

Determinants of Mental Disorders Patients Relapsed in Aceh Hospital

Muhibuddin¹, Marthoenis², Said Usman³, Irwan Sputra⁴, T Maulana⁵

¹Master of Public Health At Syiah Kuala University, Indonesia

²Master of Nursing, Syiah Kuala University, Indonesia

^{3,4,5}Faculty of Medicine, Syiah Kuala University, Indonesia

Abstract— *Introduction: Recurrence is a patient's condition where the same symptoms appear as before and result in the patient having to be treated again. Until now the presence of mental patients in Aceh province has reached 13,697 people, of those cases 5,102 people have taken medication according to the standards. The causes of relapse that occur in patients were caused by various factors, including still not adhering to taking medication, lack of support from health workers, families, and the community as well as the bad stigma of society towards patients with mental disorders. Objective: The study aimed to identify the determinants of the recurrence of patients with mental disorders at the Aceh Mental Hospital in 2023. Methodology: This research was a type of analytic survey research using a quantitative method with cross-sectional data collection. The populations in this study were all mental patients who experienced relapse at the Aceh Mental Hospital. The number of samples in the study was 70 people. Univariate, bivariate, and multivariate analysis were used to process the data. Results: There was a correlation between adherence to taking medication (P value 0.002), support from health workers (P value 0.001), family support (P value 0.000), and social support (P value 0.02) which means there is a correlation to the recurrence of mental disorders patients. Recommendation: The study indicated that the most dominant factors related to the recurrence of patients with mental disorders were gender and family support.*

Keywords— *Mental Disorders, Family Support, Social Support.*

I. INTRODUCTION

The existence of people with mental disorders (ODGJ) is still a big challenge for all of us. Various problems caused by ODGJ which can sometimes disrupt public order, can even lead to violent behavior that can injure other people. Perhaps it is not something that is foreign to us when we hear about the mass beating of ODGJ. If someone with a mental disorder is left alone, it will cause the burden caused by the mental disorder to increase. In life, it is not uncommon for very serious social impacts to occur in the form of rejection, exclusion, and discrimination.

As reported by the Serambi Indonesia daily, “a man who is suspected of having a mental disorder became the victim of a mob rampage in the Alue Ie Mameh Village area, Kuala District, Nagan Raya, Thursday (20/2/2020) evening at around 20.00 WIB. The man had run amok and had his hands tied and his clothes opened by a number of residents and was linked to a child abduction case. This incident is of course very unfortunate, ODGJ should have received support and reinforcement from the community, instead they became victims of beatings due to the attitude of the people who took the law into their own hands. Besides that, it still exists today society that tends to give a negative stigma to people with mental or mental disorders, namely by denouncing and considering it a disgrace, the assumption of crazy people.

When studied in depth the existence of ODGJ also has an impact on the economy, in the form of a person's loss of productivity to earn a living for his family. So that it becomes a burden on the family, and the family also cannot work because they have to take care of and focus on patients with mental disorders. The high cost of treatment that must be borne by the family and society also adds to the burden of problems for them.

On the other hand mental disorders are very dangerous for a person even though they do not directly cause death, if not handled properly or left unchecked can cause long suffering for the individual. It is something that we all need to know that mental health disorders are not just psychological symptoms, but are very broad, starting with sufferers who experience mild symptoms such as anxiety and depression. Other symptoms include reduced enthusiasm for work, frequent absences from work, inability to cooperate with colleagues, frequent anger, addiction to drugs, alcohol, cigarettes, dementia in parents, autism in children to very severe cases such as schizophrenia.

The problems of people with mental disorders (ODG) are not only the responsibility of the mental hospital alone, but are part of a shared responsibility. It is time for the community to take part to play a role in handling ODGJ (Community Based Psychiatric Services), not just focusing on the Hospital alone. (*Hospital Based*). In handling ODGJ, the Mental Hospital has provided its services to the fullest, so that patients who come for treatment at the mental hospital with a time span of one week to three months (90 days) can be declared clinically cured. This is in accordance with LOS (the average length of time a patient is treated in one year), even though the LOS standard according to the Ministry of Health is 6 to 9 days. But in theory the treatment of patients with mental disorders averages 90 days (rsjsambanglihum.kalselprov.go.id 2017).

