



Family Experience Caring for Patients with Mental Disorders in Nabire Regency

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ABSTRACT

The purpose of the study was to find out the experience of families caring for clients with mental disorders. This type of research is qualitative phenomenological design. A sample of 6 informants was taken by purposive sampling technique. The results of this study found that the families of clients with mental disorders received stigma from society, they faced financial burdens that affected their daily needs. In addition, they experience physical and mental work fatigue. They are sometimes emotional, bored, hopeless and disappointed. Seeking treatment in addition to medical they also treat spiritually.

INTRODUCTION

Based on Riskesdas 2018 data, data on cases of people with severe PWMD mental disorders is 1.8 per 1000 population or 429,332 severe PWMD. The target for mental health services for severe PWMD by 2024 is 100% according to the Minimum Service Standards in the health sector. Severe PWMD was 31.5% of the number of sufferers, while Persons with Mental Disorders (PWMD) who regularly took medication were only 48.9%. Alcoholic beverage consumers are 3.3% of the Indonesian population aged ≥ 10 years. Data on depression at the age of ≥ 15 years is 6.1 per 100,000 population, while mental emotional disorders are 9.8 per 100,000 population (Ministry of Health of the Republic of Indonesia, 2018).

An estimated 450 million people worldwide suffer from mental, neurological, and substance abuse disorders; these figures account for 14% of the global burden of disease. About 154 million of them suffer from depression. Nationally, the prevalence of depression in Indonesia in 2023 is 1.4%. The highest prevalence of depression is in the group of young people (15-24 years old), which is 2%. The high proportion of depression in the youth group, namely the population who at the time of the 2023 SKI is 15-24 years old or known as generation Z or the strawberry generation, requires attention. Some of the determinants associated with depression are gender, educational status, employment status, economic status, and residence. In addition to characteristics, it is also assessed that the proportion of young people who in the last 1 month have thoughts of ending life and a history of young people with depression who seek treatment. The proportion of young people with depressive disorders who have thought about ending their lives in the last 1 month obtained in the 2023 SKI is very high, which is 36 times greater than those who are not depressed who have ever thought about ending their lives. Although the prevalence of depression in Generation Z is the highest, this group is the least in accessing treatment (Ministry of Health, 2023).

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Promotive and preventive efforts for mental health are currently prioritized through a life cycle approach starting from pre-marriage and conception to the approach during the growth and development period of adolescents so it is very important to identify risk factors for mental problems, explicit prevention, and improve the consequences of mental health difficulties and vulnerabilities from an early age, which is expected to prevent morbidity and mortality due to mental disorders. The Organizational Structure and Administration of the Ministry of Health stipulates that one of the functions of the Directorate of Mental Health of the Ministry of Health is to carry out the function of preparing norms, standards, procedures, and criteria in an effort to prevent and control mental health problems of children and adolescents, adult and elderly mental health, and drug abuse (Ministry of Health, 2020).

Nabire Regency Has 32 Public Health Centers and 1 Regional General Hospital There are already health services specifically for treating mental disorders and those who have carried out Mental Health services and there are PWMD clients as many as 26 Puskesmas. The Nabire Regency Health Office and 26 Puskesmas have conducted and carried out home visits and monitoring of taking medication to PWMD clients mental health tracking in the work area of the health center and the implementation of mental health screening in the work area of the health center such as schools, workplaces, dormitories, etc. Nabire Regency in 2022 to 2024 experienced fluctuations with severe diagnoses, moderate, and low, namely the diagnosis of F20 (schizophrenia) is severe, F23 (acute psychotic disorder) is moderate and the diagnosis of F32-F98 (depressive disorder & stress-related disorder) is mild. Number of PWMD. In 2022 based on quarterly health center reports and tracking and monitoring of taking drugs directly to PWMD clients amounted to 139. In 2023, based on quarterly health center reports, there are 149 clients with a diagnosis of F20 (schizophrenia) in 132 clients F32 (depressive disorder) of 1 client and F40 (stress-related disorder) of 13 clients and 1 client of death. In 2024, based on the quarterly health center report, there will be 171 clients with a diagnosis of F20 (schizophrenia), 137 clients and F23 (acute psychotic disorder), 1 client and F32 (depressive disorder), 5 clients F40-F90 (stress-related disorder & emotional behavioral disorder), 22 clients and F70-F79 Mental Retardation (RM), 2 clients and suicide attempt, 1 client and 2 clients died, (Nabire Health Office, 2024).

