



Influencing Factors Attitude Health Workers in Patients Mental Disorders

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Abstract

The negative view experienced by individuals with mental disorders will have an impact on the attitude of health workers in providing services at health service facilities. The aim of this research is to identify the factors that influence the attitude of health workers towards patients with mental disorders. This quantitative research was conducted at the District Health Center. Fakfak-West Papua at 127 workers using a purposive sampling technique. Data collection used a self-developed attitude scale, the MHKQ and GSES scales. Data analysis uses multivariate tests using regression. The results of the research obtained significant values for the relationship between various health worker attitude factors, including: There is an influence between mental health literacy ($P 0.048 < 0.005$), self-efficacy ($P 0.001 < 0.005$), $R^2 = 0.335$. The research conclusion is that there is a significant influence of mental health literacy and self-efficacy on the attitude of health workers in patients with mental disorders, with an influence of 33.5%. It is hoped that the Health Service and Community Health Centers can pay attention to the factors that influence the attitude of Health workers in serving patients with mental disorders so that they can provide better services.

Keywords: *Attitude, Mental Health Literacy, Self-Efficacy, Health Workers*

INTRODUCTION

Mental disorders are a significant health problem, and health professionals have a key role in helping patients with mental disorders to manage their conditions. According to [Indonesian Ministry of Health \(2018\)](#) the prevalence of emotional mental disorders indicated by symptoms of depression and anxiety for those aged 15 years and over reaches 14 million people or 6% of the total population of Indonesia. Meanwhile, the prevalence of severe mental disorders, such as schizophrenia, reaches around 400,000 people or 1.7 per 1,000 population.

Furthermore, based on [Indonesian Ministry of Health \(2018\)](#) data in West Papua province, the prevalence of people with serious disorders is 0.14% of the total population. So, according to the head of the district Health Service. Fakfak, in its statement to Embaran media.com, estimated that there are 1,412 people with mental disorders in West Papua province, while in Fakfak district, there are 114 people with mental disorders out of the total population [Indonesian Ministry of Health \(2018\)](#).

Mental disorders are also disorders that affect one or more mental functions and brain disorders that are characterized by disturbances in emotions, thought processes, behaviour and perception ([Stuart, 2013](#)). This mental disorder also causes stress and suffering for the sufferer mentally, resulting in difficulties that a person must face because of his relationships with other people, difficulties because of his perception of life and his attitude towards himself.

The process of treating patients with mental health problems is challenging because mental health problems are less visible than physical health problems and have different causes and symptoms. In treating mental disorders, the most important foundation is the relationship of trust between health workers and patients. This is important because the nurse's role is to help patients solve problems according to their abilities ([Wahyuningsih & Subekti, 2018](#)).

Mental health care staff in caring for patients can have negative attitudes and beliefs towards

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people with mental disorders, which have an impact on the treatment of individual patients, on treatment and patient services. It is because mental health nurses have more contact with patients with mental disorders, which can encourage nurses to be more pessimistic and hopeless in caring for patients (Hansson et al., 2013).

So, the involvement of health workers who are parties who are directly in contact with patients is expected to have a positive perception of healing patients with mental disorders. Therefore, people who suffer from mental disorders have access to places where they receive health services and have the right to own health workers who work in health service centers without discrimination. One of the factors considered by health professionals to be important in providing mental health services to patients with mental disorders is having good mental health literacy. Literacy Mental health refers to knowledge and beliefs about mental disorders that help individuals recognize, manage, and prevent mental disorders.

People who are not fully aware of mental health problems reduce the stigma of mental illness because they have sufficient knowledge about mental health problems. Mental Health Literacy is the ability of human cells to collect sufficient information regarding mental health to improve the attitude of health workers in their services. It was stated by Wang et al. (2023) that nurses who work in mental hospitals or hospitals with a higher level, a higher professional degree or higher education have an excellent level of mental health literacy. In contrast, those who have worked at a graduate hospital, with a more extended work schedule, or who have not yet been married have a mental health literacy rate that is not yet at its maximum.

In addition to mental health literacy, physical health workers also have high levels of self-efficacy, which, in this case, is the belief that one can carry out the expected actions. Self-efficacy can lead to different behaviours among individuals with the same abilities because self-efficacy can influence choices, goals, problem-solving, and persistence in business. The higher the efficiency, the better the attitude the health worker provides in providing services to patients with mental disorders. Based on this description, the author is interested in knowing the factors that influence the attitude of health workers towards patients with mental disorders.

LITERATURE REVIEW

Attitude of Health Workers

According to King (2016), attitudes are our various opinions and beliefs about other people, objects, ideas, and how we feel about various things. Attitudes can be divided into two types, namely positive and negative attitudes. A positive attitude is an attitude of agreeing, accepting or liking. On the other hand, a negative attitude is rejecting or not liking. According to Azwar (2021), attitude is said to be an evaluative response. A response will only arise if the individual faces a stimulus requiring an individual reaction.

