

Original Research

The Relationship of Knowledge with People's Attitudes Towards People with Mental Disorders

Meysi Tessa Pandi^{1*}, Widya Astuti², Juritno Harmi Gaib³

^{1,2,3}Department of Nursing, Graha Medika Institute of Health and Technology, Kotamobagu, Indonesia

Article Info

Received: 25-10-2024
Revised: 28-11-2024
Accepted: 19-12-2024

*Corresponding Author:
Meysi Tessa Pandi
Department of Nursing,
Graha Medika Institute
of Health and
Technology,
Kotamobagu
Email:
meysitessapandi44@g
mail.com

Abstract

Background: People with mental disorders often receive greater stigma and discrimination from the surrounding community than individuals who suffer from other medical illnesses. The society's view of people with mental disorders has an impact on people with mental disorders. In this condition, the community should play a role as one of the support systems for people with mental disorders.

Objective: The purpose of this study is to analyze and identify the relationship between knowledge and people's attitudes towards people with mental disorders.

Methods: The type of research used in this study is simple Random Sampling, with a cross sectional research approach which means taking momentary measurements and data being analyzed using the chi-square test with a sample of 36 respondents.

Results: The results of this study found that the public's knowledge was mostly good as many as 21 respondents, poor knowledge as many as 15 people and the community's attitude towards people with mental disorders was mostly positive for 21 respondents and negative attitudes amounted to 15 respondents.

Conclusion: The results of the chi-square statistical test obtained a value of $p = 0.000$ or $p < 0.05$. This means that there is a relationship between knowledge and people's attitudes towards people with mental disorders.

Keywords: Attitude; Knowledge; Mental; Social Disorders

Introduction

People with mental disorders often receive greater stigma and discrimination from the surrounding community than individuals who suffer from other medical illnesses, including being expelled from school, dismissed from work, divorced by a partner, abandoned by their families, even being shunned and deprived of their property (Ministry of Health of the Republic of Indonesia, 2014). The public's view of people with mental disorders has an impact on people with mental disorders, these views can be in the form of negative or positive views. Negative views can have a detrimental effect on people with such mental disorders. In this condition, the community should play a role as one of the support systems for people with mental disorders. People with mental disorders are at high risk of human rights violations, they are often called insane or madness. This treatment is caused by ignorance or misunderstanding from family or community members and even nurses or medical personnel regarding mental disorders.

The prevalence of mental disorders around the world according to WHO data, (World Health Organization) in 2019, there were 264 million people with depression, 45 million people suffering from bipolar disorder, 50 million people experiencing dementia, and 20 million people experiencing schizophrenia. The Ministry of Health (Kemenkes) noted that during the Covid-19 pandemic, until June 2020, there were as many as 277 thousand mental health cases in Indonesia. The number of mental health cases has increased compared to 2019 which was only 197 thousand people.

Mental disorders are still a serious mental health problem in Indonesia that needs more attention from national health policy makers. Although it is still not the main priority program of national health policy, the figures obtained from several national researches show that there are still many people with mental disorders in Indonesia and tend to increase. Based on data from Basic Health Research in 2018 in Indonesia, there is a schizophrenia of around 400,000 people or as much as 1.7 per 1,000 population (Ministry of Health of the Republic of Indonesia 2018). Generally in Indonesia, people with mental disorders are treated as pemangangan. This is considered to limit the behavior of people with mental disorders. This makes people with mental disorders difficult to recover. This situation causes stigmatization in society that can increase bad things for people with mental disorders. People with mental disorders are hampered from getting treatment from health services and people with mental disorders are generally victims of discrimination (Dewi, et al.2019). Based on the above background, the researcher

is interested in researching the relationship between public knowledge about mental illness and people's attitudes towards people with mental disorders.

Methods

Study Design

The research used in this study is simple Random Sampling, with a cross sectional research approach.

Samples/Participants

The sample in this study is 36 respondents who have been determined the inclusion and exclusion criteria. The Inclusion Criteria that will be taken as a sample for this study are the people of Kotobangon Village, people who are willing to become respondents. The exclusion criteria are people who are not willing to be respondents, and people who are not able to be used as research objects such as: disabled, have mental disorders, illiteracy or be drunk.

