



THE ISSUES AND CHALLENGES OF IMPLEMENTING PSYCHOSOCIAL SUPPORT BY THE STAKEHOLDER TO THE LOCAL COMMUNITIES IN MATARAM, WEST NUSA TENGGARA

Mujahidin Hasanul Bisri¹, Norsuhaily Abu Bakar²

¹²University Sultan Zainal Abidin Malaysia

Gong Badak, 21300 Kuala Nerus, Terengganu Darul Iman, Malaysia

Si3991@putra.unisza.edu.my


Keywords:

Challenge, Psychosocial Support, Mental Health, Local Communities

Abstract

This study aims to identify challenges and obstacles in implementing psychosocial support programs by stakeholders in local communities in Mataram, West Nusa Tenggara (NTB). The qualitative research method involves in-depth interviews, observation, and documentation. The results showed that stakeholders face several challenges, including limited human resources in mental health, stigma against mental health, mismatch in program implementation, and lack of family support. The implications of this study are the importance of increasing the number and quality of human resources in mental health, involving families in patient care, improving coordination between relevant departments, and building collaboration between governments, non-governmental institutions, and communities. Recommendations based on the findings of this study are to increase public awareness about mental health, reduce stigma, allocate adequate funds, and develop consistent and sustainable psychosocial support programs. This research contributes to understanding the specific context in Mataram, NTB, and guides policies and practices addressing mental health problems in local communities.

Vol. 6, No. 01, 2023

 [10.20414/sangkep.v2i2](https://doi.org/10.20414/sangkep.v2i2).

Submitted: April 17th, 2023

Accepted: June 16th, 2023



A. INTRODUCTION

Mental health disorders pose a significant challenge to the well-being of individuals in Indonesia, with far-reaching consequences for families, communities, and the government. Severe mental illnesses not only diminish productivity but also impose substantial financial burdens. Moreover, they can lead to a long-term decrease in human productivity, placing a strain on the nation as a whole (World Health Organization, 2019). Therefore, it is crucial to prioritize the effective management and treatment of mental health disorders in Indonesia.

According to the Ministry of Health of Indonesia (2018), approximately 9.8% or 26 million 267 million Indonesians suffer from emotional mental disorders. This staggering statistic underscores the urgent need for nationwide comprehensive mental health support and services. However, it is essential to focus on a specific region to address the specific challenges in implementing psychosocial support by stakeholders in local communities. This study will examine the issues and challenges of implementing psychosocial support by stakeholders to the local communities in Mataram, West Nusa Tenggara (NTB).

Mataram, located in NTB, has made efforts to provide mental health support and services through the Free Pasung program, an intervention in psychosocial support and mental health (Cordero & Castro, 2020). This program has shown positive outcomes in increasing access to medical care for individuals with mental disorders. However, despite these efforts, there is still a gap in understanding and assessment of the role of stakeholders in providing psychosocial support to maintain the mental health of local communities in Mataram, NTB. Previous research has not thoroughly evaluated stakeholders' performance in implementing psychosocial support programs (Matsea et al., Nisa et al., 2020; Ruddin, 2020). Therefore, this study aims to address this gap and explore the issues and challenges faced in implementing psychosocial support by stakeholders in Mataram, NTB.

By examining the issues and challenges faced in implementing psychosocial support locally, this study will contribute to understanding the specific context in Mataram, NTB. The findings will provide insights into improving the effectiveness of psychosocial support programs and inform policy and practice in addressing mental health disorders in local communities.

B. METHODS

Research Methods. The study employs qualitative research methods, which entail obtaining descriptive data through in-depth interviews, observation, and documentation. Qualitative research involves gathering verbal or written information from individuals and observing their conduct (Nugrahani, 2014) as Bogdan & Taylor (1975: 5) elucidate. Furthermore, according to Strauss & Corbin

(2007: 4), qualitative research does not rely on statistical or computational procedures to obtain results, even though data can be presented numerically, such as in a census.

Sample, The selection of key stakeholders in Mataram for this study was done through purposive sampling. The sample group consisted of the Mataram Health Office of Mataram, the Social Office of Mataram, and the Public Health Office, among others. The study involved ten respondents who represented various roles such as doctors, program coordinators, field workers, community health center heads, psychologists, and administrative staff.

