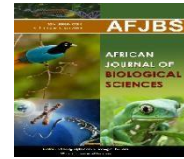**African Journal of Biological Sciences**

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Family Support For The Healing Of Patients With Mental Disorders in Pidie Regency

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ABSTRACT

Family support and environment of patients with mental disorders (ODGJ) are very important for the healing process. Recurrence can recur due to lack or even no interaction between the community and mental disorder patients. In Indonesia, the problem of mental disorders is still in a considerable burden of diseases, the number of cases of people with severe mental disorders in Aceh in 2021 was 7,677 cases or 81%. This study used a cross-sectional research design, while sampling was carried out by random sampling on families of mental disorder patients undergoing treatment at Pidie Regency Health Center with a population of 760 people and the sample in this study used the slovin formula of 100 samples for the study. Data analysis using SPSS 23 statistical software with Chi-square. The results of this study, the support from family of patients were good by 95 (95%) respondents, family who slightly did not support 5 (5%) respondents, the most result is from spiritual variables which were good by 82 (82%) respondents and at least 18 (18%), for emotional variables were as much as 51 (51%) and slightly emotional not good 49 (49%) respondents, while for relapse of patients people with mental disorders. the most is not relapse by 67 (67%) respondents and at least 33 (33%) relapse. While the results of the bivariate analysis test with a confidence level of 95% were obtained with a value of p = 0.01 (p < 0.05) for emotional variables. This means that there is an emotional variable influence with the healing of ODGJ patients. By giving attention and compassion will make the patient easier for the healing process. The support provided by the family in the healing process of ODGJ patients must really be given because the attention and support given to ODGJ patients will make patients more calm and controlled.

Keywords: Support, Family, Patient, Healing, Mental Disorder.

1. INTRODUCTION

Family support in the healing process of mental disorder (ODGJ) patients is very important for patients because families interaction with patients most often.

Family social support is very necessary for mental patients who are treated at home for food needs, clothing needs, and toileting needs (Zaman *et al*., 2023).

Based on the overall disease prevalence of mental disorder problems in the world according to the World Health Organization (WHO) stated that there are around 21 million people suffering from schizophrenia (Nasriati, 2017). The results of Basic Health Research (Riskesdas) on 300,000 household samples (1.2 million people) in 34 provinces in Indonesia, Aceh ranks 4th (four) most with schizophrenics estimated at around 18,000 people (Nursamsiah *et al*., 2021)

Pidie Regency, in 2020 based on Aceh's health profile for those who get mental health services or ODGJ, the lowest is Pidie, only about 48%, namely out of 947 patients with mental disorder who received health services, only 456 patients received health services (Aceh Health Profile, 2020).

Mental disorder patients experience a deterioration in their psychosocial functions where schizophrenia itself is one of the western mental disorders. They have a decreased ability to move and communicate with others, and are unable to face reality (Kadmaerubun *et al.,*).

Lack of family support for the recovery of mental disorder patients results in relapse of patients. Therefore, researchers want to examine the extent of family support for healing of the patients in the district.

2. LITERATURE REVIEW

Globally, the term Mental Health and Psychosocial Support is used in the Inter Agency Standing Committee (IASC) Guidelines in Emergency Situations, which means any type of support from outside or local aimed at protecting or improving psychological well-being and/or preventing and addressing mental health and psychosocial conditions (Health Ministry of Indonesia, 2020).

Family support, according to Friedman (2010) is a form of interpersonal relationship that includes attitudes, actions and acceptance towards family members, so that family members feel someone is paying attention to them. Family social support refers to social support that is seen by family members as something that can be accessed or held for families who are always ready to provide help and assistance if needed (Febby, 2020).

3. METHOD

This study used a cross-sectional design. The population of this study was ODGJ family members in Pidie Regency. The number of ODGJ patients who were monitored at home and educated was 760 people. The samples in this study were family members of patients with mental disorders (ODGJ) in Pidie district technique with the formula Slovin (1960) 100 people as sample. Data analysis techniques in this study used univariate, and bivariate analysis. Bivariate analysis using chi square test.

4. RESULT

4.1 Results of Variable Data Analysis

Table 1. Family Support for patients

Family Support	F	%
Good	95	95
Bad	5	5
Total	100	100

From the table above, we can see the family support of patients with mental disorders (ODGJ) with the most good categories 95 respondents (95%) and at least the bad category 5 respondents (5%).

