THE 4th INTERNATIONAL CONFERENCE ON HEALTH POLYTECHNICS OF SURABAYA (ICOHPS)

1st International Conference of Nursing and Public Health Science (ICoNPHS)

FAMILY SUPPORT IN CARING FOR PEOPLE WITH MENTAL DISORDERS AT THE MENTENG HEALTH CENTER PALANGKA RAYA CITY

Maria Magdalena Purba.¹, Irene Febriani.²

¹ Jurusan keperawatan Poltekkes Kemenkes Palangka Raya (mariapurba45@gmail.com)
² Jurusan Kebidanan Poltekkes Kemenkes Palangka Raya

ABSTRACT

The prevalence of household incidence with schizophrenia/psychosis mental disorders in Palangka Raya City based on the results of the 2018 Reskesdas reached 2.9 per mile, while the results of a preliminary survey at the Menteng Health Center in Palangka Raya City, in 2019 data on patients with mental disorders There were 87 people with mental disorders (ODGJ) who came to visit, and most of the ODGJ did not visit or check themselves regularly. Family support in the care and treatment of ODGJ is very important in healing clients with mental disorders.

The purpose of this study was to determine emotional support, instrumental support or physical support, and family knowledge support in caring for family members with mental disorders (ODGJ) in the working area of the Menteng Public Health Center, Palangka Raya City, through a descriptive method with a sample of 52 people.

The results showed that the family's emotional support in caring for ODGJ was always in the 94.2% category, the instrumental/physical support in the 94.2% category, and the knowledge support in the 100% always category.

The study concludes that emotional support, instrumental support, and knowledge support are very important for clients with mental disorders so that the healing process becomes better.

Keywords: support, emotional, instrumental, knowledge, family, ODGJ

INTRODUCTION

The phenomenon of mental disorders is currently experiencing a significant increase and is increasing every year in various parts of the world, around 450 million people in the world experience mental disorders. There are at least one in four people in the world who experience mental problems and mental health problems. Mental disorders that exist throughout the world have become a very serious problem. Health and Behavior Advisor from the WHO Southeast Asia region (WHOSEARO), found that although mental disorders are not the main cause of death, they are the main cause of disability in the productive age group (WHO, 2017). Meanwhile, the results of Riskesdas in 2018 Indonesia experienced an increase in the number of people with mental disorders, where the prevalence of severe mental disorders reached 7.0 per mile. The highest prevalence of psychosis was in the province of Bali (11.0 per mile). While the lowest was in the province of Riau Islands (3.0 per mile), while the survey results of households with schizophrenia/psychosis mental disorders in the city of Palangka Raya reached 2.91 per mile, this indicates that people with mental disorders in the city of Palangka Raya is still quite high.

Profile of the city of Palangka Raya in 2018, health services for ODGJ Severe reached the target of 319 people, and 300 people (94.04%) received health services according to standards, the target data is still not by the mandate of PMK Number 4 of 2019 concerning technician standards for fulfilling service quality based on minimum service standards (SPM) in the health sector where it is stated that every ODGJ is required to receive health services according to standards (100%) (Menkes RI, 2019), This is also reinforced by Law Number 18 of 2014 concerning mental health, which ensures that everyone can achieve a good quality of life, and provide integrated, comprehensive and sustainable health services through promotive, preventive, curative and rehabilitative efforts (UU RI, 2014)). So as not to cause social impacts in the form of rejection, exclusion, and discrimination. In addition, it can have an impact on the economy in the form of loss of productive days to earn a living for sufferers and their families. Families who care for people with mental disorders must be able to have positive coping with stress, the burden experienced. So that family support can have an effect on health and well-being which serves to reduce mortality and recovery, improve cognitive function, physical, and emotional health. Family support has a positive influence on the healing of people with mental disorders.

The results of the preliminary survey obtained data from ODGJ patients who visited the Menteng Public Health Center area as many as 87 people, and most of the ODGJs did not make visits or check themselves regularly according to the set time. Family support in the care and treatment of ODGJ is very important in healing clients with mental disorders. Based on this phenomenon, researchers are interested in researching the Analysis of Family Support Caring for ODGJ Patients in the Work Area of Menteng Public Health Center in Palangka Raya City.

