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Original Research

# Pengetahuan sebagai Faktor Dominan Efikasi Diri Kader dalam Melakukan Deteksi Dini Gangguan Jiwa

# *Knowledge as the Dominant Factor in Improving Self-Efficacy of Cadre in Performing Early Detection of Mental Disorder*

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## ABSTRAK

Kader kesehatan jiwa berperan penting di masyarakat dalam pelaksanaan deteksi dini gangguan jiwa. Pengetahuan, pengalaman, dan dukungan sosial merupakan sebagian dari faktor yang diduga mempengaruhi efikasi diri kader dalam melakukan deteksi dini. Tujuan penelitian ini untuk mengetahui hubungan tiap faktor dengan efikasi diri kader dan mengetahui faktor dominan yang mempengaruhi efikasi diri kader. Penelitian ini menggunakan desain observasi analitik dengan pendekatan *cross sectional*. Sebanyak 138 sampel yang memenuhi kriteria inklusi diambil secara proporsional dari lima desa di wilayah kerja Puskesmas Bantur Kabupaten Malang. Data dianalisis secara deskriptif dan dilakukan uji regresi logistik untuk mengetahui faktor dominan yang meningkatkan efikasi diri kader. Hasil menunjukkan kader adalah ibu rumah tangga pada usia produktif dengan latar belakang pendidikan menengah. Secara umum kader telah memiliki pengetahuan, pengalaman, dan dukungan sosial yang baik dalam melakukan deteksi dini ganggungan jiwa. Uji regresi logistik menunjukkan kader yang memiliki pengetahuan tinggi akan meningkatkan 6,853 kali efikasi diri (OR=6,853, p=0,007) dibandingkan kader yang memiliki pengetahuan rendah. Pengetahuan, pengalaman dan dukungan sosial yang baik akan meningkatkan efikasi diri kader dalam melakukan deteksi dini gangguan jiwa dengan pengetahuan sebagai faktor dominan.

**Kata Kunci:** Deteksi dini gangguan jiwa, efikasi diri kader, pengetahuan

## *ABSTRACT*

*Cadres of mental health play an important role in the community in the application of early detection of mental disorders. Knowledge, experience, and social support are some of the factors that are assumed to influence cadre's self-efficacy in conducting early detection. The purpose of this study was to determine the relationship of each factor with cadre's self-efficacy and to find out the dominant factors that influence cadre's self-efficacy. This study used an analytical observation design with a cross sectional approach. A total of 138 samples that met the inclusion criteria were taken proportionally from five villages in the working area of Bantur Health Center Malang Regency. Data were descriptively analyzed, and logistic regression tests were conducted to determine the dominant factors that increase cadre's self-efficacy. The results show that cadres are housewives of productive age with a background of secondary education. In general, cadres have knowledge, experience, and good social support for early detection of mental disorders. Logistic regression test shows cadres who have high knowledge will increase 6.853 times self-efficacy (OR=6.853, p=0.007) compared to cadres who have low knowledge. Knowledge, experience, and good social support will increase cadre's self-efficacy in early detection of mental disorders with knowledge as the dominant factor.*

*Keywords: Early detection of mental disorders, knowledge, self-efficacy of cadre*

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## INTRODUCTION

Mental disorder is a global health problem. Throughout the world, about 35 million people are facing depression, 60 million people are suffering from bipolar disorder, 21 million people are suffering from schizophrenia, and 47.5 million people are experiencing dementia (1). Data of Basic Health Research (Riskesdas) in 2013 showed that the prevalence of severe mental disorders in East Java amounted to 2.2 per 1000 population or ranked the third highest in Indonesia (2). This figure may be lower than the actual number due to stigmatization (labeling) in mental patients who cause fear to the sufferers themselves, their families, and the public thus they do not report to health personnel (3).

