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# FACTORS INFLUENCING THE ROLE OF MENTAL HEALTH CADRES IN HANDLING PATIENT WITH SCHIZOPHRENIA

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# ABSTRACT

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People with mental disorders are people who experience disturbances in mind, behavior and reasoning that manifest in the form of a set of symptoms and or meaningful behavioral changes, and can cause suffering and obstacles in carrying out the functions of as people. The purpose of the study was to find out the factors that affect the role of mental health cadres. Research method: this study uses quantitative with cross-sectional research methods, in determining samples using a total sampling technique, namely with a total of 30 cadres. The results of the study: There is a relationship between the knowledge of mental health cadres in carrying out roles with P-value 0.000, self-motivation of mental health cadres in carrying out roles with P-value 0.003, social support of mental health cadres in carrying out the role of Pvalue 0.001, there is no relationship between the availability of P-value 0.330 services and the incidence of patient with schizophrenia. The factors of knowledge, self-motivation, social support of mental health cadres in carrying out roles have a significant relationship with the incidence of patient with schizophrenia while the factors of the availability of cadre services in carrying out the role have no relationship with the incidence of patient with schizophrenia in the south Sumedang Health Center area. suggestions from this study are expected to improve comprehensive mental health services and it is hoped that a mental health will be formed.

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#### 1. INTRODUCTION

People with Mental Disorders (patient with schizophrenia) are people who experience disturbances in thoughts, behavior and feelings that are manifested in the form of a set of symptoms and / or meaningful changes in behavior, and can cause suffering and obstacles in carrying out the functions of people as humans (Kemenkes RI 2019). Mental health problems have become an unresolved health problem in the midst of society, both at the global and national levels. Until now, in Indonesia, these cases are very concerning because of the lack of public concern, resulting in stigma and discrimination against people with mental disorders (Kemenkes RI 2021). Mental health is a condition in which an individual can develop physically, mentally, spiritually, and socially so that the individual realizes their own abilities, can cope with pressure, can work productively, and is able to contribute to their community (Law Number 18 of 2014 concerning Mental Health).

The prevalence of mental disorders worldwide according to WHO, (World Health Organization) in 2019, there were 264 million people with depression, 45 million people with bipolar disorder, 50 million people with dementia, and 20 million people with schizophrenia. Although the prevalence of schizophrenia is relatively low compared to the prevalence of other types of mental disorders according to the National

Institute of Mental Health (NIMH), schizophrenia is one of the top 15 causes of disability worldwide, people with schizophrenia have a greater tendency to increase their risk of suicide (NIMH, 2019). Data from the American Psychiatric Association (APA) in 2014 stated that 1% of the world's population suffers from schizophrenia.

Cases of mental disorders in Indonesia based on the results of the Basic Health Research (Riskesdas) in 2018 are increasing, this increase can be seen from the increase in household prevalence. This means that per 1,000 households there are 7 households with patient with schizophrenia, so the estimated number is around 450 thousand severe patient with schizophrenia. From the Rikesdas data on People with Mental Disorders (patient with schizophrenia) who received health services by Regency / City in West Java 2021, 3 areas were found to receive health services, including Depok City 110.3%, Cianjur Regency 100% and Cimahi City 98.2%. Meanwhile, areas that did not receive health services were Garut Regency 0%, Ciamis Regency 0% and Sumedang Regency 0%. Severe cases of People with Mental Disorders (patient with schizophrenia), from the South Sumedang Puskesmas UPT Health Office report, were 607 people (10.51%) of the total number of mental health disorder visits of 5,775 or 0.44% of the total outpatient visits in 2018 (Sumedang Regency Health Office Profile 2019).

Community health workers (kader) should be members of the community in which they work, are elected by the community, should be accountable to the community for their activities and should be supported by the health system but not necessarily be part of its organization, and have shorter training than professional workers (WHO, 2007). In line with Lewin et al (2005) any health cadre who performs functions related to the delivery of health services must be trained in some service actions and do not have official certificates as health professionals.