Data Analysis, The study's gathered data underwent thorough analysis and interpretation through descriptive methods. To ensure accuracy, the recorded interviews, observations, and documentation were meticulously transcribed and checked (Smith, 2003). ATLAS.ti software served as an efficient tool for organizing, managing, and analyzing the data, providing a systematic approach to exploring the rich qualitative information gathered in the study (ATLAS.ti Scientific Software Development GmbH, 2021). This comprehensive analysis process facilitated a deeper understanding of the data, allowing for meaningful interpretation and insights in answering research questions.

C. RESULTS AND DISCUSSION

The study revealed several challenges and obstacles faced by stakeholders in implementing psychosocial support for the local communities in Mataram, West Nusa Tenggara (NTB). One significant challenge identified was the human resources challenge, which included a lack of quantity and quality of mental health professionals, frequent mutations and transfers of staff members, and a shortage of experts in specialized areas. Another major challenge was the stigma surrounding mental health, characterized by beliefs in supernatural causes, the perception of mental disorders as a disgrace, and the economic burden placed on families. Inconsistent program implementation was also highlighted as a challenge, attributed to limited funding, infrastructure constraints, and coordination issues among departments. Lastly, the lack of family support was identified as a barrier to effective psychosocial support, influenced by familial dynamics and barriers to family involvement in mental health care.

Human Resources Challenge

Human resources play an important role in the implementation of effective psychosocial support programs. However, there are several problems and challenges related to human resources in these programs. One of the important issues is the need for a more qualified number of personnel. Currently, there is a shortage of professionals in the field of psychosocial support, which hinders the delivery of comprehensive services. In addition, the quality of human resources is

also a concern, as there is a need for continuous training and development to ensure the competence and effectiveness of staff. Another challenge arises from the phenomenon of staff members holding multiple positions, known as duplicate positions. This situation can result in individuals being burdened with excessive responsibility and can hinder their ability to perform their duties effectively (Listritika S, 2019; Sofwan et al., 2020). Addressing these human resource challenges is critical to strengthening psychosocial support programs and improving the overall quality of mental health services provided to communities. Efforts should be made to increase the number of qualified professionals, increase training opportunities, and address concomitant position issues to optimize the effectiveness of psychosocial support programs.

The lack of human resources significantly impacts the effectiveness of each stage in the implementation of psychosocial support. In particular, the lack of personnel poses significant challenges during the preparation phase. Insufficient human resources lead to limited data availability, making it difficult to set accurate program goals and objectives. Data serves as a fundamental basis for analysis and decision-making in program planning. Without comprehensive data, it becomes a challenge to identify the specific needs of the target population and develop appropriate strategies to address them effectively.

In addition, the scarcity of human resources also interferes with optimal data management, which is crucial for organizing and utilizing available information efficiently. Inadequate staffing limits the capacity to collect, process, and analyze data, hindering the ability to identify trends, patterns, and areas requiring intervention. Effective data management is essential for monitoring the progress of psychosocial support programs, evaluating their impact, and making adjustments or improvements based on the necessary information (Keynejad et al., 2021).

Human resource barriers in psychosocial support programs are critical to overcoming these barriers. Allocating adequate resources to recruit and train qualified professionals is necessary to ensure the availability of comprehensive data for program planning. In addition, investing in data management systems and providing ongoing support and training to staff members can enhance their skills and capacity to manage and utilize data effectively. By recognizing and addressing human resource challenges, psychosocial support programs can improve their planning process, improve data management capabilities, and ultimately improve their overall effectiveness in providing support and assistance to individuals in need.

The lack of human resources not only impacts the preparation stage, but also significantly hinders a range of other psychosocial support activities, including home visits, monitoring, and evaluation (Stansbury et al., 2006). After patients with mental disorders are discharged from mental hospitals, they are reintegrated into their families with supervision and support from Puskesmas.

The Department of Public Health plays an important role in following up and monitoring the progress of patients throughout their recovery. However, due to the imbalance between the number of patients and staff available at Puskesmas, some of these important activities cannot be carried out optimally (Ministry Health of Indonesia, 2018). Limited human resources pose challenges in providing adequate attention and care to each patient, which can compromise the effectiveness of the psychosocial support provided.

