

# Quality of Life in Patients with Mental Disorders Undergoing Treatment in Banyumas Regional General Hospital

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## Abstract

**Background:** The quality of life for someone with mental disorders is lower than for people who do not have it because of the decreased quality of life. If the aspect of quality of life in a person is bad, it results in disruption of daily activities. Previous studies have shown that schizophrenic patients have poor social functioning, causing a decrease in quality of life. **Objectives:** To identify aspects of self-image, independence, mood, relationship, daily activities, physical health, future, psychological well-being in patients with mental disorders who are undergoing treatment at Banyumas Hospital. **Methods:** Descriptive research study with cross sectional design was conducted on patients with mental disorders at the Psychiatric Polyclinic of Banyumas Hospital. The number of samples used was 55 people. Sampling was obtained from primary data through the Mental Health Questionnaire Of Life (MHQOL) questionnaire. The collected data were analyzed descriptively. **Key findings:** From 55 respondents, 31 respondents had positive thinking self-assessment, 36 respondents very satisfied with independence, 32 respondents didn't feel worry, 47 respondents very comfortable with relationships, 49 respondents very satisfied with activities, 43 respondents didn't have health problems, 31 respondents optimistic about the future. **Conclusions:** The quality of life of patients with mental disorders who are undergoing treatment at the Banyumas General Hospital based on aspects of self-assessment, freedom, feelings, relationships, daily activities, physical health, future, and psychological well-being are good.

**Keywords:** Banyumas, mental disorder, quality of life

## Introduction

The quality of life of a person experiencing mental disorders is lower than that of someone who does not, because mental disorders can cause a decline in quality of life [18]. If the elements of quality of life in a person decrease or are poor, that person will experience difficulty in balancing the elements that form quality of life, which will result in disrupted daily activities [5]. In Banyumas Regency, the prevalence of schizophrenia is 0.7%, depression 6.03%, and emotional mental disorders 9.14% [9].

The World Health Organization (2012) defines quality of life as an individual's view or perception of their position in life, in the culture and value systems in which they live, and how they compare their life to their goals, expectations, standards, and objectives that have been set by the individual [19]. Aspects of quality of life consist of self-evaluation, independence, feelings, relationships, daily activities, physical health, and the future. Factors that influence quality of life include sex, age, education, and occupation.

People with mental disorders (ODGJ) according to the Mental Health Law Number 18 of 2014 are individuals with disturbances in thought, behavior, and emotions that manifest in a series of significant symptoms and/or behavioral changes, and can cause suffering and obstacles in carrying out human functions [8]. Types of mental disorders include depression, anxiety, schizophrenia,

bipolar disorder, acute psychosis, dementia, and mental disorders due to substance and alcohol dependence [11]. Factors influencing mental disorders include somatogenic, psychological, and sociocultural factors [20].

The purpose of this study is to identify the quality of life of ODGJ patients undergoing treatment at Banyumas General Hospital based on the dimensions of self-evaluation, independence, feelings, relationships, daily activities, physical health, future, and psychological well-being.

## Materials and Methods

This research is descriptive research. This study used a cross-sectional approach. The study was conducted in December 2022 at Banyumas General Hospital. The accessible population of this study were ODGJ patients undergoing treatment at Banyumas General Hospital. The sample was determined using simple random sampling. The sample size formula used was the Lemeshow formula with a result of 55 people. Inclusion criteria for the sample were patients undergoing treatment at the psychiatric polyclinic of Banyumas General Hospital, aged over 17 years, agreed to the informed consent form, and were competent to participate in the study. Data collection was carried out using the Mental Health Quality of Life (MHQOL) questionnaire, which consists of MHQOL-7D and MHQoL-VAS that have been validated, and the data collected were primary data. Univariate analysis in this study was conducted to describe the descriptive

characteristics of all respondents. The descriptive data of respondents consisted of demographic data of patients and the results of the MHQOL questionnaire.

## Results and Discussion

Based on Table 1, the majority of respondents were aged 17–25 and 36–45 years. The results of this study are consistent with the study by Swetaa, A., et al. (2019), which showed that respondents aged 18–65 years experienced mental disorders due to stressful life conditions [16]. The majority of respondents had their last education at elementary school (32.7%). The results of this study are consistent with the study conducted by Sarastika et al. (2019), which stated that patients with higher education experienced an improvement in quality of life [12]. Most respondents were female, totaling 30 respondents (54.5%), in line with the study conducted by Hestingsih (2022), which showed that female respondents experienced anxiety disorders. Most respondents were unemployed (29.1%) [7]. This study is supported by Wardani (2018), who stated that 75% of ODGJ patients were unemployed, where unemployment is associated with mental disorder stressors [17]. The majority of respondents lived with their parents. Based on the study by Melia (2016), it was found that the role of family greatly supports the recovery of psychiatric patients, enabling them to recover and socialize again. The majority of respondents had no income (50.9%) [10]. This is consistent with the study by Sultana et al. (2021), which showed that quality of life is related to income.

