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Community Attitudes Towards People with Mental Disorders (ODGJ) in terms of information sources and experiences of meeting ODGJ in RW 9 Kelurahan Tanggung, Blitar City



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Abstract

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Negative knowledge and experience of people with mental disorder (ODGJ) tend to form negative attitude. Many residents still discriminate, such as social isolation. This research aimed to determine people's attitude towards ODGJ in terms of meeting experienced and the sources of information they get. This

research was observational analytic with cross sectional approach. The population of this research was all households in RW 9 Kelurahan Tanggung Blitar City of 199 households, with a sample size of 120 households taken by purposive sampling technique. Attitude data were collected using the Community Attitudes toward Mentally III (CAMI III) questionnaire and analyzed using the Spearman rho correlation test. The results of the analysis showed that attitudes of towards ODGJ in terms of sources of information they have obtained with p value 0,890, and attitudes of households with experience meeting ODGJ with p value 0,470, p value > 0.05 which meant that there was no correlation between attitudes and information sources experience meeting ODGJ in RW 9 Kelurahan Tanggung Blitar City. Based on these results, it is necessary to carry out promotional activities in mental health services to form a positive attitude towards people with ODGJ.

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INTRODUCTION

People with Mental Disorders (ODGJ) are people who experience disturbances in their thoughts, behavior and feelings which are manifested in the form of a series of symptoms or meaningful behavior changes, and can cause suffering and obstacles in carrying out their functions as humans. ODGJ are increasingly separated from their families and communities, they fail to function according to their expected roles, namely as members of the community, as students, workers or partners in the family. In most cases, ODGJ has decreased slowly and gradually in carrying out its function as an individual. The appearance of symptoms in behavior and decreased individual function often results in ODGJ being isolated, they often get a negative stigma and even shackle them.

Based on the results of the 2018 East Java Riskesdas, the prevalence of households with household members (ART) with mental disorders has increased sharply compared to the 2013 Riskesdas results, from 1.7 miles per household to 7 miles per household. In the work area of the UPTD Puskesmas Kepanjenkidul itself, based on the 2019 data, there were 135 severe ODGJ and 192 mild ODGJ. These ODGJs are spread across 7 sub-districts where the most ODGJs are in the RW 9 area of Kelurahan Tanggung, namely 8 people. This figure shows that the number of people with mental disorders in the community is still quite high.

There are still many people who think that the appearance of symptoms in ODGJ is due to interference by spirits or a demonic curse (Simanjuntak, 2013). They are considered deviant and looked down upon. The community already has a negative opinion and even justifies excluding or isolating them (Thong, 2011). Asti et al (2016) also stated that some residents still discriminate against ODGJ such as isolation, violence or bullying. It is this wrong view and judgment of society that can lead to wrong perceptions that have an impact on people's attitudes in acceptance of ODGJ (Wiharjo, 2014). Islamiati et al (2018) in their research stated that people can accept ODGJ but not their environment.

In an effort to overcome mental health problems, the government has made promotional, preventive, curative and rehabilitative efforts with the puskesmas as the spearhead in the community. A good perception needs to be owned by the

community because with a good perception it is hoped that the community can have a good attitude towards ODGJ (Azwar, 2016). The attitude of the community towards ODGJ will affect how the community interacts, provides support and helps ODGJ. This is what motivates the author to conduct research on people's attitudes towards ODGJ in terms of the experience of meeting ODGJ and the sources of information obtained at RW 9 Kelurahan Tanggung, Blitar City.

MATERIALS AND METHODS

This type of research was observational analytic with cross sectional research design. This research was conducted at RW 9 Kelurahan Tanggung, Blitar City in January 2020. The population in this study was all households in RW 9 Kelurahan Tanggung in 2019 as many as 199 households. The sample size in this study was 120 households which were taken using purposive sampling technique with the inclusion criteria being the head of the household or household members who were registered and lived in RW 9, Tanggung sub-district. The measuring instrument used in this research was the attitude questionnaire from the Community Attitudes toward Mentally III (CAMI III Questionnaire) from S.M Taylor & J. Dear (1981). CAMI III was used to assess attitudes towards mental disorders, there are 40 statement provided with four attitudes subscaled: authoritarianism, benevolence, social restrictiveness, and community mental health ideology. This instrument had been tested for validity and reability with a cronbach's alpha value of 0,730. The collected data were analyzed using the Spearman Rank Test correlation test.