The lack of adequate wages for field staff adds to the challenges faced in implementing psychosocial support programs. The amount of burden imposed on job dependents is not offset by significant wages, because salaries received by field staff are still below the regional minimum wage (Ministry Health of Indonesia, 2018). Furthermore, compensation is often done inconsistently, with benefits given once every 2 to 3 months using the *rappel* system. This irregularity in compensation further exacerbates financial pressures on field staff, affecting their overall motivation and job satisfaction (Ministry Health of Indonesia, 2018). Despite discussions by the House of Representatives on the salaries of staff in the field, the determination of ideal compensation for field staff has not yet materialized. Addressing the issue of insufficient pay and inconsistent compensation is essential to attract and retain qualified and motivated human resources in psychosocial support programs, ensuring the delivery of quality care to individuals with mental health disorders.

Employee mutations pose additional challenges in implementing psychosocial support programs. When employees are transferred to new duties, it disrupts continuity of care and takes time for them to adapt to new places and tasks. This transition period may result in a temporary decline in the quality of services provided and delays in addressing the needs of individuals with mental health disorders. In addition, achieving the same level of skills and expertise as previous employees requires training, which adds to the time constraints and budget of the program. The adjustment period for new employees can directly impact the overall performance and success of psychosocial support programs, as it affects the continuity and effectiveness of the care provided to the community.

Ensuring stable and consistent staff in psychosocial support programs is critical to reducing the challenges associated with employee mutations. Strategies such as providing a comprehensive orientation and training program for newly assigned employees, establishing clear communication channels, and implementing effective knowledge transfer processes can help minimize the negative impact of employee mutations on program performance and outcomes. In addition, proactive planning and coordination between various stakeholders can contribute to a smooth employee transition, ensure continuity of care and maintain the quality of psychosocial support services.

It is critical for program managers and policymakers to recognize the importance of addressing employee mutations as a significant challenge in

implementing psychosocial support programs. By prioritizing strategies that support a smooth transition and providing the necessary support and resources to new hires, the program can reduce the negative impact of employee mutations and ensure effective and uninterrupted delivery of psychosocial support to local communities.

The implementation of psychosocial support programs is influenced by human resources, including the number, type, and quality of staff. Multiple positions and inadequate compensation also contribute to challenges in implementing the program effectively. Limited human resources result in inadequate data management, making it difficult to set program targets and objectives. The lack of staff also affects activities such as home visits, monitoring, and evaluation needed by patients with mental disorders who have been discharged from the hospital. The burden of dependence on employment is not offset by significant wages, with salaries still below the regional minimum wage, and compensation often provided with less frequency than the regular pay system. Lack of human resources and compensation problems prevent optimal implementation of psychosocial support programs (Walker et al., 2022). These challenges demonstrate the need for policymakers to invest in mental health and ensure that sufficient resources are allocated for the successful implementation of psychosocial support programs.

Stigma

Belief in supernatural phenomena remains prevalent among the residents of Mataram city. Mental disorders are often seen as abnormal conditions associated with the supernatural, leading to a lack of understanding among some individuals in Mataram. According to local beliefs, the unusual and challenging behaviors displayed by individuals with mental disorders are closely linked to occult disturbances or jinn. This prevailing opinion hinders the effective implementation of programs aimed at addressing mental disorders, including psychosocial support. Moreover, society holds the belief that mental disorders cannot be cured through medical treatment alone, suggesting that diseases caused by supernatural forces require traditional approaches rooted in magical practices. Consequently, this belief system has contributed to a lack of public interest in accessing mental health management services, such as self-examination services, and has posed as a significant obstacle to the successful implementation of psychosocial support guidelines mandated by the central government.

The lack of knowledge about mental health often leads to various negative perceptions and judgments by society towards individuals with mental disorders. These negative assessments include the belief that mental disorders are a disgrace, that they are caused by jinn or supernatural entities, and the misconception that mental disorders cannot be cured. People with psychiatric disorders are often stigmatized, and both they and their families may face social isolation and discrimination. These negative assumptions and attitudes have a detrimental

impact on individuals seeking help and on the implementation of mental health programs.