Mental disorder management in primary care is an important strategy. Community Mental Health Nursing (CMHN) is one of the programs in Community Health Centers that involve community leaders in the effort to reduce the number of mental disorders. The community leaders are then trained and will serve as mental health cadres with a hope that the community is closer to mental health services. One of the roles of mental health cadres is to make early detection of mental disorders in families under an aim of knowing the mental health conditions in families (4).

The implementation of early detection of mental disorders carried out by mental health cadres is strongly influenced by cadres' self-efficacy. Self-efficacy is a person's belief in own ability to undergo behavior that is in accordance with the goals (5). Factors that influence cadre self-efficacy include good knowledge that will encourage someone to believe what he is doing (6). The results of previous studies indicate that the factor that influences self-efficacy is experience. Experience is an event that has been undergone before, thus it will increase the self-efficacy during performing their duties (5). Other studies also show that the other factor that influences self-efficacy is social support. Social support that comes from family, friends, or other people will make someone sure of what he or she does (7).

The number of patients detected with severe mental disorders in the working area of Bantur Community Health Center in 2017 was 134 people, with a number of cadre as many as 210 people. The role of mental health cadres is very helpful in reducing the number of mental disorders that exist in public, because the presence of mental health cadres can reflect the number of mental disorders that have not been detected in the public (4). This study was conducted to describe cadre self-efficacy and the influencing factors. The results of this study could be the basis for strengthening the role of mental health cadres to detect mental disorders in public.

## METHOD

The design of this study used observational analytic with cross sectional approach. This research has received permission from the Health Research Ethics Committee of Faculty of Medicine, Universitas Brawijaya (No. 02/EC/KEPK-S2/01/2018). The study was conducted in Bantur Community Health Center working area in January-March 2018. The research instrument used in this study was questionnaire to measure knowledge (8), experience (9), social support (10), and self-efficacy (11).

*Population and Sample*

The population in this study were all mental health cadres in the area of Bantur Community Health Center, namely 210 mental health cadres. The sample of this study was 138 cadres who had been calculated using Slovin formula. Sampling was carried out evenly from 5 villages. Respondents were selected using inclusion criteria, such as: 1) have worked as mental health cadres for approximately 6 months, 2) aged 25-45 years, 3) are willing to be involved in the research.

*Data analysis*

Demographic data and respondents' characteristics in each variable were presented in percentages. Multivariate analysis using logistic regression analysis was used to find out the most dominant factor for cadre's self-efficacy in conducting early detection of mental disorders.

## RESULTS

Demographically, most cadres were in productive age (25-35 years) with secondary education (junior and senior high school). Most health cadres involved in the research were housewives.

**Table 1. General characteristics of respondents**

| No. | Characteristics | | n | % |
|---|---|---|---|---|
| 1 | Age | 25-35 years | 72 | 52,2 |
| | | 36-45 years | 66 | 47,8 |
| | | Total | 138 | 100 |
| 2. | Education level | Elementary School | 17 | 12,3 |
| | | Junior High School | 72 | 52,2 |
| | | Senior High School | 46 | 33,3 |
| | | College | 3 | 2,2 |
| | | Total | 138 | 100 |
| 3. | Job | Housewife | 95 | 68,8 |
| | | Employee | 25 | 18,1 |
| | | Farmer | 16 | 11,6 |
| | | Teacher | 2 | 1,4 |
| | | Total | 138 | 100 |

The results (Table 2) show that, mostly, 73 people (52.9%) have good experience and high social support (68.8%). Cadres also have knowledge (88.4%) and high self-efficacy (62.3%).