Instruments

Knowledge Questionnaire, this questionnaire is to find out the relationship between public knowledge about mental disorders in Kotobangon village. This research will be conducted directly to respondents with a total of 12 questions with a score of 4 if "Strongly Agree" is given a score of 4, if "Agree" is given a score of 3, if "Disagree" is given a score of 2, and "Strongly Disapprove" is given a score of 1. Attitude questionnaire, this questionnaire is to find out the relationship between people's attitudes towards people with mental disorders in Kotobangon village. This research will be conducted directly to respondents with a total of 42 questions with a score of 4 if "Strongly Agree" is given a score of 4, if "Agree" is given a score of 3, if "Disagree" is given a score of 2, and "Strongly Disapprove" is given a score of 1.

Data Collection

The data collection process in this study is through primary data and secondary data. Primary data was obtained from the research sample, namely the results of filling out questionnaires and observations and secondary data was obtained from data from the village, pukesmas, and the head of RT 17 Kotobangon Village.

Data Analysis

Data processing is an activity that is carried out after the data collection process which is generally carried out through several stages of data management in this study using a computer program, namely SPSS with chi-square test statistics, this test can be used to test the relationship between variables by entering all the data into the SPSS then selecting chi-square to see whether there is a relationship between the free variable and the bound variable.

Ethical Considerations

Based on the results of the reviewer of the Health Research Ethics Commission of the Graha Medika Institute of Health and Technology, Kotamobagu provided approval and ethical recommendations for research submissions.

Results

Univariate Analysis

Respondent Characteristics

Gender

Based on table 1, it can be seen that the characteristics of respondents are mostly female, namely 25 respondents (69.4%) and male respondents as many as 11 respondents (30.6%).

Table 1 Distribution of respondent frequencies by gender

Gender	Frequency	Percentage %
Woman	25	69,4 %
Man	11	30,6 %
TOTAL	36	100 %

Source : SPSS Processed Data 2023

Education

Based on the table 2, it can be seen that the characteristics of respondents based on the last education of elementary school as many as 6 people (16.7%), junior high school as many as 12 people (33.3%), and high school as many as 18 people (50.0%).

Table 2 Distribution of respondent frequencies by last education

Final Education	Frequency	Percentage %
SD	6	16,7 %
JUNIOR	12	33,3 %
SMA	18	50,0 %
TOTAL	36	100 %

Source : SPSS Processed Data 2023

Univariate Analysis

Respondents based on Knowledge

Based on table 3, it can be seen that most of the people have good knowledge, namely 21 respondents (58.3%) while the other 15 (41.7%) have poor knowledge.

Distribution Table 3 Distribution of respondent frequencies based on knowledge

Knowledge	Frequency	Percentage %
Good	21	58,3 %
Not Good	15	41,7 %
Total	36	100 %

Source : SPSS Processed Data 2023

Distribution of respondents by Attitude

Based on table 4, it is known that most of the people have a positive attitude, namely 21 respondents (58.3%) while the other 15 (41.7%) have a negative attitude.

Table 4 Frequency distribution of respondents by attitude

Attitude	Frequency	Present %
Positive	21	58,3 %
Negative	15	41,7 %
Total	36	100 %

Source : SPSS Processed Data 2023

Bivariate Analysis

Based on table 5, the results of the study show that the well-informed community with a proportion of positive attitudes towards people with mental disorders is as many as 18 respondents (50%), while the poor-informed community with the proportion of negative attitudes there are 3 respondents (8.3%), and the people who have poor knowledge with a positive attitude proportion are 3 respondents (8.3%) while the poorly informed people with a negative proportion are 12 respondents (33.3%).

Table 5 Analysis of the Relationship between Knowledge and Public Attitudes Towards People with Mental Disorders

Knowledge	Attitudes Towards People With Mental Disorders				Total		P Value
	Positive		Negative				
	n	%	n	%	n	%	
Good	18	50	3	8,3	21	58,3	0,000
Not Good	3	8,3	12	33,3	15	41,7	
Total	21	58,3	15	41,7	36	100,0	

Sumbe: SPSS Processed Data 2023

Discussion

The results of this study are in line with the research of Saragih (2013) with the title Overview of the level of knowledge and family attitudes about the treatment of patients at risk of violent behavior at home which

shows that most of the respondents' education is high school as many as 17 respondents (51.5%). According to Notoatmodjo (2017), knowledge is obtained through eyes, ears, and is also influenced by age, education and experience. Where the higher a person's education, the easier it is to receive information and the more knowledge he has. On the other hand, lack of education will hinder the development of one's knowledge of newly introduced values. Meanwhile, according to age, the older a person is, the more mature a person will be in thinking so that it is easier to understand information and increase knowledge, this is a result of experience and maturity of the soul. The results of this study are in line with the research of Yusnipah (2012) with the title of the level of family knowledge in treating hallucination patients at the Psychiatry Polyclinic of Marzoeeki Mahdi Hospital Bogor, showing that the level of knowledge of the community is mostly knowledgeable, namely 58 respondents (57.7%).

