

## Factors Associated with Treatment Compliance in Clients with Mental Disorders: A Cross-sectional Study

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### ABSTRACT

**Introduction:** Mental disorders remain a significant public health issue with increasing prevalence globally and in Indonesia. Non-compliance with treatment and follow-up among clients is often influenced by limited knowledge, lack of family involvement, and inadequate environmental support, which may hinder recovery and increase relapse risk.

**Objective:** Mental disorders are a person's behavior about their mental health condition. Everyone has a different view of behavior in mental health cases, namely a person's emotional, psychological, and emotional stability. The purpose of this study was to determine the relationship between knowledge, family support and environmental support on control compliance in clients with mental disorders in the mental health polyclinic of Depati Bahrin Sungailiat Hospital in 2025.

**Method:** The design in this study used cross-sectional with independent variables (knowledge, family support and environmental support) and dependent variables (control compliance). The population size in this study was 118 people and a sample of 60 people calculated using simple random sampling. The time of the study was May 6, 2025.

**Result:** The results of the study using the Chi Square statistical test obtained a p-value for the knowledge variable  $0.000 < 0.05$ , family support  $0.014 < 0.05$  and environmental support  $0.000 < 0.05$ . This shows that there is a significant relationship between knowledge, family support and environmental support on control compliance in clients with mental disorders in the mental health polyclinic of Depati Bahrin Sungailiat Hospital in 2025.

**Conclusion:** Suggestions in this study are expected to be used as a source of reference and provide ideas for nursing students when practicing in the field so that students know the factors that can influence control compliance of clients with mental disorders.

**Keywords:** Knowledge, Family Support, Environmental Support, Control Compliance

## Introduction

Mental disorders are behaviors related to a person's mental health. Each person has a different perspective on behaviors related to mental health, specifically emotional, psychological, and emotional stability (Videbeck, 2019). Characteristics of mental disorders include prolonged sadness, lack of enthusiasm and a tendency to be lazy, unprovoked anger, isolation, inability to recognize people, disorganized speech, talking to oneself, and inability to care for oneself (Keliat, 2019).

According to data from the World Health Organization (2022), the prevalence of mental health problems is estimated at 450 million people worldwide. Approximately 10% of adults experience a mental disorder, and 25% of the population is estimated to experience a mental disorder at some point in their lifetime. Approximately 24 million people, or 1 in 300 (0.32%), suffer from schizophrenia. Southeast Asia ranks third with a prevalence of schizophrenia reaching 2 million sufferers (WHO, 2022).

The Indonesian Health Survey (2023) states that national data for emotional mental disorders (symptoms of depression and anxiety) is increasing. This increase is evident in the rising prevalence of households with people with mental disorders (ODGJ) in Indonesia. The number has increased to 7 per thousand households, meaning there are 7 households with people with mental disorders per 1,000 households, bringing the total to 450,000 people with severe mental disorders. Data from the provinces with the highest prevalence of schizophrenia are Bali (11%), the Special Region of Yogyakarta (10%), West Nusa Tenggara (10%), and Aceh and Central Java (9%) (Indonesian Health Survey, 2023).

Based on 2018 Basic Health Research (Riskesdas) data from the Bangka Belitung Islands Province, 3,483 people experienced mental disorders. The highest prevalence of mental disorders was found in Pangkalpinang City with 418 cases (12%), followed by Central Bangka Regency with 313 cases (9%) (Silviyana et al., 2024). According to data from the 2023 Indonesian Health Survey, 2% of the population under 15 years of age experienced mental health problems. Around 0.25% have thoughts of suicide, and 1.4% experience depression (Chandralela, 2024).