Azwar (2021) further explained that the attitude component consists of three components, namely: (a) the cognitive component is aspects of attitude related to a person's assessment of an object or subject; (b) The affective component is understood as an individual's feelings (emotions) towards an object or subject, which are following the results of his evaluation; (c) conative component This component concerns the individual's desire to act under his beliefs and desires.

Mental Health Literacy

Jorm (2000) defines mental health literacy as an individual's belief, knowledge and behaviour regarding mental disorders, which is designed to help them recognize, manage and act as preventive measures against mental disorders. Kutcher et al. (2016) explain that health literacy is a cognitive and social skill that determines the motivation and ability of a person's cells to accelerate, understand and implement in ways that increase and maintain health. According to

(Fakhriyani, 2022), mental health literacy is related to concern for mental health.

According to Jorm et al. (1997), the main aspects of mental health literacy are: (a) Knowledge is the ability of individual cells to recognize mental disorders. It includes understanding how to find information about mental health, risk factors and their causes, self-care, as well as the presence of professional professionals who can help deal with mental health problems. (b) This belief undermines the individual's belief that mental illness is a sign of personal weakness and can prevent seeking professional help for mental health problems. (c) Attitudes are attitudes and habits that contribute to the identification and search for appropriate psychological help.

Self-Efficacy

According to Bandura (1997), self-efficacy is a belief in the ability of the ultimate someone to have a certain level of control over the functions and events in their environment. Self-efficacy or self-efficacy, according to Fakhrani (2022), is an individual's belief or self-confidence about his ability to carry out a task, organize, produce something, achieve goals and implement actions to achieve certain skills.

Bandura (1997) revealed that individual self-efficacy will vary for each person based on three dimensions, namely: (a) Magnitude dimension, this dimension refers to the level of difficulty of a task if a person's cells feel capable of carrying it out; (b) strength dimension, this dimension refers to the strength of confidence and expectations regarding the abilities of the individual's cells and (c) generality dimension, this dimension refers to a series of comprehensive actions in which the individual can feel confident in his or her abilities which are limited to the activity or particular situation or various activities and situation.

RESEARCH METHOD

The type of research used in this research is correlation, and the research design used in this research is a cross-sectional design. The population in this study consisted of health workers who worked at the District Health Center—Fakfak, with a total of 489. The sample taken in this research was using a purposive sampling technique of 127 people. This research was carried out for approximately one month, from October 13 to November 13 2023. The research instrument used a questionnaire consisting of 4 parts, namely demographic data, health worker attitude questionnaire, Mental Health Literacy using a scale adapted from The Mental Health Knowledge Questionnaire (MHKQ) by (Wang et al., 2013), and Self Efficacy using the General Self-Efficacy Scale (GSES) is a self-efficacy instruction that is developed in various situations developed by Schwarzer and Jerusalem (1995). Data analysis was carried out employing multivariate analysis using regression.

FINDINGS AND DISCUSSION

Results

Table 1 revealed that more than three-quarters of respondents were female gender (79.53%), almost half of the respondents were adults (49.6%), more than half of the respondents had a Diploma (D3) education (69%), half of the respondent's profession as nurses (50.4%), almost half from respondents status employee contract (45.7%) and more from three-quarter respondents with work period under ten years (63.8%).

Table 1. Distribution Frequency Characteristics Respondents at the Community Health Center Regency, Fakfak (n=127)

Characteristics respondents	f	%
Gender		
Man	26	20.47%
Woman	101	79.53%
Age		
20-30 years	53	41.7%
31-45 Years	63	49.6%
Over 45 Years	11	8.7%
Education		
Diploma (D3)	88	69%
Bachelor	37	29%
Masters	2	2%
Profession		
Doctor	12	9.4%
Nurse	64	50.4%
Midwife	51	40.2%
Employment status		
Civil servants	57	44.9%
Contract	58	45.7%
Apprenticeship	12	9.4%
Years of service		
1-10 Years	81	63.8%
11-20 Years	39	30.7%
Over 20 Years	7	5.5%

Table 2 showed that the majority of respondents own quite a good attitude, as much as 64%, more than half of the respondents own officer mental health literacy, sufficient good health (52%), more than half of respondents have sufficient good Self-Efficacy (62%).

Table 2. Description of Attitudes of health workers, mental health literacy, and self-efficacy of Health workers at the Community Health Center Regency, Fakfak

Characteristics	f	%
Attitude health workers		
High	31	11%
Medium	82	64%
Low	14	24%
Literacy Mental health		
High	42	33%
Medium	66	52%
Low	19	15%
Self-Efficacy		
High	30	24%
Medium	79	62%
Low	18	14%

In multivariate testing with regression, it was discovered that all research variables had a significant influence on the attitude of health workers towards mental disorder patients because the research results showed a significance value (p) < 0.005 where mental health literacy $p=0.048$ and self-efficacy $p<0.001$ with $R^2=0.335$ meaning that mental health literacy and Self-Efficacy

have an influence of 33.5% on the attitude of health workers towards patients with mental disorders.