Mental health cadres in carrying out their role are influenced by various specific factors, namely knowledge, self-motivation, social support and service availability. From the results of research by Parwati, agung et al (2018) showed that the role of mental health cadres was more in the less category with a total of 31 people (59.6%), while the good category was 21 people (40.4%). The role and function of mental health cadres based on programs in the mentally healthy alert village includes cadres finding and reporting psychosocial cases and mental disorders that occur in the community; mobilizing individuals, groups, and communities to participate in mental health programs in the community; cadres conduct home visits in which cadres monitor the patient's ability to overcome problems, and monitor family involvement in caring for patients; In addition, cadres also refer cases of psychosocial and mental disorders in the community to CMHN (Community Mental Health Nursing) nurses or health services, cadres also make notes or reports on the development of the ability of mentally ill patients to assist both through home visits, mobilizing individuals, reporting cases in their area (Keliat, 2010).

Based on the results of the researcher's preliminary study, currently in the South Sumedang Health Center area, mental health cadres have been formed, but from the Puskesmas officer's report, the role of mental health cadres is still lacking, including mental health cadre knowledge, self-motivation, social support and service availability. According to the theory of Notoatmodjo (2017) explains that knowledge is the result of human sensing, or the result of someone knowing objects through the senses owned by the eyes, nose, ears, and so on. Based on the theory of Pratama and Widodo (2017) that knowledge is able to make someone have awareness so that they are able to behave in accordance with their knowledge. From the results of research by Nafiah, Hanna (2021) concluded that cadre knowledge plays a role in the recovery of patients with mental disorders in assisting both through home visits, individual mobilization, reporting cases in the area, and making referrals as well as recording or reporting on patient progress.

Based on the theory of Rahmayani (2013) explains that an important factor affecting the achievement of good work is the motivation factor because motivation plays a role in changing the behavior of a worker. Based on the motivation of the cadres driven by several factors, among others, wanting to help develop the soul, then feel that being a cadre is a field of reward, and the cadres do not feel burdened by the tasks assigned. The results of research conducted by Rahmayani (2013) show that there is an influence between self-motivation on the performance of CMHN cadres in Bireun Regency with a sig value of 0.00 (p < 0.05).

According to the theory of the writing team of the faculty of psychology, Diponegoro University (2018) states that the most important form of social support and is considered important is emotional support from family, close friends and social and health workers, because this support is related to the role of mental health cadres and clients' needs for affection and positive emotions from others so that they are valued. To make it easier for people to reach mental health services, a health post was established in Wonokromo village.

According to Law of the Republic of Indonesia number 36 of 2009 concerning health, a health service facility is a tool and / or place used to organize health service efforts, both promotive, preventive, curative and rehabilitative carried out by the Government, local government, and / or the community. The availability of services, the existence of health facilities or health posts, the community can reach mental health services more easily, from the results of research by Firdaus, Akhmad F, (2020) said that the provision of mental

health services is quite good, but it must be improved again, one example is the activeness of health workers / mental health cadres in visiting patients with people with mental disorders (patient with schizophrenia).

Based on the above background, the researcher assumes that the lack of role of mental health cadres is influenced by several factors, namely knowledge, self-motivation, social support and service availability. So this is an interesting material to be studied more deeply about the factors that influence the role of mental health cadres with the handling of People with Mental Disorders (patient with schizophrenia) in the South Sumedang Health Center area.

#### 2. METHOD

The type of research used in this study is quantitative research. Quantitative research method is one type of research whose specifications are systematic, planned and clearly structured from the beginning to the making of the research design. Quantitative research methods are based on the philosophy of positivism, used to research on certain populations or samples, data collection using research instruments, data analysis is quantitative / statistical, with the aim of testing predetermined hypotheses (Sugiyono, 2011).