Data from the Depati Bahrin Regional Hospital's medical records show that the prevalence of people with mental disorders seeking treatment at the psychiatric clinic was 98 in 2022, 100 in 2023, and 118 in 2024 (Depati Bahrin Regional Hospital's medical records, 2024). The high number of cases of patients not complying with follow-up appointments is due to several factors, including a lack of knowledge and understanding among families regarding the impact of non-compliance with schizophrenia. Family support in assisting and motivating schizophrenic clients during treatment also impacts the client's healing process. A supportive, healthy environment, with a lack of negative judgment, ensures client comfort and a smooth healing process. The primary issue for inpatients is adherence to check-ups, or medication adherence. Factors associated with medication adherence in schizophrenia patients include disease severity, treatment factors, family members, and healthcare providers. Health education about schizophrenia has a positive impact on patient adherence to medication (Zhu et al., 2023). Several factors can influence adherence in clients with mental disorders, including knowledge, family support, and environmental support.

Knowledge is a crucial factor in shaping actions. Knowledge based on proper understanding is expected to foster new behaviors, particularly family independence in caring for a family member with schizophrenia. Family knowledge regarding treatment times, how to obtain medication according to dosage, and following the recommendations of nurses and

other healthcare workers are among the factors that can encourage families to take patients for follow-up visits to the hospital (MacDougall et al., 2024).

Family support is crucial for the treatment of patients with mental disorders, as clients generally lack the ability to manage and understand the schedule and types of medication to be taken. Families must consistently guide and direct clients with schizophrenia to take their medication correctly and regularly. Medication adherence is crucial for patients with mental disorders, ensuring recovery and preventing relapse. Medication adherence includes aligning an individual's behavior with medical advice, using medication as directed, and taking it at the correct time. Treatment adherence will improve when patients receive support from family or those closest to them. Therefore, support from family, those closest to them, and the surrounding environment is essential (Firnawati et al., 2023).

Environmental support is a term used to describe how social relationships contribute to an individual's mental or physical health. Environmental/social support is one function of social bonds. Social bonds describe the general level and quality of interpersonal relationships. Environmental/social support can also be defined as the comfort, attention, appreciation, or assistance an individual experiences from other people or groups. A supportive social environment can play a significant role in reducing the risk of relapse in schizophrenia patients (Miller et al., 2021).

A study by Mufidah & Herawati (2024) entitled "The Relationship Between Family Knowledge and Medication Adherence in Schizophrenia Patients" found a significant relationship between knowledge and medication adherence, with a  $p$  value of 0.000. Good knowledge of schizophrenia, including its definition, causes, signs and symptoms, treatment, and care, fosters appropriate behavior, namely regular medication follow-up. Therefore, researchers believe that knowledge significantly influences medication adherence.

This is in line with research conducted by Bertiana et al. (2023) entitled "Analysis of Factors Related to Compliance with Mental Health Patient Control," which states that based on a chi-square test, medication adherence, family support, and support from the surrounding environment are significantly associated ( $p$ -value  $< 0.05$ ) with relapse in clients with mental disorders. This is caused by a lack of emotional support, hopeful support, and tangible family support. Financial constraints also sometimes prevent families from continuously purchasing medication for patients until they fully recover. Many family problems, such as divorce, and unmet patient needs are caused by financial and emotional constraints.

Similarly, research conducted by Sylviana et al. (2024) entitled "Factors Related to Compliance with Health Patient Control in Schizophrenia" indicates a relationship between environmental support (0.002), family support (0.019), and medication adherence (0.028) with relapse in schizophrenia patients hospitalized at the Dr. Regional Mental Hospital. Samsi Jacobalis, Bangka Belitung Islands Province, 2023. Families need to provide support, which is a perception of the assistance received by schizophrenia patients after treatment from other family members in order to carry out their functions and duties within a family. Furthermore, families also play a role in determining the nursing care needed by patients with mental disorders at home to prevent relapse. Therefore, understanding the family's knowledge of the disease is crucial to support the patient's recovery and minimize relapse. Accurate information on the symptoms, potential course of the disease, and various medical and psychological supports can alleviate the symptoms of mental disorders, which is much-needed information for families. Based on the results of a preliminary study on December 5, 2024 conducted on clients who were treated at the mental health clinic of Depati Bahrin

Sungailiat Regional Hospital by conducting a survey of 10 people, it was found that 8 people (80%) were not compliant with medication control, 7 people (70%) did not know the importance of medication for their recovery, 8 people (80%) experienced poor family support with no support from family members and 8 people (80%) experienced poor environmental support by always judging that clients with mental disorders should be avoided. This is a factor that medication compliance in clients with mental disorders will be disrupted. Based on the above background, researchers are interested in conducting further research to determine the extent of the influence of knowledge, family support and environmental support on control compliance in clients with mental disorders at the mental health clinic of Depati Bahrin Sungailiat Regional Hospital.