Furthermore, the patient will return to the family to live life like other people in general. They will live productively both economically and socially. But sometimes not all patients can last long in society. Some of them only lasted one week, even shorter than that. Relapses (relapses) that occur in patients are caused by various factors, one of which is the result of a bad stigma from society towards PLWH.

According to WHO (World Health Organization) data on the prevalence of mental disorders around the world, in 2019, there were 264 million people experiencing depression, 45 million people suffering from bipolar disorder, 50 million people experiencing dementia, and 20 million people experiencing schizophrenia. Although the prevalence of schizophrenia is recorded in relatively lower numbers than the prevalence of other types of mental disorders based on the National Institute of Mental Health (NIMH), schizophrenia is one of the 15 major causes of disability worldwide, people with schizophrenia have a greater tendency to increase the 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.

Meanwhile based on Basic Health Research (Riskesmas) in 2018 quoted from (kemkes.go.id 2021) shows that the prevalence of schizophrenia/psychosis in Indonesia is 7% per 1000 households. This shows that out of 1000 households, there are 70 households who have household members (ART) with schizophrenia/severe psychosis. Based on the records of the Indonesian Ministry of Health in 2019, the highest prevalence of psychiatric disorders was in the Provinces of Bali and DI Yogyakarta with respective prevalences showing rates of 11.1% and 10.4% per 1000 households having ART with people with schizophrenia/psychosis. It was followed by other provinces including: West Nusa Tenggara, West Sumatra, South Sulawesi, Aceh, Central Java, Central Sulawesi, South Sumatra, and West Kalimantan respectively.

From these data the province of Aceh ranks 7th highest in the distribution of sufferers with mental disorders. ODGJ cases in Aceh province in 2021 as many as 13,697 people out of these cases 5,102 people have taken medicine according to standard (Aceh Health Office, 2021). Furthermore, based on what was obtained from the Inpatient Installation of the Aceh Mental Hospital which was collected from January to December 2021 there were 3,851 people, consisting of 3,213 male patients and 638 female patients (Aceh Hospital Medical Records, 2021).

Look of the many cases of ODGJ it is necessary to increase preventive, curative and rehabilitative promotive efforts in mental health services by health workers in health facilities. Therefore, based on the description above, the researcher is interested in conducting research on the Determinants of Recurrence of Patients with Mental Disorders at the Aceh Mental Hospital.

II. METHOD

This research uses a quantitative design through a cross sectional approach. This design was chosen because there would be no intervention whatsoever and data collection was only done once. Measurements were taken simultaneously and then analyzed the correlation of the two variables.

A. Location

The location of this research was carried out at the Emergency Room and Inpatient Hospitalh Ace Mental Illnessh.

B. Time of Research

The time for the research was conducted from 02 to 28 April 2023.

C. The Sample In This Research

The population in this study were all families of mental patients who experienced relapse and were treated at the Aceh Mental Hospital. The sample in this study were 70 people, the determination of the sample in this study was carried out by non-probability sampling using a convenience sampling technique.

III. RESEARCH RESULT

From Table 1. it can be seen that of all the respondents who conducted this study, there were the most age respondents in the 31 year and over category, namely 36 people (51.4%). While respondents aged under 31 years were 34 people (48.6%).

Furthermore, based on gender characteristics, it can be concluded that the majority of respondents in this study were male, namely 44 (62.9%) respondents. While respondents with the category of female gender amounted to 26 (37.1%). Regarding the characteristics of the respondent's work it can be concluded that 33 people (47.1%) have a job. While 37 (52.9%) respondents did not work. Most of the respondents were not married 48 (63.3%), while the number of married patients was less, namely around 22 (31.4%)

Table 1 also explains adherence to taking medication, where the majority of patients who relapsed did not adhere to taking medication 44 (62.9%). There were only a few relapse patients who were compliant in taking medication 26 (31.1%). For the characteristics of family support, it can be analyzed that there are 36 families (52.43%) that have good category family support. Meanwhile, family support in the unfavorable category was 34 respondents (48.57%). Regarding the characteristics of the support of health workers, there were 38 people (54.3%) who had good support. Meanwhile, 32 respondents (45.7%) had poor support from health workers.

