaction pattern in the relationship between counselors and adolescents.

Figure 1. Conceptual Model



CONCLUSION

This study shows that health communication is not only a tool in counseling adolescents, but also a warm and meaningful space for healing. Through a reflective, participatory, and

contextual approach, communication forms a more equal and empathic relationship between counselors and adolescents. From everyday language and non-verbal gestures to simple affirmative sentences, all play a role in building a sense of security and strengthening adolescents in the process.

This finding confirms that the presence of counselors or activists is not just to listen, but also to assist with empathy. Communication that is done consciously and humanely opens a space of connection, even becoming an emotional turning point for some adolescents.

As an implication, it is essential for counselors, both in education and the community, to develop communication skills that are not only informative but also address the emotional aspects. Effective counseling does not always begin with theory, but with the courage to be present with an open heart.

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