STRENGTHENING THERAPEUTIC REGIMEN IN FAMILIES WITH ODGJ IN THE TODO HEALTH CENTER WORK AREA

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Abstract
The condition of People with Mental Disorders (ODGJ) is a serious public health problem and requires special attention. Proper treatment and good family support are important factors in recovery and improved quality of life for individuals with ODGJ. Community service in strengthening therapeutic regimens for families with ODGJ in the Todo Health Center work area aims to improve family understanding and skills in caring for and supporting family members who experience ODGJ. This service is carried out through a series of activities, including counseling, training, and mentoring families with ODGJ for a certain period. The results of this service show an increase in family understanding of ODGJ, including trigger factors, symptoms, and appropriate actions in responding to crises. In addition, families are also trained in adhering to therapeutic regimens prescribed by medical personnel, including regular medication timing and healthy lifestyles for family members with ODGJ. The results of the evaluation showed an improvement in the quality of life of family members with ODGJ, where they more actively participated in social activities and were able to manage stress arising from ODGJ conditions. In addition, there is also an increase in adherence to the therapeutic regimen he undergoes, so that the use of drugs becomes more consistent and effective.

Keywords: ODGJ, Regimen, Therapeutic.

INTRODUCTION
East Nusa Tenggara Province is in the midst of a mental health emergency. Based on data from Basic Health Research (Riskesdas) in 2018, NTT ranks 3rd as the Province with the highest prevalence of depression and mental-emotional disorders in people aged more than or equal to 15 years after Central Sulawesi and Gorontalo Provinces with information that only 9% of depression sufferers take medication or undergo medical treatment. Riskesdas data also explains that the reasons for not taking medication for people with mental disorders include; feeling healthy (36%), not routinely seeking treatment (33.7%), unable to buy routine medication (23.6%), unable to withstand drug side effects (7%), often forgetting to take medication (6.1%), feeling the dose is not appropriate (6.1%), medication is not available (2.4%) and other reasons (32%) (1).

Data from the Manggarai Regency Health Office, there are 503 people with severe mental disorders (ODGJ) with details of ODGJ who have been treated totaling 325 people, ODGJ who

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have been shackled 47 people, ODGJ who have released shackles 27 people, and ODGJ who have not released shackles (2). Currently, Manggarai Regency does not have a mental hospital. Treatment for People with Mental Disorders (ODGJ) only relies on the Renceng Mose Mental Health Rehabilitation Center which can accommodate a maximum of 30 people. Based on the results of interviews with health workers working at Panti Renceng Mose, the percentage of new patients treated at Panti Renceng Mose is only 50%, while the rest are patients who have been treated before (Patients in and Out). The effect of these problems is that the length of treatment is limited and many patients are forced to undergo treatment at home. This blockage makes the main care necessary to be carried out in each family that is part of the community.

Patients who are treated in rehabilitation centers are due to ineffective family therapeutic regimens or run not optimally. Likewise, patients who are forced to be treated at home must have families who can apply effective therapeutic regimens to patients. A therapeutic regimen is the ability of the family to carry out the function of care for clients who are sick to achieve optimal recovery (3). Therapeutic regimens in patients suffering from mental disorders in several ways, including, first, increasing family knowledge related to mental health problems and how to care for mental patients. Second, Increasing awareness of drug adherence for ODGJ patients, and Helping families to manage or manage the burden of care among family members.

Health education on mental health issues is very useful to increase public knowledge about mental health. Research shows that people with a good level of knowledge about mental health can do well for people with mental disorders (4). In addition, good public knowledge can reduce the stigma for people with ODGJ. Stigma – the bad stigma that often circulates is that ODGJ will not heal, ODGJ is dangerous and ODGJ cannot do anything. This stigma can reduce family motivation in doing treatment (5). Health education related to medication adherence is also very important to do to reduce psychotic symptoms in patients. The results showed that patients feel bored or desperate to continue taking drugs so strategies are needed to increase awareness for patients and patients' families of the importance of taking drugs for people with mental disorders (6).

One of the strategic plans of PKM Santu Paulus Ruteng Catholic University is assistance to the community, therefore PKM is considered very necessary to be carried out by considering that mental health problems must be immediately considered in Manggarai Regency and mental health problems are one of the achievements targets that must be achieved in the vision and mission of the Santu Paulus Ruteng Catholic University undergraduate nursing study program. The Todo Health Center area has handled 42 ODGJ patients who need monitoring.