Table 2. Results of Spiritual Data Analysis

Spiritual	F	%
Good	82	82
Bad	18	18
Total	100	100

From the table above we can see the spiritual variables for family support are at most good 82 respondents (82%) and at least not good 18 respondents (18%).

Table 3. Results of Emotional Data Analysis

Emotional	F	%
Good	51	51
Bad	49	49
Total	100	100

From the table above, we can see that the emotional variable for family support is the most good at 51 respondents (51%) and the least emotional is not good at 49 respondents (49%).

Table 4. Knowledge Data Analysis Results

Knowledge	F	%
Good	44	44
Bad	56	56
Total	100	100

From the table above, the most knowledge for family support for people with mental disorders (ODGJ) with bad knowledge is 56 respondents (56%) and the least good knowledge is 44 respondents (45%).

4.2 Dependent Variables

Results of data analysis conducted for the dependent variable (Recurrence) as the table below:

Table 5. Recurrence variables

Recurrence	F	%
Relapse	33	33
Not Relapse	67	67
Total	100	100

From the table above, it was found that the recurrence of patients with mental disorders (ODGJ) was the greatest with a relapse of 33 respondents (33%) and at least no relapse of 67 respoondens (67%).

4.3 Bivariate Test Results

The results of the bivariate test were conducted to determine family support for the healing of patients with mental disorders (ODGJ) in Pidie Regency. These results can be seen in the following table:

Table 6. Spiritual Bivariate Test with Relapse Rate of Patients with Mental Disorders (ODGJ)

Spiritual	Recurrence		Sum	
	Relapse	Not Relapse		
	F	F	f	%
Good	27	55	82	82
Bad	6	12	18	18
Total	33	67	100	100
Spiritual Analysis of the patient's healing P-Value = 0.193				

From the table above, it can be concluded that spiritual is good with no relapse of 55 respondents and spiritual is good with relapse of 27 respondents. While spiritual is not good and does not recur by 12 respondents and spiritual is not good with a recurrence rate of 6 respondents.

Based on statistical test of bivariate analysis with chi-square test at 95% confidence level with p = 0.193 (p< 0.05). This means that there is no influence of spiritual variables with relapse of patients with mental disorders (ODGJ)

Table 7. Emotional Bivariate Test with Relapse Rate of Patients with Mental Disorders

Emotional	Recurrence		Sum	
	Relapse	Not Relapsed		
	F	F	f	%
Good	17	34	51	51
Bad	16	33	49	49
Total	33	67	100	100
Emotional Analysis towards mental disorder patients, P- Value = 0.01				

From the table above, it can be concluded that the emotional variable with no relapse is 34 respondents and emotional is good with a relapse of 17 respondents. While emotional is not good with no relapse by 33 respondents and emotional is not good with relapse by 16 respondents.

Based on statistical test bivariate analysis with *chi-square* test at 95% confidence level with p = *0.01 (p< 0.05)*. This means that there is an influence of emotional variables with the relapse of patients with mental disorders (ODGJ)

Table 8. Bivariate Knowledge Test with Recurrence Rate of Patients with Mental Disorders (ODGJ)

Knowledge	Recurrence		Sum	
	Relapsed	Not Relapsed		
	F	F	f	%
Good	14	30	44	44
Bad	19	37	56	56
Total	33	67	100	100
Knowledge Analysis of the Healing of Patients with Mental Disorders (ODGJ) *P- Value = 0.097*				

From the table above, it can be concluded that the variable of bad knowledge with no relapse of 37 respondents and bad knowledge with a relapse of 19 respondents. While good knowledge with a relapse of 14 and good knowledge with no relapse of 30 respondents.

Based on statistical test bivariate analysis with *chi-square* test at 95% confidence level with p = *0.097 (p< 0.05)*. This means that there is no influence of knowledge variables with relapse of patients with mental disorders (ODGJ)

Table 9. Support Bivariate Test with Recurrence Rate of People with Mental Disorders (ODGJ)

Support	Recurrence		Sum	
	Relapsed	Not Relapsed		
	F	F	f	%
Good	31	64	95	95
Bad	2	3	5	5

Total	33	67	100	100
Knowledge Analysis of Patient Healing, P-Value = 0.536				

From the table above, it can be concluded that the variables of good family support with no relapse by 64 respondents and good support with relapse by 31 respondents. While support is not good with relapse by 2 respondents and support is not good by not relapsing 3 respondents.