Discussion

Based on the results of the analysis of the relationship between the variable mental health literacy and health behaviour, health was found to be $p < 0.05$, namely a total of 0.048; $r = 0.176$. This means H_{a1} , which means "there is a significant influence on mental health literacy on mental health attitudes in patients with mental disorders", was accepted. It means that if mental health literacy is high, then the health and wellness attitude will also be higher or will be better in dealing with patients with mental disorders. On the other hand, if Health Literacy is low, then the Health and Health literacy attitude will also be low in dealing with patients with mental disorders. It is in line with the research results of [Marangu et al. \(2021\)](#) that health workers who have low mental health literacy mean their speed in diagnosing and serving disabled patients is also low. A high or low level of mental health literacy can have a significant impact on the services received by the community in accessing health services. In other words, the influence of Health and Wellness Literacy occurs directly and positively with the attitude of Health and Wellness personnel in providing services to patients with mental disorders. This means that if health literacy is low, it will impact the effectiveness of health literacy in carrying out services such as diagnosing, providing therapy, and so forth.

Apart from that, the same research carried out by [Afifah \(2016\)](#) shows that visible health literacy in visible energy is still low. Low health literacy in the health sector can impact the diagnosis process, patient care and treatment, the family's understanding of the condition, and how to treat the patient.

Health literacy is necessary to help develop knowledge and understanding of diagnosing patients with mental problems or disorders. Apart from that, good mental health literacy can significantly improve mental health, especially communication with patients and families who experience mental health. However, this study found minimal impact on mental health literacy.

Minor impacts can be caused by different experiences and knowledge among health workers, resulting in differences in the analysis process and service processes. It was discovered by researchers from the results of research that the experience of health workers is still lacking in dealing with patients with mental disorders because their work period is still less than ten years. Apart from that, at the three health centers, mental health services are provided by non-professional health workers such as nurses and graduate doctors, and there are still psychologists who are placed at community health centers.

It was followed by research carried out by [Korhonen et al. \(2022\)](#), which stated that it was important to increase health knowledge through health services, community health centers and developing social skills through training. Standardization and improvement of mental health technology are crucial for successfully integrating health services into the whole of the service and will increase the response to mental health problems. Research conducted by [Beasley et al. \(2020\)](#) revealed that increasing health literacy and reducing stigmatizing attitudes among students resulted from increasing self-efficacy.

Based on the test results of the variable linear relationship Self Efficacy towards the attitude of the health of the lake, it was found to be $p < 0.05$, i.e. a value of greater than 0.001; $R=0.594$. It means that H_{a2} that has emerged, "There is an influence of self-efficacy on mental health and mental health in patients with mental disorders", was accepted. It means that if the cell health has a high Self-Efficacy, then the attitude of the patient with mental illness will also be high. On the other hand, if Self-Efficacy is low, then the attitude towards disabled patients will also be low. So, it can

be concluded that there is a significant positive influence on Self-Efficacy on mental health and mental health in patients with mental disorders.

Rosnania (2022) also stated that the higher the self-efficacy, the higher the level of caring behaviour of nurses and vice versa. The lower the level of self-efficacy, the lower the nurses' caring behaviour level. High self-efficacy is supported by nurse experience, cognitive processes, and affective processes, and it allows nurses to be involved in care to increase care delivery. On the other hand, when nurses have low self-efficacy, they are less able to act caringly when providing nursing services.

A nurse who has high confidence that he is able to carry out his duties well will also have high self-confidence in carrying out his work so that when faced with less conducive situations, such as a patient who suddenly goes berserk or a patient who does not want to talk, the nurse is effective can act without appearing hesitant and anxious. High self-efficacy helps individuals to complete tasks and reduces psychological and physical workload. It aligns with research conducted by Andini and Sovitriana (2023). Individuals with high self-efficacy consider failure as a result of a lack of hard effort, knowledge and skills. They will increase efforts to prevent failures that may arise. Those who fail to carry out something usually regain their self-efficacy.

CONCLUSIONS

After researching the factors that influence the attitudes of health workers towards patients with mental disorders, it can be concluded that of the two factors that influence the attitudes of health workers towards patients with mental disorders, namely mental health literacy and self-efficacy, both have a significant influence on the attitudes of health workers in providing mental health services in patients with mental disorders.

Suggestions for community health centers are expected to be able to provide ongoing training related to the early detection of cases of mild mental disorders, cases of mild mental disorders, and serious illnesses to the community and the management of community health centers.

It is hoped that suggestions for health workers can increase mental health literacy. It is done in order to be able to understand and explain to patients with mental disorders or families and, more clearly, to the community in order to increase awareness, tolerance and the ability to live healthily and increase Self-Efficacy. It is so that health workers have confidence in their own abilities and skills in treating mental disorders and early diagnosing mental disorder patients. Improving the good attitude of health workers in providing services without taking a bullish view of all health service providers.

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