The results of the study showed that people who were well-informed with a proportion of positive attitudes towards people with mental disorders were as many as 18 respondents (50%) while people who were less knowledgeable with a proportion of negative attitudes were 3 respondents (8.3%), and people who had poor knowledge with a positive attitude proportion were 3 respondents (8.3%) while people who were less knowledgeable with negative attitudes were 12 respondents (33.3%). A person's knowledge of an object contains two aspects, namely the positive aspect and the negative aspect. These two aspects will determine a person's attitude, the more positive aspects and objects are known, the more positive attitudes of certain objects will arise (Wawan, 2017). The results of this study are in line with the results of research conducted by Dita A. Pratiwi (2019) obtained that the p value results are 0.000 ($p < 0.05$) which means that H_0 is rejected and H_a is accepted, thus showing that there is a relationship between knowledge and attitudes towards people with mental disorders.

The results of the chi-square statistical test obtained a value of $p = 0.000$ or $p < 0.05$. This means that there is a relationship between knowledge and community attitudes towards people with mental disorders in Kotobangon Village. It can be concluded that knowledge has a great influence on a person's attitude, where the more knowledge, the more positive a person's attitude will be towards others, especially in this discussion, namely for people with mental disorders. Attitude is a reaction or response that is still closed from a person to a stimulus or object. Attitude is how the opinion or assessment of people or respondents on matters related to health, health and illness and factors related to health risk factors. A good attitude will increase one's knowledge. With good knowledge, it can be expected that the attitude of the community towards people with mental disorders is also good. This attitude and stigma in people with mental disorders not only causes negative consequences for people with mental disorders, but also for family members which include attitudes of rejection, exclusion, denial and isolation. People with mental disorders are at high risk of human rights violations (Efendi, F & Makhfudli 2019).

Attitudes clearly connote the conformity of reactions to certain stimuli which in daily life are emotional reactions to social stimuli. Attitude cannot be seen but can be interpreted first from behavior that is closed to attitude is a tendency to respond, either positively or negatively, to a certain person, situation, or object (Iswan, 2019). Factors that affect attitudes towards the object of attitude According to Azwar, (2016) include personal experiences, the influence of others who are considered important, the influence of culture, mass media, educational institutions and religious institutions, and the influence of emotional factors. This study has several limitations, including the Researcher experiencing obstacles when visiting the respondents' homes directly because some respondents are not at home.

The researcher experienced difficulties when dealing with respondents who had babies/toddlers because toddlers were often fussy when the researcher was conducting research on respondents. The researcher had difficulty adjusting the time of the researcher with the respondent. Mental disorders are a condition in which individuals experience difficulties with their perception of life, difficulties in living relationships with others, and difficulties in determining attitudes for themselves (Aulia 2019). The causes of mental disorders are found in psychiatric elements, but there are main causes that may be in the body (Somatogenic), in the Psyche (Psychogenic), cultural (cultural pressure) or in the social environment (Sociogenic) and religious (Spiritual). From one of these elements, there is one prominent cause, usually there is no single cause, but there are several causes in the body, soul and cultural-spiritual environment at the same time that arise and happen to occur at the same time, then physical or mental disorders arise. According to Yusuf, (2015) the researcher had difficulty in determining the sample because there were several respondents who did not match the characteristics of the respondents.

Conclusion

The conclusion of this study is that the knowledge of the community in Kotobangon Village is mostly good, namely as many as 21 respondents (58.3%), while the other 15 (41.7%) have poor knowledge. The attitude of the people of Kotobangon Village towards people with mental disorders was mostly positive, namely 21 respondents (58.3%), while the other 15 respondents (41.7%) had a negative attitude. There is a meaningful relationship between knowledge and community attitudes towards people with mental

disorders in Kotobigang Village. For future researchers, this can be used as basic data to develop research related to people with mental disorders

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