METHODS

This research is descriptive research, namely research that describes a phenomenon, or events as they are. The research location is in the working area of Menteng Public Health Center, Palangka Raya City. The study was carried out in February-March 2020. Sampling in this study was carried out with a purposive sample with a sample of 52 people, with inclusion criteria being families who care for people with mental disorders, are involved in treating ODGJ patients, and live in one house, age 17 years, cooperative and willing to be a respondent. Data collection in this study was conducted through a family support questionnaire that was measured using a Likert scale which includes emotional support, instrumental support, and information/knowledge support, which have been tested for validity and reliability.

RESULTS

Based on the results of research conducted at the Menteng Palangka Raya Health Center in 2020, using primary data using a questionnaire, it can be processed and displayed in the form of a frequency distribution. The results of the study on the description of family support in caring for people with mental disorders at the Menteng Health Center, Palangka Raya City can be seen in the following table.

a. Characteristics of Respondents

Characteristics of respondents who treat patients with mental disorders (ODGJ) in the working area of Menteng Health Center are mostly male as many as 27 people (51.90%). Judging from the age, most of them were 46 - 55 years old as many as 15 people (28.80%), high school education equivalent as many as 22 people (42.30%), private jobs as many as 21 people (40.40%), married status as many as 32 people (61.50%) and the relationship with patients mostly father/mother and biological children is 14 people (26.93%), as described in table 1 below Table 1: Frequency Distribution of Characteristics of Respondents Caring for Patients with Mental Disorders (ODGJ) in the Work Area of Menteng Health Center, Palangka Raya City

Characteristics 0f Respondents	Amount(n)	Presentation (%)
Gender		
Female	25	48.10%
Male	27	51.90%
Age		
17 - 25	2	3,84%
26 - 35	10	19,23%
36 - 45	10	19,23%
46 - 55	15	28,80%
56 - 65	11	21,20%
>65	4	7,70%
Education		
Elementary school	10	19,20%
Junior high school	3	5,80%
High school	22	42,30%
University	17	32,70%
Occupation		
Civil servants	14	26,90%
Private employee	21	40,40%
Laborer	4	7,70%
Housewife	2	3,80%
Unemployed	11	21,20%
Marital Status		
Not married/ single	9	17,30%
Married	32	61,50%
Widower/widow	11	21,20%

THE 4th INTERNATIONAL CONFERENCE ON HEALTH POLYTECHNICS OF SURABAYA (ICOHPS)

1st International Conference of Nursing and Public Health Science (ICoNPHS)

Relationship with patient		
Husband/wife	13	25,00%
Mother/father	14	26,93%
Biological children	14	26,93%
Siblings	10	19,23%
Grandchild	1	1,91%
Total	52	100.00%

b. Description of Respondents' Family Support

The results of the distribution of family support in caring for patients with mental disorders (ODGJ) in the work area of the Menteng Health Center, Palangka Raya City are explained in table 2 below.

Table 2: Frequency Distribution of Respondents' Family Support in Caring for Patients with Mental Disorders (ODGJ) in the Work Area of Menteng Public Health Center, Palangka Raya City

Family Support	Amount (n)	Presentation (%)
Emotional Support		
Often	3	5,8%
Always	49	94,2%
Instrumental/Physical Support		
Often	3	5,8%
Always	49	94,2%
Knowledge Support		
Always	52	100%
Total	52	100,0%

DISCUSSION

a. Description of Respondents Characteristics

Based on table 1, the frequency distribution of the characteristics of respondents who treat patients with mental disorders (ODGJ) in the working area of the Menteng Public Health Center, Palangka Raya city, it is found that male outnumbers female. This is in line with the theory which says that men have the nature of responsibility and are ready to face situations that relate to themselves and others around them. Men have wider problem-solving abilities than women, using more effective coping strategies. But in providing support for treating mental patients, women are more patient and painstaking. (Ririn, 2017).

Women also have a larger social network to other sources that provide information support, while men have less formal access, men's names are responsible and capable of making decisions in the family.