RESULT

Table 1 Frequency distribution of respondent characteristics based on age, gender, marital status, education and family members with ODGJ in RW 9 Kelurahan Tanggung, Blitar City

Variable	Category	f	%
Age (year)	21-30	14	11,7
	31-40	19	15,8
	41-50	43	35,8
	51-59	44	36,7
Gender	Male	55	45,8
	Female	65	54,2

Marital status	Single	7	5,8
	Married	82	68,3
	Widow	16	12,5
	Widower	15	13,3
Level of education	SD	16	13,3
	SMP	27	22,5
	SMU/SMK	65	54,2
	PT	12	10,0
Family members with ODGJ	Yes	8	6,7
	Nothing	112	93,3

Based on Table 1, it can be seen that the most respondents were aged 51-59 years as many as 44 people (367%), female gender as many as 65 people (54.2%), with married marital status 82 people (68.3%), for the level of education Most high school/ vocational high school 65 people (54.2%) and no family members with ODGJ as many as 112 people (93.3%).

Table 2 Distribution of frequency of respondents based on meeting experiences and sources of information about ODGJ in RW 9 Kelurahan Tanggung, Blitar City

Variable	Category	f	%
Experience meet ODGJ	Rarely	21	25,8
	Often	64	53,3
	Very often	25	20,8
Source of information about ODGJ	Never	15	12,5
	Social media	17	14,2
	Mass media	18	15,0
	Health workers	31	25,8
	Health cadres	39	32,5

Table 4 Respondents' attitudes towards ODGJ in terms of their experience of meeting ODGJ in RW 9 Kelurahan Tanggung, Blitar City

Experience meet ODGJ	Attitude towards ODGJ				Total	
	Positive		Negative			
	f	%	f	%	f	%
Rarely	29	24,2	2	1,7	31	25,8
Often	55	45,8	9	7,5	64	53,3
Very often	22	18,3	3	2,5	25	20,8
Total	106	88,3	14	11,7	120	100
	P 0,470	rs -0,067				

Based on Table 2, it can be seen that all respondents stated that they had met people with mental disorders (ODGJ) with the most frequent meetings, namely 53.3% (64 people). 87.5% had received information about people with mental disorders, with the largest source of information being health cadres 32.5% (39 people).

Table 3 Frequency distribution of respondents' attitudes towards ODGJ in RW 9 Tanggung Kelurahan, Blitar City

Attitude	f	%
Positive	106	88,3
Negatifve	14	11,7
Total	120	100

Based on Table 3, it is known that the majority of respondents or 106 people have positive attitudes towards ODGJ. But there are still respondents who have a negative attitude towards ODGJ, namely as much as 11.7%.

From Table 4 it can be seen that most of the respondents who had experience often met ODGJ and had positive attitudes were 55 people (45.8%). It was also found that 29 people (24.2%) had experience of meeting ODGJ rarely but had positive attitudes. Respondents who have experience of meeting frequently and have negative attitudes are 9 people (7.5%). There were also respondents who rarely met ODGJ but had negative attitudes as many

as 2 people (1.7%). The results of the Spearman correlation test obtained a p value of 0.470, which means that the respondent's attitude towards ODGJ is not related to the experience of meeting ODGJ.

Table 5 The respondent's attitude towards ODGJ in terms of information sources in RW 9 Kelurahan Tanggung, Blitar City

Source of Information about ODGJ	Attitude towards ODGJ				Total	
	Positive		Negative		f	%
	f	%	f	%		
Never	14	11,7	1	0,8	15	12,5
Social media	15	12,5	1	0,8	16	13,3
Mass media	17	14,2	1	0,8	18	15
Health workers	23	19,2	9	7,5	32	26,7
Health cadres	37	30,8	2	1,7	39	32,5
Total	106	88,3	14	11,7	120	100

p 0,890 rs -0,013

Based on Table 5, it can be seen that most respondents have positive attitudes towards ODGJ because the information obtained from cadres is 37 people (30.8%). It was also found that 14 respondents who never received information but had positive attitudes towards ODGJ (11.7%). There were also 9 respondents (7.5%) who had received information from health workers but still had negative attitudes. The results of the correlation test obtained a p value of 0.890, which means that there was no correlation between the information obtained and people's attitudes towards ODGJ.

DISCUSSION

The respondent's attitude towards ODGJ was viewed from the experienced of met ODGJ

The results showed that although respondents rarely, often or very often met ODGJ, they had been positive or negative attitudes towards ODGJ. Based on the results of statistical tests used the Spearman rank test, the p value was 0.470 with a correlation coefficient of -0.067 where $p > 0.05$, which meant there was no correlation between the experience of meeting ODGJ and attitudes. Based on the results of the study, it was known that the highest attitude value was in respondents aged 41-50 years where this age was the middle adulthood age range. In the middle adulthood age range a person had maturity in experienced, wise in maked decisions, and tends to like to be involved in social activities so that in

behaved towards people with mental disorders, individuals in middle adulthood will tend to be positive. This is in line with the opinion of Candra (2017) that one of the characteristics of adult individuals is their moral and spiritual growth. Moral and spiritual maturity that encourages a person to love and serve others well.