Based on statistical test bivariate analysis with *chi-square* test at 95% confidence level with p = *0.536 (p< 0.05)*. This means that there is no variable effect of support with relapse of patients with mental disorders (ODGJ).

5. DISCUSSION

5.1 Support with relapsed

The results of family support research found that there was no effect on the recurrence of patients, while this is not in line with research conducted by (Marlita *et al.*, 2020) stated that families must always provide full support and provide attention and affection to patients, one of which is by controlling to the hospital, as well as supervising when patients take medication. Family support is manifested in the form of affection, trust, warmth, mutual support and respect between families.

This research is not in line with the research conducted (Rahmawati et al., 2018) Research on family social support with the resilience of families with schizophrenia is mostly in the support category, found 56 respondents with a percentage (55.4%). This shows that family support is one indication that affects family resilience itself.

5.2 Spiritual

From the test results Statistically there is no effect of spiritual variables on the relapse of patients with mental disorders

Spiritual needs are also human needs in dealing with deviations from various problems such as social, cultural, anxiety, fear of death and dying, social alienation and philosophy of life. According to Koezier, the need for spirituality as an internal source in humans, becomes very important in the relationship between oneself, others, groups, and God (Yusuf, 2017). The factors that can affect a person's spiritual needs are the development of age, family, race or tribe, religion adhered to, and religious activities (Uliyah and Hidayat, 2021).

The results of this study are not in line with the results of research conducted by Ernawati, Samsualam, and Suherni (2020) in The Effect of Spiritual Healing on the Patient's Ability to Control Violent Behavior The results showed that there was a significant influence between the implementation of spiritual healing on the patient's ability to control violent behavior where the ability to control violent behavior before spiritual therapy was carried out as many as nine patients, While after spiritual healing was done as many as eleven patients.

5.3 Emotional

The results of this study found emotional variables influential with the recurrence of patients People with mental disorders (ODGJ). This study is in line with Endrik's (2021) research saying there is a relationship in assessment support, emotional support and informational support, while instrumental support does not find a significant relationship.

The study of Tiara et al., (2020) obtained the same results, namely the emotional support provided by the family significantly affected the relapse rate of schizophrenia patients at Psychiatric Hospital of Lampung

5.4 Knowledge Variables

The research is not in line with the research conducted by (Etlidawati &; Salmiwati, 2013) where more respondents were found to have good knowledge. If knowledge is low, then the family has not been able to fully overcome and maintain and care for families who have mental disorders when the disease recurs. Researchers assume that knowledge must be possessed by the patient's family so that the family can treat patients well and reasonably while at home.

Family Support For The Healing of Mental Disorder Patients (ODGJ)

There was no effect of support variables with recurrence of ODGJ patients. Relapse in People With Mental Disorders (ODGJ) is a problem that is often found in the community around us (Johansen, Hounsgaard, Hansen,

&; Fluttert, 2021). Cases of clumsy often occur in severe mental disorders. Recurrence also causes the recovery process to be delayed. Decreased productivity is a further problem for ODGJ who often relapse (Bubonya, CobbClark, & Wooden, 2017).

Support from family provides reinforcement towards better health function. Family presence gives clients access to improve mental health (Priastana et al., 2018).

In this study, family support was obtained with the recovery of patients there was no significant effect. The family supports in healing patients, people with mental disorders, it seems that families come to the puskesmas to take medicine and give it to patients. However, there are some patients who are not supported by their families and some even do not have a nuclear family anymore.

6. CONCLUSION

The study conducted was to see the extent of family support of people with mental disorders (ODGJ). Family is the biggest supporter for the healing process of people with mental disorders The results of the study showed that there was no significant influence of spiritual variables, knowledge on patient relapse. However, there is an influence of emotional variables with the recurrence of patients with mental disorders. Emotional factors consisting of attention, affection, and supervision from family are very basic so that it has a major effect on the recovery process of patients with mental disorders.

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