TABLE 1. Frequency Distribution of Respondents Based on Characteristics, Medication Compliance, Family Support, Health Workers, and at the Aceh Mental Hospital in 2023:

Category	N	%	
Age	≥ 31 Years	36	51,4
	≤ 31 Years	34	48,6
Gender	Man	44	62,9
	Woman	26	37,1
Work	Work	33	47,1
	Doesn't work	37	52,9
Marital status	Marry	22	31,4
	Single	48	62,9
Medication Compliance	Good	26	37,1
	Not good	44	62,9
Family support	Good	34	48,6
	Not good	36	51,4
Health Officer Support	Good	38	54,3
	Not good	32	45,7
Social worker support	Good	31	44,3
	Not good	39	55,7
recurrence	Often	44	62,9
	Seldom	26	37,1

Still related to table above, it can also be analyzed that there is social support in this study which has a good category of 31 (44.29%). Meanwhile, social support in the unfavorable category was 39 (55.71%). Meanwhile, for the last characteristic regarding recurrence, there were 44 (62.86%) respondents who often experienced recurrence. Meanwhile, around 36 respondents (37.14%) rarely experienced recurrence.

Table 2. can be seen in table 4.1.2.1. The results showed that 40 (90.9%) of the male respondents often experienced relapse, the remaining 4 (15.4%) rarely experienced recurrence. Meanwhile, there were 4 female patients who experienced frequent recurrences (9.1%), and 22 female patients who rarely experienced recurrences (84%). Based on the results of the chi square statistical test, it was obtained $p = 0.000$, indicating that there was a significant relationship between medication adherence and the recurrence rate of mental patients at the Aceh Mental Hospital.

TABLE 2. Relationship between Gender and Recurrence.

Type Sex	Recurrence				Total		P-Value	OR (95%CI)
	Often		Seldom		f	%		
	f	%	f	%				
Man	40	90.9	4	15.4	44	62.9	0.000	2,723 (1.385-5389)
Woman	4	9.1	22	84.6	26	37.1		
Amount	70	100						

Table 3. It can be seen that patients under 31 years of age experience more frequent recurrences, with a total of 25 (56.8%) and those who rarely experience recurrences are 9 (34.6%). Meanwhile, fewer patients aged over 31 years experienced recurrence, namely around 19 (43.2%). In patients over 31 years of age with the rare category of recurrence, there were 17 (65.4%). Once done the chi square statistical test obtained $p = 0.088$, indicating that there was no significant relationship between adherence to taking medication and the recurrence rate of mental patients at the Aceh Mental Hospital.

TABLE 3. Relationship between age characteristics and recurrence.

Age	Recurrence				Total		P-Value	OR (95%CI)
	Seldom		Often		f	%		
	f	%	f	%				
Young	19	43.2	17	65.4	36	51.4	0.088	.402 (.147-1.098)
Mature	66	58.8	9	34.6	34	48.6		
Amount	70	100						

Table 4. It can be seen that patients who do not work experience more frequent recurrences, with a total of 23 (52.3%) and for patients who have work fewer patients experience recurrences as many as 21 (47.7%), although the difference is not too big. significant. Meanwhile, in terms of the category, it is rare to experience recurrence in patients who do not work, the number is around 14 (53.8%). The remaining 12 (46.2%) patients who have jobs with the rare category experience recurrence. Once done the chi square statistical test obtained $p = 1.000$, indicating that there was no significant relationship between medication adherence and

the recurrence rate of mental patients at the Aceh Mental Hospital.

TABLE 4. Relationship between job characteristics and recurrence.

Work	Recurrence				Total		P-Value	OR (95%CI)
	Seldom		Often		f	%		
	f	%	f	%				
Work	21	47.7	12	46.2	33	47.1	1,000	1.065 (.403-2.815)
Doesn't work	23	52.3	14	53.8	37	52.9		
Amount	70	100						

Table 5. It can be seen that patients who are married experience more frequent recurrences, with a total of 36 (81.8%). Furthermore, there were fewer patients who were married who experienced recurrence, namely around 8 (18.2%) of the total 70 study samples, indicating a significant difference in value. Meanwhile, in terms of the category of rarely experiencing recurrence, the number of patients who were married was more numerous, namely around 14 (53.8%). The remaining 12 (46.2%) patients who were never married with the rare category experienced recurrence out of a total of 70 samples. Once done the chi square statistical test obtained $p = 0.003$, indicating that there was a significant relationship between medication adherence and the recurrence rate of mental patients at the Aceh Mental Hospital.