The research method used is the Cross Sectional approach, this method aims to determine the factors that influence the role of mental health cadres on the handling of People with Mental Disorders (patient with schizophrenia), these factors include knowledge, self-motivation, social support, and service availability. This research was conducted in the South Sumedang Health Center area. opulation of the whole subject or object with the characteristics studied (Notoatmodjo, 2014). The population in this study were all mental health cadres in the South Sumedang Health Center area, totaling 30 people spread across 8 villages. The sample is a portion taken from the overall object under study and is considered representative of the population. The sample of this study used total sampling, namely the total population of 30 people. The instrument validity test shows that the r alpha of all the variables above is greater than r table = 0.6319, meaning that the research instrument and can be continued in further research. The reliability test shows that the r alpha of all the variable adove is greater than r table = 0.707, which means that the research instrument is reliable and can be continued in further research.

Bivariate analysis is carried out on two variables that are thought to be related or correlated (quoted by Sommeng, Faisal 2018). In this study to determine the relationship between knowledge, self-motivation, social support, availability of services with the incidence of people with mental disorders using the chi square test, with a significance level of  $\alpha = 0.05$  meaning that there is a significant relationship between the two variables, then the hypothesis is accepted.

### 3. RESULTS AND DISCUSSION

### 3.1. Results

#### **3.1.1 Univariate Analysis**

In Univariate analysis, the frequency distribution of each variable will be displayed, both independent variables and dependent variables, while the results of univariate analysis are described as follows:

1. Frequency Distribution of Knowledge in South Sumedang Health Center Area

Table 1

Frequency Distribution of Knowledge in South Sumedang Health Center Area

Knowledge	Total	Percentage		
Good	20	66,7		
Simply	9	30,0		
Less	1	3,3		
Total	30	100,0		

Based on table 1 on the frequency distribution of knowledge of mental health cadres, it is found that most cadres have good knowledge, namely 20 cadres (44.7%).

2. Frequency Distribution of Self-Motivation in South Sumedang Health Center Area

## Table 2

Frequency Distribution of Self-Motivation in South Sumedang Health Center Area

Self-motivation	Total	Percentage		
Good	20	66,7		
Simply	7	23.3		
Less	3	10,0		
Total	30	100,0		

Based on table 2 on the frequency distribution of self-motivation of mental health cadres, it is found that most cadres have good self-motivation, namely 20 cadres (66.7%).

3. Frequency Distribution of Social Support in South Sumedang Health Center Area

1 2	11 6	
Social support	Total	Percentage
Good	17	56,7
Simply	12	40,0
Less	1	3,3
Total	30	100,0

 Table 3

 Frequency Distribution of Social Support in Sumedang Selata Health Center Area

Based on table 3 on the frequency distribution of social support for mental health cadres, it is found that most cadres have good social support, namely 17 cadres (56.7).

4. Frequency Distribution of Service Availability in South Sumedang Health Center Area

# Table 3

#### Frequency Distribution of Service Availability in South Sumedang Health Center Area

Service availability	Total	Percentage		
Good	7	23,3		
Simply	10	33,3		
Less	13	43,3		

Based on table 3 on the frequency distribution of service availability, it is found that most of the cadres in the South Sumedang health center area have less service availability, namely 13 cadres (43.3%).

5. Frequency Distribution of patient with schizophrenia Handling in the South Sumedang Health Center Area in 2022

Table 4
Frequency Distribution of patient with schizophrenia Handling in the South Sumedang Health Center
Area in 2022

Incidence of patient with schizophrenia	Total	Percentage
Good	21	70,0
Less	9	30,0
Total	30	100,0

Based on Table 5 regarding the frequency distribution of patient with schizophrenia handling in the South Sumedang Health Center Region in 2022, it was found that most respondents thought that the incidence of patient with schizophrenia was in the good category, namely 21 (70%).

6. Relationship between the knowledge of mental health cadres in carrying out their roles and the handling of patient with schizophrenia in the South Sumedang Health Center area

Table 6

Relationship between the knowledge of mental health cadres in carrying out their roles and the handling of patient with schizophrenia in the South Sumedang Health Center area

Handling Skizophrenic Patient							
Knowledge	Good		Less		Total		P- value
	F	%	F	%	F	%	_
Good	13	65,0	7	35,0	20	100,0	
Simply	7	77,8	2	22,2	9	100,0	1
Less	1	100,0	0	0,0	1	100,0	0,000
Total	21	70,0	9	39,0	30	100,0	

Based on Table 6 on the relationship between the self-motivation of mental health cadres in carrying out their roles with the handling of people with mental disorders in the South Sumedang Health Center area in 2022, it was found that the self-motivation factor of mental health cadres in carrying out their roles had a good effect on the handling of patient with schizophrenia, namely 75%.

