

Non-Pharmacological Cooking Therapy: An Idea for Recovering the Mental Health of Adolescents as Disaster Victims of Mount Merapi Natural Eruption in Yogyakarta (Indonesia)

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Abstract

Here discussed is the relevance of non-pharmacological therapy, especially cooking therapy, in supporting the mental health recovery of adolescent disaster victims, especially those affected by the natural eruption of Mount Merapi in Yogyakarta, Indonesia.

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In response to the article entitled “*Music as a Non-Pharmacological Therapy Used in Disaster Mental Health and Psychosocial Support: An Idea for Disaster Medicine in Indonesia*,”¹ the topic is very interesting and relevant to what happened in Indonesia. Disaster is natural and can affect individuals and society, especially their mental health.² In the case of the Merapi eruption in Yogyakarta in March 2023, it is very important to consider non-pharmacological therapy as a means to support the recovery of healthy souls of youth as victims.^{3,4} This is because the eruption of Mount Merapi causes the formation of various poisons, possibly adversely affecting the environment that influences the mental development of children living in the area.⁵ Furthermore, some studies highlight the importance of the toughness of the public to recover post-disaster.⁶

One non-pharmacological therapy that received attention over several years is cooking therapy, which involves the use of food and technique cooking to increase well-being.⁷ Cooking therapy offer a holistic approach to the recovery of mental health because they handle physical, psychological, and social aspects from the well-being of an individual.⁸ Interventions that include cooking have proven in a manner to positively affect participants’ mental health, such as increased socialization, well-being, quality of life, and happiness.⁹ Besides that, cooking therapy give a chance for socialization and fellowship around the table, which can help build resilience in affected communities to the impacts of natural disaster, such as Merapi.¹⁰

Using this intervention in a rehabilitation program-based community can be very useful for individuals with mental illness, who possibly do not have enough ability to express themselves and experience difficulty in interacting and engaging in connection with other people.^{11,12} Founded cooking class as a rehabilitation program post-disaster for social cohesion is a new method to get help to recovery-affected adolescents impacted by natural disaster.¹³ Post-disaster, non-mental health specialist and social network support can train to give service or social support to affected individuals that were impacted.¹⁴ This highlights the potency of cooking therapy as a useful and practical strategy for the recovery of mental health, particularly in affected communities that are impacted by a natural disaster, such as Merapi.¹⁵

The study has shown that training seminar can increase literacy in internal mental health preparation to face disasters, and professional mental health can play an important role in strengthening the source power community with helping the member community understand and implement effective coping strategies.^{16,17} Ensuring that public members have access to services and interventions for quality of mental health is very important for pushing resilience and facilitation of recovery after a disaster.¹⁸

Cooking therapy is presenting a promising path for recovery of the mental health of young as disaster victims of natural disasters, such as the eruption of Mount Merapi in

Yogyakarta.¹⁹ This is very relevant because the study has shown that the negative impact of disasters naturally on mental health can become significant, with factors such as loss of community and disorder structure contributing to enhancement risk problems in mental health.^{20,21} Besides that, applying non-pharmacological

interventions like cooking therapy can become a method of economical cost for promoting mental health, and research shows that overcoming problems can produce high economy profit, not only reducing morbidity.^{22,23}

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