The frequency distribution of respondents' characteristics by age, which is mostly in the age range of 46-55 years, is 28.80%. The results of this study indicate that the age of the family is in the phase of family development reaching the generativity phase, which aims to care for and guide others, can be in the form of desired expectations in family life and efforts to leave their legacy to the next generation. (Friedman, 2013). The distribution of knowledge distribution analyzed based on the most recent education is high school education as much as 42.30%. This shows that the higher a person's education, the easier it is to receive information, which is what they have increased. The level of education of a person to have broader knowledge, abilities, and skills. Individuals who are reasonably expected to have a good level of education can know and be aware of making decisions and behavior following appropriate values or norms. The higher a person's education, the easier it is to receive information, and finally the more knowledge (Notoatmodjo, 2015). The level of education of a person to have broader knowledge, as well as abilities, and skills. And with a fairly good level of education, a person is expected to know and be aware of making decisions and behavior by values or norms. The frequency distribution based on occupation, based on the analysis shows most or 40,40% are working in the private sector. This affects the support of socio-economic factors, namely the higher a person's economic level is usually more responsive to the symptoms of the disease felt. So he will immediately seek help when he feels there is a problem with his health. This is in line with what was stated The level of education of a person to have broader knowledge, as well as abilities, and skills. And with a fairly good level of education, a person is expected to know and be aware of making decisions and behavior following values or norms. The frequency distribution based on occupation, based on the analysis shows most or 40,40% are working in the private sector. This affects the support of socio-economic factors, namely the higher a person's

economic level is usually more responsive to the symptoms of the disease felt. So he will immediately seek help when he feels there is a problem with his health. This is in line with what was stated (Rohana, 2016). that a person's low income can affect information about his health status and limited costs to reach health facilities in the media or health service centers. Humans are social creatures, which means humans need other people and their social environment as a means to socialize. Someone who has a good income will get good facilities too. (Rohana, 2016).

The frequency distribution based on the relationship with the client is father/mother (parents) and biological children of 26.93%. The role of parents is very important for family care at home. Parents have their respective roles, a father as a family leader, breadwinner, protector, and giver of security for his family. Mothers as caretakers, caregivers, child educators, protectors, and also as additional breadwinners. Friends found that motherhood has a fairly close emotional relationship in the family, this is also internal family support such as support from father or mother, husband or wife, as well as support from biological family or external family support. (Friedman, 2013).

b. Family Support Overview

The distribution of the frequency of family support caring for patients with mental disorders (ODGJ) in the work area of the Menteng Health Center, Palangka Raya City, in table 2, the results show that emotional support with categories is always 94.20%. This agrees with what Friendman stated that emotional support is support to provide a feeling of comfort, a feeling of being loved in the form of enthusiasm, and a sense of empathy. (Friedman, 2013). Empathy itself is the ability to feel the emotional state of another person, feel sympathetic, and try to help solve problems. Emotional support from family can help sick patients feel that their family accepts their situation and will continue to support and be by their side. The results of this study also agree with the research of Nirwan et al who found that the ability to care for patients and interpersonal factors had a significant influence on family support, the family felt the benefits of the family support provided, the better the perceived benefits, the better the support provided by the family. in caring for family members with mental disorders. (Nirwan, 2016). However, the results of this study do not agree with research conducted by Nasriati (2017) which suggests that stigma and family support in caring for family members with mental disorders are still low. caring for family members with mental disorders is still low. (Ririn, 2017). Family support is a very influential factor in the care of sick family members. Support from emotional families can help patients with mental disorders who feel more cared for so that patients can accept their situation, and continue to support treatment and their families.

The distribution of the frequency of family support caring for patients with mental disorders (ODGJ) in the work area of the Menteng Public Health Center, Palangka Raya City for instrumental/physical support in the always/high category, the result is 94.20%. Instrumental support is support where the family is expected to be able to facilitate all the needs of family members, be it bio, psycho, social, and spiritual needs. One form of family love for family members is as the main support system to help someone improve their quality of life. (Friedman, 2013). Friedman in 2013 stated that the components that need to be fulfilled by families to fulfill economic functions are related to meeting family needs such as clothing, food, shelter, and how to obtain resources to improve health status. The results of the study agree with Damanik's research in 2019 in Kutowinangun District about family attitudes and support for family members with mental disorders, the main thing being that family support is good (61.3%) (Damanik, 2019). Good family support can contribute to family members who are sick and provide good health service facilities. The high instrumental support in the results of this study shows that family members are ready to provide help and assistance to family members who are sick. The results of family support based on information or knowledge from the results of this study indicate the high category / always as much as (100.00%). These results indicate that families know how to care for family members with mental disorders. This result agrees with what Yohono 2017 stated that the family is an educator for other family members in carrying out independent care. (Yuhono, 2017). The same opinion was also expressed by Rahmayani & Hanum 2018 that knowledge or information in the family has an important role to increase family support in caring for family members who experience mental health disorders. (Rahmayani & Hanum, 2018). The results of this study also agree with Yunindra's 2018 research which suggests that all family support is in a good category (Yunindra, 2018).