Based on the Chi Square statistical test with a 95% confidence level assessed at 0.05, the P value = 0.003 where the P value < 0.05, so that the null hypothesis is rejected or Ha is accepted, meaning that there is evidence of a significant relationship between the self-motivation of mental health cadres in carrying out their roles with the handling of people with mental disorders (patient with schizophrenia) in the South Sumedang Health Center Area.

7. The relationship between the social support of mental health cadres in carrying out their roles and the treatment of patient with schizophrenia in the South Sumedang Health Center area

 Table 7

 The relationship between the social support of mental health cadres in carrying out their roles and the treatment of patient with schizophrenia in the South Sumedang Health Center area

Handling Skizophrenic Patient							
Social support	Good		Less			Total	Q- value
	F	%	F	%	F	%	
Good	14	82,4	3	17,6	17	100,0	
Simply	8	66,7	4	33,3	12	100,0	0.001
Less	0	00,0	1	100,0	1	100,0	0,001
Total	22	73,3	8	26,7	30	100,0	

Based on Table 7 on the relationship between the social support of mental health cadres in carrying out their roles with the handling of people with mental disorders in the South Sumedang Health Center area in 2022, it was found that the social support factor of mental health cadres in carrying out their roles had a good effect on the handling of patient with schizophrenia, namely as much as 82.4%.

Based on the Chi Square statistical test with a confidence level of 95% assessed alpha = 0.05, the P value = 0.001 where the P value <0.05, so that the null hypothesis is rejected or Ha is accepted, meaning that there is a significant relationship between the social support of mental health cadres in carrying out their roles with the handling of people with mental disorders (patient with schizophrenia) in the South Sumedang Health Center Region in 2022.

8. Relationship between the availability of services in carrying out the role with the handling of patient with schizophrenia in the South Sumedang Health Center area

 Table 8

 Relationship between the availability of services in carrying out the role with the handling of patient with schizophrenia in the South Sumedang Health Center area

Handling patient with schizophrenia							
Availability	Good		Less		Total		R- value
service	F	%	F	%	F	%	
Good	6	85,7	1	14,3	1	100,0	
Simply	6	54,5	5	45,0	11	100,0	0.220
Less	9	75,0	3	25,0	12	100,0	0,330
Total	21	70,0	9	30,0	30	100,0	

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Based on Table 8 on the relationship between the availability of services in carrying out roles with the handling of people with mental disorders in the South Sumedang Health Center area in 2022, it was found that the availability of services in carrying out roles had less influence on the handling of patient with schizophrenia, namely 66.7%. Based on the Chi Square statistical test with a confidence degree of 95% assessed alpha = 0.05, the P value = 0.330 where the p-value <0.05, so that the null hypothesis is accepted or Ha is rejected, meaning that there is no significant relationship between the availability of services in carrying out the role with the handling of people with mental disorders (patient with schizophrenia) in the South Sumedang Health Center Region.

#### **3.2 Discussion**

# 3.2.1 Relationship between the knowledge of mental health cadres in carrying out their roles with the handling of people with mental disorders (patient with schizophrenia)

Based on statistical tests showed a relationship between the knowledge of mental health cadres in carrying out the role with the handling of people with mental disorders with a value of (p=0.000). The frequency distribution of knowledge with the handling of people with mental disorders the highest percentage is good, this is influenced by the background of cadres with high school education, namely 60% of the total cadres. According to the theory of Notoatmojo (2007) that a person's knowledge is influenced by the level of education, experience, culture and economy.