## Objective

To identify factors related to compliance with control in clients with mental disorders at the mental health clinic of Depati Bahrin Sungailiat Regional Hospital in 2025.

## Method

The design in this study used cross-sectional with independent variables (knowledge, family support and environmental support) and dependent variables (control compliance). The population size in this study was 118 people and a sample of 60 people calculated using simple random sampling. The time of the study was May 6, 2025. The statistical test uses Chi Square because the researcher wants to get research results in the form of categories.

The validity test results for the family knowledge questionnaire showed a calculated  $r$  value between 0.553 and 0.959, indicating a valid questionnaire. The reliability test using Cronbach's alpha showed a value of 0.856, indicating a reliable questionnaire. The validity test results for the family support questionnaire for schizophrenia patients showed a calculated  $r$  value between 0.464 and 0.941, indicating a valid questionnaire. The reliability test using Cronbach's alpha showed a value of 0.935, indicating a reliable questionnaire. The validity test results for the environmental support questionnaire for schizophrenia patients showed a calculated  $r$  value between 0.542 and 0.917, indicating a valid questionnaire. The reliability test using Cronbach's alpha showed a value of 0.926, indicating a reliable questionnaire.

## Result

**Tabel 1.** Relationship of Knowledge to Compliance with Control Clients with Mental Illnesses

Knowledge	Compliance with Control				Total		p-value	POR (CI 95%)
	Compliant		Not compliant					
	n	%	n	%	n	%		
Good	23	95.8	3	8.3	26	43.3	0.000	25.300 (2.474-258.721)
Poor	1	4.2	33	91.7	34	56.7		
Total	24	100.0	36	100.0	60	100.0		

Table above shows that compliance with control was more common among patients with good knowledge (23 patients (95.8%) compared to patients with poor knowledge (1 patient (4.2%)), while non-compliance was more common among patients with poor knowledge (4.2%). 33 people (91.7%) compared to 3 people (8.3%) with good knowledge.

The Chi-Square Test showed a significance value of  $0.000 < 0.05$ . This indicates a significant relationship between knowledge and compliance with mental health checks. The POR (95% CI) value was 25,000 (2.474-258.721), meaning respondents with poor knowledge were 25,000 times more likely to be non-compliant with checks.

**Tabel 2.** Relationship of Family Support to Compliance with Control Clients with Mental Illnesses

Family Support	Compliance with Control				Total		<i>p-value</i>	POR (CI 95%)
	Compliant		Not compliant					
	n	%	n	%	n	%		
Good	14	58.3	9	25.0	23	38.3	0.014	4.200 (1.387-12.719)
Poor	10	41.7	27	75.0	37	61.7		
Total	24	100.0	36	100.0	60	100.0		

Table above shows that compliance with control was more common among patients with good family support (14 individuals (58.3%)), compared to patients with poor knowledge (10 individuals (41.7%)), while non-compliance with control was more common among patients with poor knowledge. This was 27 people (75%) compared to 9 people (25%) with good knowledge.

The Chi-Square Test showed a significant correlation of  $0.014 < 0.05$ , indicating a significant relationship between family support and adherence to control measures for clients with mental disorders. The POR (95% CI) value was 4.200 (1.387-12.719), indicating that respondents with poor family support were 4.200 times more likely to be non-adherent to control measures.

**Tabel 3.** Relationship of Environmental Support to Compliance with Control Clients with Mental Illnesses

Environmental Support	Compliance with Control				Total		p-value	POR (CI 95%)
	Compliant		Not compliant					
	n	%	n	%	n	%		
Good	22	91.7	6	16.7	28	46.7	0.000	55.000 (10.126-298.736)
Poor	2	8.3	30	83.3	32	53.3		
Total	24	100.0	36	100.0	60	100.0		

Table above shows that compliance with control was more common in those with good environmental support (22 people (91.7%)) compared to those with poor knowledge (2 people (8.3%)), while non-compliance with control was more common in those with poor knowledge (2 people (8.3%)). 30 people (83.3%) had poor knowledge compared to 6 people (16.7%) with good knowledge.