One of the main issues is the perception that mental disorders are shameful or abnormal, which results in the community being less supportive and understanding towards individuals with mental health challenges. This stigma hinders efforts to promote awareness, education, and access to mental health services. It is important to address this stigma by raising public awareness and promoting positive attitudes towards mental health. Education campaigns, community engagement programs, and media initiatives can play a significant role in challenging these negative beliefs and reducing stigma.

Furthermore, there is a specific challenge in engaging the lower middle class in seeking mental health treatment. Many individuals in this socioeconomic group perceive seeking help for mental health problems as unconventional or embarrassing. They may fear being judged or viewed negatively by others. It is crucial to provide culturally sensitive and accessible mental health services that address the concerns and barriers faced by this population. This can include community outreach programs, counseling services integrated within primary healthcare settings, and initiatives to increase mental health literacy.

While individuals from the upper-middle-class may have a better understanding of mental health, there is still a need to increase the overall interest and engagement in mental health services among the general public. This can be achieved through targeted awareness campaigns, school-based education programs, and the integration of mental health topics into various sectors, such as workplaces and community centers. Collaboration between government agencies, healthcare providers, and community organizations is essential to create a supportive environment and ensure that mental health services are accessible to all segments of society.

Stigma is a major challenge that hinders the successful implementation of psychosocial support programs for people with mental disorders. Stigma associated with mental disorders in the patient's society and family includes belief in supernatural causes such as jinns, the view that mental disorders are a disgrace, and society's negative attitudes toward people with mental disorders. These stigmas prevent patients from accessing mental health services and prevent families from supporting patients with mental disorders. As a result, mental disorders are perceived as a burden and are hidden or ignored, leading to limited success of psychosocial support programs. To overcome this stigma, public education about mental health is urgently needed. Educating people about the reality of mental disorders and their healing abilities is indispensable in changing negative attitudes towards mental health. In addition, involving the family in the treatment and management of mental disorders is also necessary. Families should be educated on how to support patients, including providing encouragement to access mental health services and creating a supportive environment at home. In

addition, community participation in psychosocial support programs should be encouraged, and strategies to address stigma should be developed and implemented (Walker et al., 2022).

Inconsistent Program Implementation

The informant highlighted the current lack of routine psychosocial support services in the community, which are provided only on a conditional basis depending on the availability of annual budget allocations. This inconsistent provision of services poses challenges in meeting the ongoing needs of the community in addressing mental health problems. The limited implementation of psychosocial support services falls short in adequately addressing the existing demand.

Furthermore, the informant mentioned that psychosocial support is predominantly offered as a response to disasters, but even in this context, the activities carried out are minimal and lack follow-up actions. Staff members working in the field emphasized the importance of having an ongoing psychosocial support program, recognizing that the impact of disasters on mental health cannot be effectively addressed with just one or a few sessions of support. They emphasized the need for a sustainable and integrated approach that provides continuous support to affected individuals and groups over an extended period of time.

In light of these challenges, the informants recommended that the government and relevant stakeholders prioritize and allocate sufficient resources for psychosocial support programs. They emphasized the importance of better coordination among various parties, including the Health Service, Social Service, non-governmental organizations, and the community, to develop programs that are consistent, sustainable, and responsive to the community's psychosocial support needs.

To address these recommendations and challenges, it is crucial for the government to recognize the significance of psychosocial support as an essential component of mental health services. Adequate funding should be allocated to establish and maintain sustainable psychosocial support programs that go beyond just emergency responses. Interagency collaboration, including close coordination between health and social services, NGOs, and community organizations, is vital for creating comprehensive and effective psychosocial support programs that meet the long-term needs of individuals and communities affected by mental health issues.