The results showed that knowledge has an influence on the ability of mental health cadres to carry out their roles in the community. Knowledge is obtained from the learning process, in this case cadres attend basic mental health training. The training provided to mental health cadres is the basis for cadres in carrying out their role. Data obtained that cadres have attended training twice. This is sufficient, so that it can be seen in the field that cadres can carry out their roles well. Mental health cadres together with health workers from the puskesmas conduct visits with one of their assistants, namely certainty to consume drugs regularly, while for the healthy and at-risk categories the role of cadres is to conduct mental health counseling so that the community understands and knows how to prevent it.

In line with Nafiah's research, Hanna, 2021 concluded that cadre knowledge plays a role in the recovery of patients with mental disorders in assisting both through home visits, individual mobilization, reporting cases in the region, and making referrals as well as recording or reporting patient progress.

Based on the results of the research, the researchers found that the role of mental health cadres in the South Sumedang Health Center area in primary prevention is through home visits by identifying at-risk family members, providing motivation and health education to the families of patient with schizophrenia patients. From the results of the study, most patient with schizophrenia patients were cared for by their families, there was no increase in patient with schizophrenia cases due to heredity, getting health services, and the stigma from the outside community was low.

# 3.2.2 The relationship between self-motivation of mental health cadres in carrying out their roles with the treatment of people with mental disorders (patient with schizophrenia)

Based on the Chi Square statistical test with a confidence degree of 95% assessed as = 0.05, the P value = 0.003 where the P value <0.05, so that the null hypothesis is rejected or Ha is accepted, in other words, it is statistically proven that there is a significant relationship between the self-motivation of mental health cadres in carrying out their roles with the handling of people with mental disorders (patient with schizophrenia) in the South Sumedang Health Center Area. This factor is the most dominant factor in taking an action. The theory of motivation new directions for theory states that motivation represents a psychological process that will cause responsibility to arise and is the initial stage of willingness to act to achieve goals. Everyone wants to be trusted, included and recognized as a potential person so that self-confidence arises and is ready to take responsibility (Djuhaeni, 2010).

Motivation owned by mental health cadres is able to move cadres in carrying out their roles in the community. The caring attitude of cadres is based on the motivation of cadres who are happy with social activities, become cadres without coercion from anyone, and with the aim of increasing knowledge and socialization skills in the community. In line with research conducted by Rahmayani (2013) shows that there is an influence between self-motivation on the performance of CMHN cadres in Bireun Regency with a sig value of 0.00 (p < 0.05).

# **3.2.3** The relationship between social support of mental health cadres in carrying out their roles with the handling of people with mental disorders (patient with schizophrenia)

Based on the Chi Square statistical test with a confidence degree of 95% assessed = 0.05, the P value = 0.001 where the P value <0.05, so that the null hypothesis is rejected or Ha is accepted, in other words statistically proven there is a significant relationship between social support for mental health cadres in carrying out their roles with the handling of people with mental disorders (patient with schizophrenia) in the South Sumedang Health Center Area. According to the Indonesian Ministry of Health, 2014 states that social support is one of the factors that can help reduce the rate of relapse, so it is important for the community to provide social support for people with mental disorders. This is in line with research conducted by Fitri, et al (2012), namely family support can strengthen individuals, create family strength, increase self-esteem, have the potential as the main prevention strategy for the whole family in facing the challenges of daily life and relevance in a society that is in a stressful environment.

The reinforcing factor in this study is social support that influences mental health cadres in carrying out their roles. Cadres get support from family, the surrounding community and especially from related agencies, namely the social service, mental health cadres are also able to work together with officers from the puskesmas and with village midwives.

# **3.2.3** Relationship between the availability of services in carrying out roles with the treatment of people with mental disorders (patient with schizophrenia)

Based on statistical tests, there is no relationship between the availability of mental health services for mental health cadres in carrying out their roles with the handling of people with mental disorders with a value of (p=0.330). The distribution of the frequency of health services with the handling of people with mental disorders, the highest percentage is less, this is influenced by the absence of mental health services, namely mental health posts, including facilities and infrastructure.