The family has a very important role in efforts to improve health and reduce the risk of disease in society because the family is the smallest unit in society. If there is a problem, one family member will become a family unit because there is a strong relationship between the family and the status of its family members. The role of the family is very important in every aspect of the health care of its family members, for that, the family plays a role in determining the way of care that is treated by the family. The health and sick status of family members and families affect each other, (Kadek & Yohanes, 2018).

Family support is needed by patients with mental disorders. They need the full support of the family, because the family is the most appropriate place for people with mental disorders, learning to interact. Good family support will help speed up the recovery process and can prevent recurrence. If people with

mental disorders have a recurrence, this will aggravate the disease and the possibility of recovery becomes more difficult (Ekayanti, 2021).

Based on the results of Muttar's research, in 2011 there was a relationship between family support and the recovery rate of hallucinatory clients, it is necessary to realize that the role of family is very important in efforts to cure people with hallucinations. The results of a study conducted by Emi, in 2013 on the experience of families in preventing the recurrence of hallucinations in post-hospital patients. From the results of the study, it was found that participants stated that non-compliance with taking medication such as stopping medication, taking medication irregularly, and lowering the dose of medication can trigger the recurrence of the patient's hallucinations (Melyanti, 2020).

LITERATURE REVIEW

Research conducted by Kadek and Yohanes shows that the family has a very important role in efforts to improve health and reduce the risk of disease in society because the family is the smallest unit in society. If problems occur in the family such as someone experiencing a mental disorder, the recovery of the person with a mental disorder is very dependent on the role of the family, there is a strong relationship between the family and the status of their family members. The role of the family is very important in every aspect of the health of its family members, for this reason, the family plays a role in determining the way of care that is treated by the family. The health and sick status of family members and families affect each other (Kadek & John, 2018).

Research conducted by Melyanti on family experiences in caring for family members with mental disorders also shows that families feel disappointed, embarrassed, and hopeless. Families feel disturbed, there are limitations in social activities, work, and hobbies, financial difficulties, and negative impacts on the family's physical health, including the socio-economic burden of the family. In addition, feelings of loss, anxiety, sadness, and shame towards the surrounding community, the stress of facing behavioral disorders, and frustration due to changes in interaction patterns in the family (Melyanti, 2020).

The results of Muttar's research, in 2011 also found that the role of the family is related to hallucinatory healing and according to Muttar, the role of the family is very important in the effort to heal people with hallucinations (Melyanti, 2020).

Frame of Mind

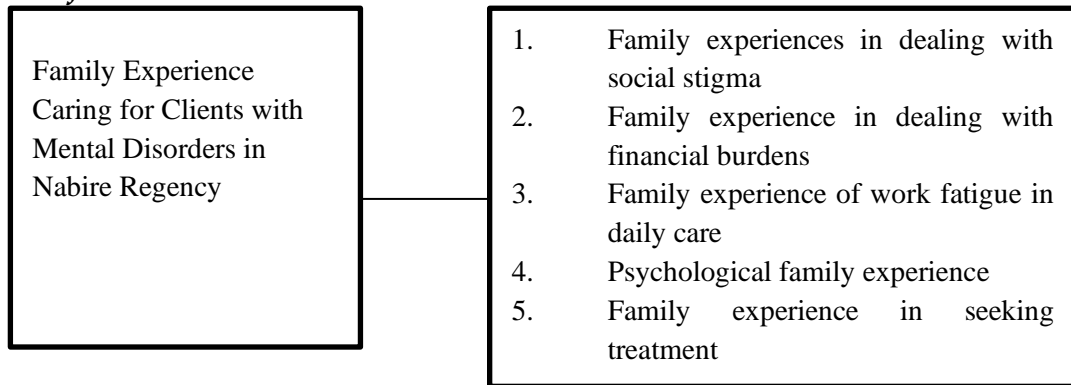


Figure 1. Conceptual Framework

METHODOLOGY

The type of research used in this study is qualitative with a phenomenological approach. Informants as many as 9 people were taken by Purposive sampling technique. The sample criteria are families who care for clients with severe mental disorders, families who care for clients with moderate mental disorders, families who care for clients with mild mental disorders and those in charge of mental health / Health Workers.

In this study, the researcher used an in-depth interview technique by using open-ended and semi-structured questions in the data collection process. This research, in addition to using informed consent, has also received ethical approval from the Faculty of Public Health with number 045/KEPK-FKM UC/2025

RESEARCH RESULTS

The results of interviews with 9 informants found that all families of people with mental disorders (PWMD) received stigma from the community at different levels and depending on the severity of the mental disorder. Sometimes the community attacks because they are upset with the actions of PWMD that damage and disturb the community.