**Table 2. Overview of experience, social support, knowledge, and cadre self-efficacy**

| No | Characteristics | | n | % |
|---|---|---|---|---|
| 1. | Experience | Low | 23 | 16,7 |
| | | Average | 42 | 30,4 |
| | | Good | 73 | 52,9 |
| | | Total | 138 | 100 |
| 2. | Social Support | Low | 16 | 11,6 |
| | | Average | 27 | 19,6 |
| | | Good | 95 | 68,8 |
| | | Total | 138 | 100 |

**Table 2. Overview of experience, social support, knowledge, and cadre self-efficacy (continued)**

| No | Characteristics | | n | % |
|----|----------------|-------|-----|-----|
| 3. | Knowledge | Low | 16 | 11,6 |
| | | Good | 122 | 88,4 |
| | | Total | 138 | 100 |
| 4. | Self-efficacy | Low | 52 | 37,7 |
| | | Good | 86 | 62,3 |
| | | Total | 138 | 100 |

Multivariate logistic regression test showed that knowledge (OR = 6.853, p = 0.007), experience (OR = 4.976, p = 0.004), and social support (OR = 3.673, p = 0.033) were the dominant factors related to self-efficacy that was related to early detection of mental disorders. Knowledge was a predictor of efficacy with the highest odds ratio. The model (Table 3) shows that the contribution of the influence of independent variables (knowledge, experience, and social support) on the variation of self-efficacy is 27.0%, while the remaining 73% is influenced by other variables not included or discussed in this study.

**Table 3. Logistic regression test results**

| Variabel | Nilai p | OR | 95% *Confidence Interval* | | R *Square* |
|----------|---------|-----|-------------------|-------------|----------|
| | | | Lower Bound | Upper Bound | |
| Pengetahuan | 0,007 | 6,853 | 1,698 | 27,667 | 0,270 |
| Pengalaman | | | | | |
| Pengalaman (1) | 0,070 | 2,921 | 0,915 | 9,325 | |
| Pengalaman (2) | 0,004 | 4,976 | 1,668 | 14,841 | |
| Dukungan Sosial | | | | | |
| Dukungan Sosial (1) | 0,608 | 1,439 | 0,359 | 5,768 | |
| Dukungan Sosial (2) | 0,033 | 3,673 | 1,110 | 12,150 | |
| *Constant* | 0,001 | 0,005 | | | |

## DISCUSSION

Experience, social support, and cadre knowledge are three predictor factors that can explain some parts of cadre's self-efficacy in detecting mental disorders. The better experience, social support, and knowledge of cadres, the better the cadre's self-efficacy. Knowledge is the most dominant predictor factor.

This study is in accordance with the results of research conducted by Rias and Pratama that there is a significant relationship between knowledge and self-efficacy in caregivers (6,12). Knowledge can make someone have awareness, so they behave according to their knowledge (6). Behavior changes based on knowledge make the cadre sure to make early detection of mental disorders without coercion but based on own cadres' awareness. Higher level of education of a person will increase his or her ability to obtain information, so it increases the knowledge (13). Increasing cadre knowledge is a very strategic step to improve the ability of cadre services in early detection of mental disorders (14).

Another predictor of efficacy is experience. Cardone et al. stated that one's experience can improve the efficacy in carrying out duties (15). Unzuntiryaki also identified that among the four sources of information that can influence the development of self-efficacy, experience of being success is the most important role in improving self-efficacy (16). Experience is a past or event that serves as a determinant of one's self-efficacy. In someone's life, the success of solving a problem will increase self-efficacy, otherwise failure will reduce self-efficacy (5). Cadres who have good experience in early detection can improve cadre self-efficacy in early detection of mental disorders compared to cadres who have low success experience.

In line with the results of this study, Sari and Sumiati also Rizkia found that there was a significant relationship between social support and self-efficacy in completing their tasks (17,18). Social support received by cadres can be in the form of emotional support, award support, instrumental support and information support (18). Social support received by cadres has different levels. Good or appropriate social support for what is needed will provide a sense of comfort and can lead to confidence in their ability to do their jobs (7).

This study identified three predictors (education, experience, and social support) of cadre self-efficacy in early detection of mental disorders, with knowledge as the dominant factor. Increasing knowledge through training and mentoring in practice will strengthen cadre self-efficacy.

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