Additionally, it is important to raise awareness and educate the public about the benefits of psychosocial support, debunking myths and reducing stigma surrounding mental health. By promoting community engagement and involvement, individuals and families can be empowered to seek and access psychosocial support services without hesitation. Ongoing monitoring and evaluation of these programs should be conducted to ensure their effectiveness

and to make necessary adjustments based on community feedback and evolving needs. Family involvement in mental health treatment has also been shown to reduce the risk of recurrence of mental illness (Chien & Thompson, 2013; Ronald C. Kessler et al., 2010)

Lack of Family Support

According to several staff members of psychosocial support programs, the lack of family involvement in the recovery of individuals with mental disorders is a significant issue. While services are available to stakeholders, the minimal role of the family poses a challenge in patient management and treatment. It is observed that families show indifference and neglect towards patients with mental disorders, choosing to distance themselves and not fulfill their responsibilities in supporting the patient's recovery.

This lack of family support has detrimental effects on the recurrence of mental disorders in patients. The family's behavior can be attributed to the stigma and limited understanding surrounding mental health conditions, leading to their reluctance to actively participate in the patient's care. Overcoming this challenge requires urgent education for families and communities about mental health.

Research has consistently shown that family involvement in mental health treatment leads to better outcomes for patients and reduces the risk of relapse (Chien & Thompson, 2013; Ronald C. Kessler et al., 2010). Family psychoeducation programs have also demonstrated improvements in family functioning, reduced stress levels, and enhanced quality of life for both patients and families (Barnes, 2010). Therefore, it is crucial to implement educational initiatives that specifically target families, aiming to increase their understanding of mental health and reduce the associated stigma.

Additionally, promoting community participation in psychosocial support programs and developing strategies to address stigma are important steps. Community-based interventions, such as anti-stigma campaigns and mental health awareness programs, have been proven effective in reducing stigma and improving attitudes towards mental health (Clement et al., 2015; Corrigan & Watson, 2002). By involving the community and implementing targeted interventions, the negative perceptions and barriers surrounding mental health can be gradually dismantled.

In summary, addressing the challenge of insufficient family support in the management and treatment of individuals with mental disorders requires comprehensive education initiatives for families and communities. Encouraging family involvement, implementing family psychoeducation programs, promoting community participation, and combating stigma are all essential steps in ensuring the holistic and effective support of individuals with mental health conditions.

E. CONCLUSION

Based on this research, there are several important implications that can be taken to improve psychosocial support programs in Mataram, NTB. First, efforts are needed to increase the number and quality of human resources in the field of mental health through intensive recruitment and training. This will help address the shortage of professionals and improve competence in delivering effective psychosocial services. In addition, it is important to involve families in the patient's care process by increasing their understanding of mental disorders and reducing the associated stigma. Family education and support programs can be an effective step in building family involvement and increasing their role in patient care. In addition, coordination between relevant departments and infrastructure improvement also need to be considered to ensure consistency of psychosocial support programs. Finally, there needs to be close collaboration between governments, non-governmental organizations, and communities in planning, implementing, and monitoring psychosocial support programs to ensure their effectiveness and sustainability. By implementing these recommendations, it is hoped that psychosocial support programs in Mataram, NTB can provide significant benefits to individuals in need and improve their overall quality of life.

References

- Barnes, T. R. E. & P. C. (2010). Antipsychotic polypharmacy in schizophrenic inpatients. *Noropsikiyatri Arsivi*, 47(1), 23–28.
- Chien, W. T., & Thompson, D. R. (2013). An RCT with three-year follow-up of peer support groups for Chinese families of persons with schizophrenia. *Psychiatric Services*, 64(10), 997–1005. <https://doi.org/10.1176/appi.ps.201200243>
- Cordero, A., & Castro, E. P. (2020). The institutionalization of mental health and psychosocial support in emergencies in Indonesia. *International Journal of Disaster Risk Reduction*, 51(May).
- Keynejad, R., Spagnolo, J., & Thornicroft, G. (2021). WHO mental health gap action programme (mhGAP) intervention guide: Updated systematic review on evidence and impact. *Evidence-Based Mental Health*, 24(3), 124–130. <https://doi.org/10.1136/ebmental-2021-300254>
- Listritika S, B. K. dan I. W. (2019). Pengaruh Rangkap Jabatan Terhadap Efektivitas Kinerja P2K3 Dalam Upaya Peningkatan Keselamatan Dan Kesehatan Kerja Di Pt X. *Jurnal Kesehatan Masyarakat (e-Journal)*, 7(3), 60–65.
- Matsea, T., Ryke, E., & Weyers, M. (2019). Stakeholders' Views Regarding Their Role as Support System for People with Mental Illness and Their Families in Rural South Africa. *Community Mental Health Journal*, 55(4), 672–679. <https://doi.org/10.1007/s10597-018-0337-6>