" ...Just look at our house, it's been destroyed, the lights are all broken, our belongings are destroyed, we go to live in the back boarding house to be safe, because it's very difficult, we can't take care of him. People have also hit him because it hurts, I can't do anything either."(I¹).

"...The neighbor who was next to that began to be a bit worried about his om because from there he started to get sick and continued to be angry and wanted to make a fuss in the complex here."(I³).

Meanwhile, the family's experience in dealing with the financial burden as a result of interviews with PWMD families is known that it generally states that every income obtained will affect daily needs. To get mental health services also requires a lot of money.

"...we eat as it is, even if only plain rice is important to be able to eat" (Informant 1).

"...It is very difficult to meet the daily needs of making money, it is difficult to add to the fluctuating price of basic necessities" (Informant 1).

".....The drugs that are bought are expensive if every month they are bought at a price of hundreds, sometimes not only one type of drug there are two or three drugs, the government does not help to pay for referring our patients independently. Sometimes the health center and health office only provide additional food for clients" (Informant 1).

The results of the interview about the family's experience of work fatigue in the treatment of PWMD clients in general they felt physically tired and felt that the challenge was heavy, but the family resigned and prayed that the PWMD client would be healed.

"The challenge is heavy, even physical and energy" (Informant 1)

"pray that God will continue to give you the ability to take care of clients" (Informant 3).

The family's psychological experience also revealed that during the treatment of the family that PWMD often makes, they are afraid of their behavior, bored during the treatment and disappointed with the changes in their health.

"We family like to be afraid that he will go berserk because all the things are destroyed, my mother is beaten, insulted and spat out" (Informant 1)

"We are afraid that if he chases the woman and will beat or kill him" (Informant 2)

"It's mentally disturbing because of the way it works." (Informant 5)

The results of research on the family's experience in seeking treatment revealed that they have done various ways, not only medically but also non-medically, namely spiritually.

"When the patient's behavior changed, our family immediately took a referral to the Abepura Jayapura Psychiatric Hospital, so that they could get drinking medication and continue to this day" (Informant 6)

"We also often go with ruqyah, in the hope that we can quickly regain consciousness, and recover" (Informant 1).

DISCUSSION

In general, PWMD patients get stigma from the social environment, it is characterized by the attitude and behavior of neighbors who often reject and exclude. Some are afraid, some curse, angry and some come to hit PWMD patients. According to Inoue in Dafrosa that the attitude of the community is due

to the lack of public understanding of mental disorders and the negative stigma attached to them (Dafrosa et al, 2024).

The family said that there are a lot of social stigmas, ranging from scolding the family with harsh words, threatening to kill the client, committing violence to the client, being shunned from the community because of fear of the client indirectly making the family feel destroyed and sad but the family cannot do anything because they realize that the client at the time of relapse makes the community uneasy.

Social stigmatization can affect the quality of life and psychological well-being of families caring for individuals with mental disorders (Subu et al, 2023).

The family's needs can still be overcome despite the shortage, six families said the needs of food and drink can be met even in a difficult economy and the price of basic necessities that go up and down, they can also take from garden products and search in the sea, some can be sold and some can be consumed daily. The economic function of the family in meeting all the needs of family members, including the health needs of family members.

Meanwhile, the function of health services is a function of the family in maintaining the health status of sick family members to health services to check their health (Sanchaya et al., 2018). Necessities such as eating and drinking are highly dependent on income from the family, although only the daily needs of the family are satisfied with what they have and can still eat and drink.

Four families revealed the high cost of reaching mental health services where they experienced difficulties by having to buy drugs that were not available at the health center. And when referring or taking to the Abepura Mental Hospital in Jayapura City, the client must bring a different province with a distance of one day and one night in the ocean.

Six families earn income by selling gardening and fishing which are used to meet their daily needs. Meanwhile, two families earn income every month as civil servants (PNS). A person's economic status will determine the availability of a facility that is necessary for certain activities (Oktaviana & Ratnawati, 2022). The factor that affects family needs is economic factors, usually he will respond more quickly to the symptoms of the disease he feels. So he will seek immediate help when he feels that there is a disturbance in his health.