Based on Table 2, most respondents in the study thought positively about themselves. The results of this study do not align with Fakhriyani (2019), who stated that ODGJ individuals tend to have negative thinking about themselves and their surroundings [4]. The freedom aspect with the largest proportion was the category of being very satisfied with the level of independence, totaling 36 respondents. This is consistent with the study by Anggraini (2015), which stated that ODGJ patients with good quality of life (38.9%) also had good levels of independence [2].

The quality of life of respondents based on the feelings aspect was mostly in the category of not feeling worried, gloomy, or depressed, totaling 32 respondents. The results of this study align with the study conducted by Siregar (2021), which showed that respondents who felt worried and anxious had poorer quality of life [13]. The quality of life of respondents based on the relationships aspect was mostly in the category of feeling very comfortable with relationships, totaling 47 respondents. This result is consistent with the study conducted by Dalimunthe (2020), which stated that the social relationships of ODGJ patients were in the good category [3].

The quality of life of respondents based on the daily activities aspect was mostly in the category of being very satisfied with daily activities, totaling 49 respondents. This finding aligns with the study by Afconneri and Puspita (2020), which stated that most respondents (72%) were very good at performing daily activities, resulting in a fairly good quality of life. The quality of life of respondents (78.2%) based on the physical health aspect showed that most did not have physical health problems [1]. This differs from the study conducted by Afconneri and Puspita (2020), which showed that around 56% of respondents diagnosed with schizophrenia had poor physical health, affecting their quality of life [1]. The quality of life of respondents based on the future aspect was mostly in the category of being optimistic about the future, totaling 31 respondents (56.4%). This is consistent with the study conducted by Fisher et al. (2020), which stated that 28.3% of respondents with mental disorders felt optimistic about the future [6]. The majority of respondents' quality of life according to psychological well-being measured using the visual analog scale was at score 8. A score of 8 on the visual analog scale indicates that the respondents' psychological well-being was good. The results of this study are consistent with the study conducted by Susanti (2022), which stated that psychological well-being is related to quality of life; that is, if a person is able to make decisions independently, think positively about themselves, not feel anxious, feel comfortable in their relationships, and be able to carry out daily activities well, it indicates a good quality of life [14].

**Table 1** Respondents' demographic characteristics based on age, last education, occupation, sex, living arrangement, and income

Characteristics	F	%
<b>Age (years)</b>		
17 – 25	13	24,52
26 – 35	11	20,75
36 – 45	13	24,52
46 – 55	6	11,32
56 – 65	7	13,20
66 – 77	3	5,69
<b>Total</b>	<b>53</b>	<b>100</b>
<b>Last education</b>		
Did not attend school	4	7,3
Diploma 3 (D3)	1	1,8
Diploma 4 (D4)	1	1,8
Bachelor (S1)	3	5,5

Elementary School (SD)	18	32,7
Junior High School (SMP)	12	21,8
Senior High School (SMA)	16	29,1
<b>Total</b>	<b>55</b>	<b>100,0</b>
<b>Occupation</b>		
Unemployed	16	29,1
Pharmacist	1	1,8
Laborer	4	7,3
Housewife (IRT)	13	23,6
Private employee	1	1,8
Trader	5	9,1
Student	7	12,7
Tailor	1	1,8
Retired	1	1,8
Farmer	4	7,3
Entrepreneur	2	3,6
<b>Total</b>	<b>55</b>	<b>100,0</b>
<b>Sex</b>		
Male	25	45,5
Female	30	54,5
<b>Total</b>	<b>55</b>	<b>100,0</b>
<b>Living Arrangement</b>		
Children	6	10,9
Spouse	17	30,9
Sibling	3	5,5
Parents	29	52,7
<b>Total</b>	<b>55</b>	<b>100,0</b>
<b>Income</b>		
No income	28	50,9
< Rp500.000,00	10	18,2
Rp500.000,00 - Rp1.000.000,00	8	14,5
Rp1.000.000,00 - Rp3.000.000,00	6	10,9
> Rp3.000.000,00	3	5,5
<b>Total</b>	<b>55</b>	<b>100,0</b>

**Table 2** Frequency distribution of quality of life of ODGJ patients based on aspects

Characteristics	f	%
<b>Self-Evaluation Aspect</b>		
Positive thinking	31	56,4
<b>Freedom Aspect</b>		
Very satisfied	36	65,5
<b>Feelings Aspect</b>		
Does not feel worried	32	58,2
<b>Relationship Aspect</b>		
Very comfortable	47	85,5
<b>Daily Activities Aspect</b>		
Very satisfied	49	89,1
<b>Physical Health Aspect</b>		
No physical problems	43	78,2
<b>Future Aspect</b>		
Optimistic about the future	31	56,4
<b>Psychological Well-being Aspect</b>		
8,00	12	21,8

## Conclusion

The quality of life of ODGJ patients undergoing treatment at Banyumas General Hospital, based on the aspects of self-evaluation, freedom, feelings, relationships, daily activities, physical health, future, and psychological well-being, is in the good category.

## Supplementary Material

None

## Author Contributions

SCU : Conceptualization, Methodology, Writing-Original Draft. DWDL : Data Curation, Formal Analysis, Visualization. AM : Supervision, Funding Acquisition, Writing- Review & Editing.

## Conflict of Interest

The authors have no financial conflicts of interest to declare.

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