- Ministry Health of Indonesia. (2018). Hasil Utama Riset Kesehatan Dasar (RISKESDAS).
- Nisa, S. A. (2019). Peran Stakeholder terhadap Program Kesehatan Jiwa dalam Penanggulangan Pasung pada Orang Dengan Gangguan Jiwa (ODGJ) Di Kecamatan Moyudan Kabupaten Sleman. 7(2018), 72–75. <https://jurnal.ugm.ac.id/jmpk>
- Nisa, S. A., Hasanbasri, M., & Priyatni, N. (2020). Peran Stakeholder Terhadap Program Kesehatan Jiwa Dalam Penanggulangan Pasung Pada Orang Dengan Gangguan Jiwa (Odgj) Di Kecamatan Moyudan Kabupaten Sleman. *Jurnal Manajemen Pelayanan Kesehatan (The Indonesian Journal of Health Service Management)*, 23(02), 58–67. <https://jurnal.ugm.ac.id/jmpk>
- Nugrahani, F. (2014). dalam Penelitian Pendidikan Bahasa. 信阳师范学院, 1(1), 305.
- Ronald C. Kessler, 1, Jennifer Greif Green, 1, Michael J. Gruber, 1 Nancy A. Sampson, 1, Evelyn Bromet, 2, Marius Cuitan, 3, Toshi A. Furukawa, 4, Oye Gureje, 5 Hristo Hinkov, 6, Chi-Yi Hu, 7 Carmen Lara, 8, Sing Lee, 9, Zeina Mneimneh, 10, Landon Myer, 11, Mark Oakley-Browne, 12, & Jose Posada-Villa, 13 Rajesh Sagar, 14 Maria Carmen Viana¹⁵ & Alan M. Zaslavsky. (2010). Using neuroimaging to predict relapse to smoking: role of possible moderators and mediators. *International Journal of Methods in Psychiatric Research*, 17 Suppl 1(Supplement 1), S78–S82. <https://doi.org/10.1002/mpr>
- Ruddin, F. (2020). Dinamika Kesehatan Mental Penduduk Arab Saudi selama Pandemi Covid-19. *Psikoislamika : Jurnal Psikologi Dan Psikologi Islam*, 17(1), 17. <https://doi.org/10.18860/psi.v17i1.9337>
- Smith, J. A. (2003). Egill Hedinn Bragason ., 63–67.
- Sofwan, S. Vi., Iqbal, M., & Irdianti, Y. (2020). Penerapan Metode Pencatatan Pesediaan Obat Di Puskesmas Cipedes. *Jurnal Ilmiah Akuntansi*, 10(2), 37–38. <https://www.ejournal.unibba.ac.id/index.php/akurat/article/view/313/271>
- Stansbury, J. P., Ried, L. D., & Velozo, C. A. (2006). Unidimensionality and bandwidth in the Center for Epidemiologic Studies Depression (CES-D) Scale. *Journal of Personality Assessment*, 86(1), 10–22. https://doi.org/10.1207/s15327752jpa8601_03
- Walker, A., Alkasaby, M. A., Baingana, F., Bosu, W. K., Abdulaziz, M., Westerveld, R., Kakunze, A., Mwaisaka, R., Saeed, K., Keita, N., Walker, I. F., & Eaton, J. (2022). Challenges and Opportunities for Mental Health and Psychosocial Support in the COVID-19 Response in Africa: A Mixed-Methods Study. *International Journal of Environmental Research and Public Health*, 19(15). <https://doi.org/10.3390/ijerph19159313>

World Health Organization. (2019). The WHO Special Initiative for Mental Health (2019-2023): Universal Health Coverage for Mental Health. The WHO Special Initiative for Mental Health (2019-2023), 2019, 1–4. <https://apps.who.int/iris/bitstream/handle/10665/310981/WHO-MSD-19.1-eng.pdf?ua=1>