The Main Team in this Community Partnership Program consists of 3 people, including; 1) Master of Community Nurse whose duty is to ensure that families carry out family functions and duties in providing care and ensuring that families can take advantage of health facilities or services to be able to access medicines needed by patients. 2) Master of Public Health in charge of providing mental health education related to mental health problems in families. 3) Master of Mental Nurse who is in charge of teaching families how to administer drugs, how to monitor patient compliance in taking drugs and strategies for patients who refuse to take drugs, and help organize the management of the burden of care for family members to reduce the risk of burnout in caring for patients with mental disorders.
IMPLEMENTATION METHOD

The method in implementing PKM uses the empowerment method. Community empowerment becomes a process in community development in the form of extracting abilities, competencies, thinking power, and creativity to improve the quality of life of the community. The empowerment strategy is implemented by empowering the community which is carried out in 3 (three) stages in its implementation, namely (1) Socialization (Preparation), (2) Implementation of activities, and (3) Monitoring and Evaluation. The use these 3 methods are effectively used to assist in strengthening therapeutic regimens for families with ODGJ. This mentoring activity carried out by the service team is a way used to empower ODGJ so that the goals of community service are achieved.

The socialization method is carried out to provide an understanding of the program, flow, and stages of the PKM program, as well as provide an understanding of the material that must be understood first. The method of implementing this activity is carried out by collaborating with partner villages. At the monitoring and evaluation stage, it is carried out once a month.

1. Preparatory Stage
   In the preparation stage, the PkM team will carry out several activities, including the following:
   a. Data collection of activity targets are ODGJ patients and families in the Tenda Village work area
   b. Field conservation, that is, the PKM team conducts field observation activities to map the place and location of health education related to mental health and medication adherence.
   c. Conduct student recruitment activities by the number of target groups
   d. The PKM team will conduct training on coping strategies for patients who refuse to take medication and improve communication in utilizing health facilities (Puskesmas)

2. Implementation Phase
   a. Health education is still carried out by observing health protocols, using masks, implementing hand washing habits, and using hand sanitizers, as well as social distancing. This process is carried out by the PKM team together with PkM partners.
   b. Before the health education was carried out, the partner team conveyed matters related to the importance of being involved in the counseling activities carried out. The partner team also conveyed data from the village about ODGJ patients in the partner village area.
   c. The PkM team provides a Pre-test on mental health
   d. The PKM team provides health education related to Mental Health and medication adherence.
   e. The PKM team taught families to make the correct medication schedule
   f. The PkM team improves the function of family care by utilizing health facilities through visits to Puskesmas
   g. The PkM team provides a post-test on mental health
RESULTS AND DISCUSSION

Through Community Service activities, Strengthening the Therapeutic Regimen for ODGJ clients obtained several significant improvements, including:

1. Community Awareness Raising
   Through outreach activities and socialization campaigns, public awareness of the importance of therapeutic regimens for ODGJ clients increased. The public is becoming more understanding of their role in supporting ODGJ clients and mental health care as a whole.

2. Close Collaboration with Puskesmas
   This dedication strengthens the collaboration between the service team and the Todo Health Center. The service team works closely with medical personnel at the Puskesmas in monitoring ODGJ clients, facilitating therapy, and providing support.

3. Counseling to Clients' Families
   Families of ODGJ clients receive special counseling on how to provide effective support in carrying out therapeutic regimens. This increases family involvement in care and reduces the burden on clients.

4. Improved Client Compliance
   ODGJ clients’ adherence to therapeutic regimens improved significantly after appropriate support and education. Clients become more disciplined in taking medications, following therapy, and maintaining mental health routines.

5. Increased Social Support
   The community in the Todo Health Center work area provides better social support to ODGJ clients. Stigmatization of people with mental disorders is reduced, and clients feel more accepted and supported in their environment.

Figure 1. Patient Visit
Community service with a focus on strengthening therapeutic regimens for ODGJ clients in the Todo Health Center work area faces several challenges and opportunities:

1. The Challenge of Stigmatization
   
The stigmatization of mental disorders is still a problem in society. This dedication
emphasizes the importance of continuous education and socialization to change people's views on mental health.

2. Resource Availability
The availability of human resources and mental health infrastructure in the Todo Health Center work area affects the implementation of service programs. Close collaboration with Puskesmas is needed to overcome these limitations.

3. Program Continuity
It is important to ensure the therapeutic regimen strengthening program continues and is continuous after the service period ends. A strategy is needed to involve stakeholders and related parties in efforts to prevent and maintain the mental health of ODGJ clients.

4. Evaluation and Improvement
Continuous evaluation of the results and impact of the service program is key to improving the effectiveness and relevance of the program. Through this evaluation, successes can be identified as well as aspects that need to be improved for future programs.

5. The Role of Puskesmas
Puskesmas Todo has a central role in strengthening the therapeutic regimen in ODGJ clients. They need to continue to facilitate the program and ensure ongoing support for clients and their families.

CONCLUSION
This dedication emphasizes the importance of a collaborative and holistic approach in caring for ODGJ clients as well as the active role of the community in supporting mental health efforts. With continuous efforts, it is expected to create a more inclusive and supportive environment for ODGJ clients in the Todo Health Center work area.

REFERENCES