TABLE 5. Relationship between characteristics of marital status and recurrence

Marital status	Recurrence				Total		P-Value	OR (95%CI)
	Seldom		Often		f	%		
	f	%	f	%				
Marry	8	18.2	14	53.8	22	31.4	0.003	.190 (.064-.565)
Not yet	36	81.8	12	46.2	48	68.6		
Amount	70	100						

Table 6 showed that 16 (61.5%) respondents who adhered to taking medication rarely experienced relapse. Meanwhile, respondents who did not comply with taking medication, the number who often experienced recurrence was 34 people (77.3%) respondents. Based on the results of the chi square statistical test, $p = 0.002$ showed that there was a significant relationship between medication adherence and the recurrence rate of mental patients at the Aceh Mental Hospital.

TABLE 6. Relationship between medication adherence characteristics and recurrence

Medication Compliance	Recurrence				Total		P-Value	OR (95%CI)
	Seldom		Often		f	%		
	f	%	f	%				
Good	10	22.7	16	61.5	26	37.1	0.002	.184 (.064-.530)
Not good	34	77.3	10	38.5	44	62.9		
Amount	70	100						

Table 7 shows that respondents who have good support from the family with a total of 20 (76.9%) rarely experience recurrence. Meanwhile, 30 (68.2%) of the 70 total samples studied had frequent relapses of respondents who had poor support from their families. Based on the results of the chi square statistical test, $p = 0.000$, this shows that there is a significant relationship between family support and the

recurrence rate of mental patients at the Aceh Mental Hospital.

TABLE 7. Relationship between characteristics of family support and relapse

Family support	Recurrence				Total		P-Value	OR (95%CI)
	Seldom		Often		f	%		
	f	%	f	%				
Good	14	31.8	20	76.9	34	48.6	0.000	.140 (.46-.425)
Not good	30	68.2	6	23.1	36	51.4		
Amount					70	100		

Table 8 showed that respondents who had good support from health workers, totaling 21 (80.8%), rarely experienced recurrence. Meanwhile, 27 respondents (61.4%) of the total 70 samples studied had frequent relapses of respondents who had poor support from health workers. Based on the results of the chi square statistical test, it was obtained $p = 0.001$, indicating that there was a significant relationship between the support of health workers and the recurrence rate of mental patients at the Aceh Mental Hospital.

TABLE 8. Relationship between the characteristics of health worker support and relapse

Health Worker Support	Recurrence				Total		P-Value	OR (95%CI)
	Seldom		Often		f	%		
	f	%	f	%				
Good	17	38.6	21	80.8	38	54.3	0.001	.150 (.048-.473)
Not good	27	61.4	5	19.2	32	45.7		
Amount					70	100		

Table 9 shows that respondents who have good social support with a total of 18 (69.2%) rarely experience relapse. Meanwhile, 31 respondents (70.5%) of the 70 samples studied experienced relapse who had poor social support. Based on the results of the chi square statistical test, $p = 0.002$, this shows that there is a significant relationship between social support and the recurrence rate of mental patients at the Aceh Mental Hospital.

TABLE 9. Relationship between health worker support characteristics and relapse

Social Support	Recurrence				Total		P-Value	OR (95%CI)
	Seldom		Often		f	%		
	f	%	f	%				
Good	13	29.5	18	69.2	31	44.3	0.002	.186 (.065-.535)
Not good	31	70.5	8	30.8	39	55.7		
Amount					70	100		

Table 10 The table explains that the variable that has the most influence on the recurrence of mental patients at home is gender with a significance of 0.000. Based on the value Withand then the family support variable (0.011). Odd Ratio (OR) can be interpreted that gender has a 55,000 times chance of causing recurrence in patients with mental disorders. Likewise, family support has a 0.140 times chance of causing recurrence in patients with mental disorders.