The family said they were exhausted, bored and bored while caring for clients. Because they face clients who are sometimes good and sometimes relapse. Not every day do activities outside the home, have to search, garden, and sell in the market, in order to meet daily needs and other needs at home. Sometimes when I go home, I have to see clients with a messy house, not having to clean the client and change clothes, feed. The family said that everything every day is going through a lot, but no matter what the condition is, we still love and love them even though sometimes we are angry while caring on the other hand, we are not firm and even our hearts are broken to see conditions that never change and not heal, even though many things are done ranging from medical treatment to bringing to be prayed by prayers such as ruqyah (Islam) and recovery prayer (Christianity) so that they can quickly recover from their illness. So that the family has accepted with open arms the client's situation with the destiny that

everything the family experiences is good and a blessing, if not they who will take care of the client. The family said the challenges were heavy, even physical and exhausted because they had to treat clients with mental disorders.

Families feel the burden of caring for clients with mental disorders as a psychological burden, the psychological burden is expressed by the informant in the form of disappointment with the client's behavior, fear of the client's behavior and difficulty in being managed, thus causing anxiety for the family. Anxiety is an experience of views and feelings about factors or events that trigger stress, and anxiety is part of a person's life (Iklima et al., 2023).

Anarta et al., 2022 that the anxiety experienced by adolescents is caused by a way of thinking, lack of focus of attention. In overcoming social anxiety, adolescents do it is relaxation, ask for advice from parents and peers, and rely on themselves and trust in God (Yudianfi, 2022). The psychological response experienced by families in treating clients with hallucinogenic behaviors is feelings of loss, sadness, anxiety, and shame in social situations. Meanwhile, the burden of experience and views and feelings is a burden related to family problems and experiences including disruption of relationships between family members, limitations in social relationships and work activities, financial difficulties and negative impacts on the physical and mental health of family members who are chaotic due to caring for clients (Amin et al., 2017).

According to the researcher in this study, the psychological burden is felt by all informants, because many problems faced by informants while treating clients with mental disorders occur because of different client behaviors when experiencing relapse so that the mentality of the family who treats is chaotic because they have to take care of clients with mental disorders.

The family once sought treatment at the general practitioner's practice to get medicine because they hoped that the medicine they got could calm the client. Based on the access and facilities obtained during the service. Access to health services that is considered difficult for individuals and the burden of costs that must be incurred if they do not have health insurance. Two families revealed that they had taken clients to a mental hospital to do examinations and get medicine. Hoping that taking medication regularly can cure the client's illness as well as totally but that hope makes the family desperate for medical treatment. Access to health services is a little difficult or obstacle, they have difficulty in terms of payment (Dako - Gyeke, M & Adu, 2017)

People with Mental Disorders often get stigma in society, (labeling, stereotypes, exclusion, discrimination) so that it complicates their recovery process and their well-being. The stigma given by society is that people with mental disorders are different and exclude them. As a result of this stigma, people with mental disorders bear health and socio-cultural consequences, such as: imoptimal handling, drop-out of drug use, incarceration, and different understandings of mental disorders(Herdiyanto et al., 2017).

CONCLUSION

1. All families of people with mental disorders (PWMD) get stigma from the community

2. Every income earned affects daily needs. To get mental health services also requires a lot of money.
3. The families of PWMD patients felt physically tired and felt the challenge was heavy, but the family resigned and prayed that PWMD clients would be healed.
4. Psychologically, families who treat patients with PWMD feel stressed, afraid of their behavior, bored during treatment and disappointed with their health changes.
5. The family of PWMD patients admitted that they had done various ways, not only medically but also non-medically, namely spiritually

RECOMMENDATION

1. The approach and by of the family is very important
2. Improving knowledge and skills for anyone conducting research, especially in qualitative research

FURTHER STUDY

It is suggested that there be further research on how the health impact of pregnant women of the Kamoro tribe, considering the results of this study found that their physical activity during pregnancy remained the same when they were not pregnant, plus their belief not to consume sand fish, rice and more often treat diseases during pregnancy by drinking prayer water from shamans.

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Untuk penetapan kebijakan strategis (RPJMN, Renstra) dan perencanaan program diperlukan data status kesehatan dan determinannya yang diukur di masyarakat. Untuk melihat trend keberhasilan pembangunan kesehatan dibutuhkan Riskesdas secara serial 5 tahunan. Riskesdas banyak dipakai sebagai bahan penyusunan kebijakan baik oleh Kemenkes, Bappenas, TNP2K, dan K/L Lainnya, termasuk Pemerintah Daerah. Riskesdas juga dipergunakan untuk melihat perkembangan IPKM 2.
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