The Chi-Square Test showed a significant correlation of  $0.000 < 0.05$ , indicating a significant relationship between environmental support and compliance with mental health checks. The POR (95% CI) value was 55,000 (10.126-298.736), meaning respondents with poor environmental support were 55,000 times more likely to be non-compliant with checks.

## Discussion

The results of this study align with those of Mufidah & Herawati (2024) entitled "The Relationship Between Family Knowledge and Treatment Compliance in Schizophrenia Patients," which found a significant relationship between knowledge and treatment

compliance with a  $p$  value of 0.000. Good knowledge of schizophrenia, including its definition, causes, signs and symptoms, treatment, and care, fosters appropriate behavior, namely regular follow-up visits. Therefore, the researchers believe that knowledge significantly influences treatment compliance.

This is in line with research conducted by Ramadia et al. (2022) entitled "Factors Associated with Treatment Compliance in People with Mental Disorders," which found a relationship between knowledge and treatment compliance with a  $p$ -value of  $0.014 < 0.05$ . Knowledge can be improved through gradual, patient health education and a therapeutic approach so that information about the disease, treatment, management, concepts, and expectations regarding treatment outcomes for mental disorders can be properly understood by families. Mental disorders are chronic illnesses that require a long healing process. Therefore, healthcare workers need to provide education about this. Good knowledge can significantly impact adherence to treatment.

Researchers believe that limited client knowledge is a crucial factor to consider. Inadequate knowledge about the disease, risk factors, causes, and management will impact the recovery process for clients with mental disorders. Mental health clients who regularly undergo check-ups at the mental health clinic must receive health education and counseling from the relevant hospital, which will impact treatment success.

The results of this study align with research conducted by Bertiana et al. (2023) entitled "Analysis of Factors Associated with Mental Patient Compliance," which states that a chi-square test found that medication adherence, family support, and environmental support were significantly associated ( $p$ -value  $< 0.05$ ) with relapse in clients with mental disorders. This is due to a lack of emotional support, hopeful support, and tangible family support. Financial constraints also sometimes prevent families from continuously purchasing medication for patients until they fully recover. Many family problems, such as divorce, and unmet patient needs are caused by financial and emotional constraints. In line with the research conducted by Ernia et al (2020) entitled "The Relationship between Family Instrumental Support and Compliance with Control in Patients with Mental Disorders (ODGJ)" stated that most respondents had good instrumental support, namely 60.5%, most respondents did not comply with control, namely 55.8%, there was a relationship between family instrumental support and compliance with control in ODGJ patients at the Southeast Sulawesi Provincial Mental Hospital with a  $p$ -value of  $0.001 < 0.05$ . The results showed that most respondents did not comply with control according to the specified time, namely 55.8%. Most patients did not comply with control because they came to the control not according to the specified time and exceeded the time limit (more than 2 weeks). This is because there were respondents who came from outside Kendari City, even having to cross the sea, so it required large costs for control to the mental hospital. So respondents usually buy medicine for more than 2 weeks to reduce transportation costs incurred to go to the mental hospital every 2 weeks. Medication adherence is crucial for successful therapy for clients with mental disorders. Irregular medication intake is one of the most common reasons for readmissions to the hospital for those with mental disorders. Effective care for clients with mental disorders involves the family, the primary support system. Medication adherence is a significant factor in hospital readmissions.

Researchers believe that family support is the primary and most important factor in a client's treatment process. Families can provide material and moral support, such as motivation and encouragement for recovery, and providing treatment facilities to ensure regular follow-up appointments. Religious support from the family, such as prayers for the

client's recovery, is also crucial. If the family, as the closest group to the client, becomes indifferent and unconcerned with their family member's health, the client's mental health is likely to deteriorate further. Families must be at the forefront of supporting the treatment process for clients with mental disorders.