TABLE 10. Logistic Regression Test

Variable	B	Wald	Sig.	OR	95% CI
Gender	4,653	1.109	0.000	55,000	12516-241692
Family support	-2,841	1.116	0.011	0.140	0.46-0.425)

IV. DISCUSSION

The relationship Gender with Recurrence of Patients with Mental Disorders

Based on the results of the chi square statistical test, it was obtained $p = 0.000$, indicating that there was a significant relationship between medication adherence and the recurrence rate of mental patients at the Aceh Mental Hospital. The results showed that 40 (90.9%) of the male respondents often experienced relapse, the remaining 4 (15.4%) rarely experienced recurrence. Meanwhile, there were 4 female patients who experienced frequent recurrences (9.1%), and 22 female patients who rarely experienced recurrences (84%).

The relationship Age with Relapse of Mental Disorder Patients

Once donethe chi square statistical test obtained $p = 0.088$, indicating that there was no significant relationship between adherence to taking medication and the recurrence rate of mental patients at the Aceh Mental Hospital. In patients under 31 years of age, recurrence was more frequent, with a total of 25 (56.8%) and those who rarely experienced recurrence were 9 (34.6%). Meanwhile, fewer patients aged over 31 years experienced recurrence, namely around 19 (43.2%). In patients aged over 31 years with the rare category of recurrence, there were 17 (65.4%).

The relationship Work with Recurrent Mental Disorder Patients

Once donethe chi square statistical test obtained $p = 1.000$, indicating that there was no significant relationship between medication adherence and the recurrence rate of mental disorder patients at the Aceh Mental Hospital. Patients who did not work experienced recurrences more frequently, with a total of 23 (52.3%) and for patients who had work fewer patients experienced recurrences as many as 21 (47.7%), although the difference was not too significant. Meanwhile, in terms of the category, it is rare to experience recurrence in patients who do not work, the number is around 14 (53.8%). The remaining 12 (46.2%) patients who have jobs with the rare category experience recurrence.

The relationship Marital Status with Relapse of Mental Disorder Patients

Once donethe chi square statistical test obtained $p = 0.003$, indicating that there was a significant relationship between medication adherence and the recurrence rate of mental disorder patients at the Aceh Mental Hospital. In married patients, recurrence was more frequent, with a total of 36 (81.8%). Furthermore, there were fewer patients who were married who experienced recurrence, namely around 8 (18.2%) of the total 70 study samples, indicating a significant difference in value. Meanwhile, in terms of the category of rarely experiencing recurrence, the number of patients who were married was more numerous, namely around 14 (53.8%). The remaining 12 (46.2%) patients who were never married with the rare category experienced recurrence out of a total of 70 samples.

The relationship of Adherence to Taking Medication with Recurrence of Patients with Mental Disorders

The results of the study showed that there was a significant relationship between adherence to taking medication and the recurrence of mental disorders in the Aceh Mental Hospital. This is evidenced by the results of the chi square statistical test obtained $p = 0.002$. Still patients who take medication regularly have not been optimal resulting in frequent recurrences. When viewed from the percentage, it shows that 16 (22.9%) respondents who adhere to taking medication rarely experience relapse. Meanwhile, respondents who did not comply with taking medication, the number who often experienced recurrence was 34 people (48.6%) respondents.

The results of this study are in accordance with research conducted by Fadilah (2016) showing that there is a significant and significant relationship between client adherence to treatment and recurrence of patients with mental disorders. Obtained significance value (p) = 0.007 client adherence to treatment for recurrence of mental disorder patients. It was further explained that respondents who had good medication adherence, who rarely experienced relapse were as many as 23 (46%) respondents, while only 8 (16%) respondents experienced frequent recurrences, this proved that the better the client's adherence to treatment, the less the frequency of recurrence. .

There is the results that are in line between this study and one of the other studies, are also strengthened by the statement Keliat (2010) that with regular medication can reduce recurrence, but prolonged use of neuroleptic drugs can cause side effects that interfere with social relationships such as uncontrolled movement. Drug administration by doctors is expected to be in accordance with therapeutic doses so as to prevent recurrence.

The relationship between health worker support and relapse in patients with mental disorders

Based on the results of the chi square statistical test, $p = 0.001$, this shows that there is a significant relationship between the support of health workers and the recurrence rate of mental patients at the Aceh Mental Hospital. This study showed that respondents who had good support from health workers, totaling 21 (30%), rarely experienced relapse. Meanwhile, 25 (35%) respondents who had poor support from health workers often experienced relapse.