THE 4th INTERNATIONAL CONFERENCE ON HEALTH POLYTECHNICS OF SURABAYA (ICOHPS)

1st International Conference of Nursing and Public Health Science (ICoNPHS)

CONCLUSION

Based on research on the description of family support caring for patients with mental disorders (ODGJ) in the working area of the Menteng Health Center, Palangka Raya City, it can be said as follows:

Characteristics in family support caring for people with mental disorders (ODGJ) show the results that the male gender is greater than the female gender. Characteristics of respondents in age family support caring for patients with mental disorders are more in the age range of 46-55 years, Characteristics of education and occupation of respondents who care for patients with mental disorders who have more high school education while for jobs that are more likely to work in the private sector, Characteristics of respondents based on marital status, the average married, the characteristics of the respondent's relationship with patients with mental disorders are the relationship between father/mother and siblings. The description of family support caring for patients with mental disorders (ODGJ) in the work area of the Menteng Health Center, Palangka Raya city shows results in the category always for emotional support and instrumental support. Meanwhile, for information support or knowledge of families who care for patients with mental disorders, the category is high/always. These results indicate that families know how to care for family members with mental disorders. However, it is necessary to increase emotional support, instrumental support for family members who experience mental disorders in the process of treatment and healing.

REFERENCES

Damanik, P. H. (2019). Hubungan Pengetahuan dan Sikap dengan Peran Serta Keluarga dalam Merawat Pasien Halusinasi di Poliklinik Jiwa RSJ Medan. 2019: Poltekkes Kemenkes Medan.

Friedman. (2013). Keperawatan Keluarga. Yogyakarta: Gosyen Publishing.

Menkes RI. (2019). Permenkes RI Nomor 4 Tahun 2019 tentang Standar Teknis Pemenuhan Pelayanan Dasar pada Standa Pelayanan Minimal Bidang Kesehatan. Jakarta.

Nirwan, T. T. (2016). Dukungan Keluarga dalam Perawatan Pasien Gangguan Jiwa Dengan Pendekatan Health Promotion Model. *Jurnal Dukungan Keluarga*.

Notoatmodjo. (2015). Promosi Kesehatan Dan Perilaku Kesehatan. Jakarta: Rineka Cipta.

Rahmayani, & Hanum, F. (2018). Analisis Dukungan Sosial keluarga Terhadap Pencegahan Kekambuhan Ganguan Jiwa Di Wilayan Kerja Puskesmas Sukajaya. *SEL Jurnal Penelitian Kesehatan*.

Ririn, N. (2017). Jurnal Stigma dan Dukungan Keluarga Dalam Merawat Orang Dengan Gangguan Jiwa (ODGJ). Jakarta.

Rohana, F. z. (2016). Hubungan Dukungan Instrumental dengan Beban Anggota Keluarga Skizofrenia di Poli Klinik Keperawatan Jiwa RSJ GRHASIA Provinsi DIY. Yogyakarta: Universitas Muhammadiyah Yogyakarta.

UU RI. (2014). Undang-Undang Nomor 18 Tahun 2014 tentang Kesehatan Jiwa. Jakarta.

WHO. (2017). State of health inequality: Indonesia, Geneva: World Health. Geneva.

Yuhono, P. (2017). Gambaran Peran Keluarga dalam Merawat Lansia dengan Ketergantungan Di Desa Pabelan. Yogyakarta: Universitas Muhammadiyah Yogyakarta.

Yunindra, C. (2018). *Gambaran Dukungan Keluarga Kepada Penderita Skrizofrenia di RSJD Dr. Soedjarwadi Kalten Jawa Tengah.* Surakarta: Universitas Muhammadiyah Surakarta.

Wakhid, Irfanuddin (2017). Sikap Dan Dukungan Keluarga Terhadap Anggota Keluarga Yang Mengalami Gangguan Jiwa Di Kecamatan Kutowinangun