From the research results it was also known that female respondents tend to give negative attitudes towards ODGJ. According to the author, this happens because women tend to be emotional in addressing a problem or stimulus. Symptoms in people with mental disorders provide an unpleasant picture for women, resulting in feelings of fear, disgust, and so on. This image forms the attitude that ODGJ should be avoided. Studies on women from various cultures and countries show that women tend to feel more negative emotions, such as guilt, fear and shame (Tsamarah, 2018).

All respondents stated that they had met people with mental disorders. Walgito (2010 in Candra, 2017) suggests that experiences will greatly influence someone in their attitude towards something. This means that if the previous experience about the stimulus is considered pleasant, then someone will tend to be kind and vice versa. Based on table 4, respondents who had experience met people with mental disorders could had positive or negative attitudes. Researchers argue that the more often individuals meet people with mental disorders, they will behave normally towards ODGJ.

The attitude of the respondents towards ODGJ was viewed from the source of information obtained about ODGJ

Based on Table 5, it was known that both respondents who got information from social media, mass media, health workers and cadres or those who never got the information, all of them had a positive attitude, some also had negative attitudes towards ODGJ in RW 9 Kelurahan Tanggung. The statistical test results obtained p value 0.890 where $p > 0.05$, which meant there was no correlation between the attitude shown by the respondent and the source of the information they have obtained. The positive attitude shown by these respondents were reinforced by evidence from the components of the attitude that the researcher examined where the average value of “Willful” attitudes were lower, “sympathetic” attitudes were higher, “isolating” attitudes were lower, and “community mental health awareness” higher. These results could be concluded that the attitude of society towards people with mental disorders in RW 9 Tanggung sub-district tends to be positive (Taylor, 1981). The low value of the “Willful” subscale and the high “Sympathetic” value means that the RW 9 community tends not to act arbitrarily, for example to commit physical violence and shackling people with mental disorders, but tend to be sympathetic to them and respect their rights. Meanwhile, the values of “isolating” lowed and “having a public health perspective” are high which meant that society still provides space for people with mental disorders to be treated in the community and did not isolate and limit their movement, for example by inviting people with mental disorders who were recovering to get involved in religious activities and community activities and some even employ them.

Based on the majority of respondents education level was SMA/ SMK. However, the highest average attitude score were for respondents with the latest tertiary education and the lowest was at primary school education. This it could be interpreted that the higher the level of education, the higher the society’s attitude towards people with mental disorders. According to Notoatmodjo (2010) education basically involves the behavior of a person or group. Education carried out, both formal and informal, focuses on the teaching process with the aim of changing behavior, namely from not knowing to knowing, from not understanding to understanding. Education affects a person’s

mindset, the higher a person’s level of education, the easier it was for that person to receive information, including information about people with mental disorders.

The attitude value according to marital status shows that the average result of divorced respondents had a negative attitude tendency. These results are in line with Siqueira’s (2016) research which states that divorced individuals will respond to a more negative attitude. Divorce causes a person’s happiness and life satisfaction to be low, complaints of many diseases, and becomes more depressive (Ben-Zur, 2016). With these various problems, often widows / widows will be more likely to show negative effects on a stimulus, especially if the stimulus was not pleasant.

Respondents who had family members of people with mental disorders had a much higher average attitude score when compared to respondents who did not had family members of people with mental disorders. This positive tendency was a form of family support for family members who had mental disorders. This support was needed by people with mental disorders to achieve the optimal degree of mental health. With the support provided by the family, it makes family members able to function with various abilities and minds so as to improve health and adaptation (Friedman, 2010).

Respondents who had never obtained information about people with mental disorders had a total value below the others. On the other hand, respondents who had obtained information from social media, mass media, health workers, and cadres show that the average exceeds the average of many groups. This means that individuals who get good information about people with mental disorders will tend to respond well too. This was in accordance with the theory that the existed of new information about something provides a new cognitive foundation for the formation of attitudes towards it. These suggestive messages, if strong enough, will provide an affective basis in assessing something so that a certain attitude is formed (Azwar, 2016)

CONCLUSION

From the research results, it was found that the attitudes of towards ODGJ in terms of sources of information they had obtained with p value 0,890, and attitudes of households with experience met

ODGJ with p value 0,470, p value > 0.05 which meant that a person's attitude towards ODGJ were not influenced by the experience of met ODGJ and the sources of information they got in RW 9 Kelurahan Tanggung Blitar City.

SUGGESTION

It is hoped that the community will be willing to open up, accept or seek information about ODGJ. In addition, activities that involve the patient's family who have a positive attitude are also needed to be able to change people's attitudes towards a more positive direction.

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