Based on the results of the research that the researchers obtained that mental health services have been carried out only during home visits and services when patients are at the health center, whereas according to the theory of Keliat et al, 2012 comprehensive mental health services include 3 primary, secondary and tertiary prevention. Primary care settings can be the most important point of contact between clients with mental health problems and the health care system. The aim of the service is to prevent mental disorders, maintain and improve mental health. The target of the service is community members who have not experienced mental disorders according to age groups, namely children, adolescents, adults, and the elderly. Activities in primary prevention are health education programs, developmental stimulation programs, mental health socialization programs, stress management, preparation for parenthood (Keliat et al, 2012).

From the results of Marchira Calra R's research, 2011 states that for Indonesian countries with limited mental health resources, the most important thing is to integrate mental health services in primary care, mental health data surveys in the community, mental health training, mental posyandu, availability of medicines are things that must be considered in integrating mental health in primary care. Secondary prevention is directed at those who have been exposed to certain diseases so that their condition does not worsen (Setiadarma, 2002). According to Keliat et al, 2012, the focus of nursing services in secondary prevention is early detection and immediate treatment of psychosocial problems and mental disorders. The service goal is to reduce the incidence of mental disorders. Service targets are community members who are at risk or show signs of psychosocial problems and mental disorders.

Secondary services in the management of patient with schizophrenia patients in the South Sumedang Health Center Area have been implemented in home visits by mental health workers from the health center. These activities include early detection, teaching and reminding families in the administration of drugs Setiadarma, 2002 states that tertiary prevention applies to those who are severely affected by the disease so that their lives are not threatened. According to (Keliat et al, 2012). The target of its services is community members who experience mental disorders in the recovery stage, activities in tertiary prevention, namely, rehabilitation programs, socialization programs, programs to prevent stigma. According to the Activity Action Plan of the Directorate of Prevention and Control of Mental Health and Drug Problems of the Ministry of Health of the Republic of Indonesia for 2015-2019, one of the requirements that must be met by the puskesmas to be able to organize mental health services is that the puskesmas must have at least 2 (two) mental health workers (doctors and nurses or other health workers) who are trained in mental health services for a minimum of 30 (thirty) hours of study.

Based on the results of the research, the researchers found that mental health services in the South Sumedang Puskesmas area have health workers, namely nurses and village midwives who are competent and mental health cadres who are trained and able to cooperate in maximizing in handling mental health cases. From the research results of the research results obtained by the researchers that in the South Sumedang Puskesmas area, mental health cadres are able to carry out their roles so that the incidence of patient with schizophrenia can be handled, including rehabilitation programs that have been implemented, patient with schizophrenia patients who experience relapse are referred for treatment at a mental hospital, there are no cases of patient with schizophrenia due to heredity and the stigma and discrimination of patient with schizophrenia patients from the surrounding community has decreased.

#### 4. CONCLUSION

Based on the results of the research and discussion described in the previous chapters, the conclusions that can be drawn from this research are:

- 1. Knowledge of mental health cadres was in the good category 66.7% of cadres, self-motivation was in the good category 66.7% of cadres, social support was in the good category 56.7% of cadres, availability of services was in the poor category 43.3% and the incidence of patient with schizophrenia was in the good category 70% of respondents.
- 2. There is a relationship between the knowledge of mental health cadres in carrying out their roles with the incidence of people with mental disorders (patient with schizophrenia) in the South Sumedang Health Center area in 2022, the results of the chi square test P value = 0.000
- 3. There is a relationship between self-motivation of mental health cadres in carrying out their roles with the incidence of people with mental disorders (patient with schizophrenia) in the South Sumedang Health Center area in 2022, the results of the chi square test P value = 0.003.
- 4. There is a relationship between social support for mental health cadres in carrying out their roles with the incidence of people with mental disorders (patient with schizophrenia) in the South Sumedang Health Center area in 2022, the results of the chi square test P value = 0.001.
- 5. There is no relationship between the availability of services and the incidence of people with mental disorders (patient with schizophrenia) in the South Sumedang Health Center area in 2022, the results of the chi square test P value = 0.330.

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