This research is also relevant to research conducted by oleh Oktafia (2023) shows that the role of health workers is mostly sufficient, with 29 respondents (96.7%) and 1 person (3.3%) having a good role. This sufficient role can be illustrated that health workers are not optimal in carrying out their roles such as providing education about treatment and explaining the disease. This sufficient role will have an impact on the recovery process of mental patients.

The role of mental health workers includes (Ministry of Health, 2016): In the form of promotive services, it is an activity and/or a series of activities for implementing mental health services that promote mental health, such as maintaining and increasing the mental health status of the community optimally, eliminating stigma, discrimination,

violation of the human rights of ODGJ as part of society, increasing understanding and community participation in mental health, increasing acceptance and community participation in mental health.

The relationship of Family Support with Relapse of Patients with Mental Disorders

Based on the analysis of family support factors against recurrence can be seen in table 4.1.2.3. The results showed that respondents who had good support from their families, with a total of 20 (28.6%), rarely experienced recurrence. Meanwhile, 28 (40%) respondents who had poor support from their families experienced relapse. Based on the results of the chi square statistical test, $p = 0.000$ showed that there was a significant relationship between family support and the recurrence rate of mental patients at the Aceh Mental Hospital.

This research is also in accordance with research conducted by oleh Wania (2020) The results of the study used the chi square test with a p-value of (0.002), which means that H_0 is accepted and H_a is rejected, which means there is a relationship between family support and relapse in schizophrenic patients. So it can be concluded that there is a relationship between family support and relapse in schizophrenia patients in the Working Area of the Samata Health Center, Gowa Regency.

According to Siregar (2020) family social support has an effect on health and well-being which function simultaneously. Having strong support is associated with reduced mortality, easier recovery from illness, cognitive function, physical and emotional health. In addition, family support has a positive influence on adjusting to stressful life events. Family social support is a process that occurs throughout the life span, the nature and types of family social support differ in various stages of the life cycle, family social support enables the family to function with a variety of intelligence and reason, as a result this improves family health and adaptation.

The Relationship between Social Support and Recurrence of Mental Disorder Patients

In this study, the results of the chi square statistical test obtained $p = 0.002$. This shows that there is a significant relationship between social support and the relapse rate of mental disorder patients at the Aceh Mental Hospital. For patients who have good social support with a total of 18 (25.7%), they rarely experience recurrence. Meanwhile, 31 (44%) respondents who had poor social support often experienced relapse.

The research results are also in accordance with research conducted by Firmawati et al (2022) that patients with good community social support had 1 relapse and 23 did not relapse, while patients with poor community social support experienced 11 relapses and 2 did not relapse. It is known that the value of chi square or p Value = 0.000.

According to Olson, Breckler, & Wiggin (2006) regarding social support that social support is assistance provided by people who are in an individual's social environment such as family, friends, and the community. The forms of social

support consist of mentoring support, emotional support, instrumental support, group support and informational support.

V. CONCLUSION

The conclusions in this study are:

1. There is a significant relationship between gender and the recurrence of mental disorders ($p = 0.000$).
2. There isn't anythe relationship between age and the recurrence of mental disorders in the Aceh Mental Hospital, with $p = 0.088$
3. There is no relationship between work and the recurrence of mental patients at the Aceh Psychiatric Hospital, with $p = 1,000$.
4. There is a significant relationship between marital status and the recurrence of mental patients at the Aceh Psychiatric Hospital, with $p = 0.003$.
5. There is a significant relationship between adherence to taking medication and the recurrence of mental disorders in the Aceh Mental Hospital, with $p = 0.002$.
6. There is a significant relationship between the support of health workers and the recurrence rate of mental patients at the Aceh Mental Hospital, with $p = 0.001$.
7. There is a significant relationship between family support and the recurrence rate of mental patients with $p = 0.000$.
8. There is a significant relationship between social support and the rate of relapse in patients with mental disorders, with a value of $p = 0.002$.
9. In this study, the variable most related to the recurrence of mental disorders was the gender variable with a significance of 0.000, and family support (0.011).

Research Ethics

Research ethics have been issued by the Head of the Health Research Ethics Committee (KEPK) Faculty of Medicine, University of Syiah Kuala (USK) with registration number: 117102P, and the Aceh Mental Hospital with license number: 423/1232

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