In line with research conducted by Firmawati et al. (2023) entitled "The Influence of Family, Environmental Support, and Medication Adherence on Relapse Rates in Mentally Ill Patients in the Limboto Community Health Center Work Area," it states that there is a relationship between environmental support and adherence in mental patients with a p-value of  $0.002 < 0.05$ . Environmental support is a term used to describe how social relationships contribute to an individual's mental or physical health. Environmental/social support is one of the functions of social ties or bonds. Environmental/social support can also be defined as the comfort, attention, appreciation, or assistance an individual feels from other people or groups. The home environment makes patients feel more meaningful and motivates them to have the confidence to adapt to their condition. Furthermore, the absence of social support and an unstable lifestyle create an unsupportive environment for achieving patient adherence, and the complexity of the treatment regimen is a factor that has a negative effect on adherence.

According to the researcher's assumption, environmental support from health workers is very necessary, such as providing adequate health services for people in remote areas, especially people with mental disorders, providing health education and counseling regarding mental disorders. Support from the surrounding environment, such as people who do not arbitrarily judge and negatively stigmatize clients with mental disorders, people who always embrace them by inviting them to several activities such as mutual cooperation, will make people with mental disorders who have regular check-ups feel that there is concern from the surrounding environment and will be motivated to comply with check-ups, which will have an impact on the success of treatment.

## **Conclusion**

There is a significant relationship between knowledge, family support, and environmental support on compliance with control of clients with mental disorders at the mental health clinic of Depati Bahrin Sungailiat Regional Hospital.

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## **References**

1. Bertiana, Nurachmah, E., & Budiarti, Y. 2023. Analisis Faktor-Faktor Yang Berhubungan Dengan Kekambuhan Pasien Jiwa. Jurnal Kesmas Asclepius Volume 5, Nomor 2, Juli-Desember 2023 E-Issn: 2684-8287 P-Issn: 2656-8926 Doi: <https://doi.org/10.31539/Jka.V5i2.7647>
2. Ernia, N., Indriastuti, D., & Risnawati. 2020. Hubungan Dukungan Instrumental Keluarga Dengan Kepatuhan Kontrol Pasien Orang Dengan Gangguan Jiwa (ODGJ). Jurnal Ilmiah Karya Kesehatan <https://stikesks-kendari.e-journal.id/jikk> Volume 01. Nomor 01. November 2020.
3. Firmawati., Biahimo, N,U., & Mohi, T. 2023. Pengaruh Dukungan Keluarga, Lingkungan

- Dan Kepatuhan Minum Obat Terhadap Tingkat Kekambuhan Pada Pasien Gangguan Jiwa Di Wilayah Kerja Puskesmas Limboto. Jambura. Journal Of Health Science And Research P-Issn (2623-0674), E-Issn (2655-643x) <https://ejurnal.ung.ac.id/index.php/jjhsr/index>.
4. Keliat, B, A. 2019. Proses Keperawatan Jiwa. Jakarta: EGC.
  5. Kemenkes, R, I. 2023. Definisi Gangguan Jiwa Dan Jenis-Jenisnya. [https://yankes.kemkes.go.id/view\\_artikel/2224/definisi-gangguan-jiwa-dan-jenis-jenisnya](https://yankes.kemkes.go.id/view_artikel/2224/definisi-gangguan-jiwa-dan-jenis-jenisnya).
  6. Maramis, W. F., & Maramis, A, A. 2018. Catatan Ilmu Kedokteran Jiwa. Airlangga: University Press.
  7. Miller, D., Thompson, R., & Davis, K. 2021. Environmental Factors And Their Role In Schizophrenia Relapse Prevention. Journal Of Mental Health And Social.
  8. Muhith, A. 2021. Buku Teori Dan Aplikasi Pendidikan Keperawatan Jiwa. Yogyakarta: Graha Ilmu.
  9. Nasir, A. 2015. Dasar-Dasar Keperawatan Jiwa Pengantar Dan Teori. Jakarta: Salemba Medika.
  10. Niriayah, S. 2023. Keperawatan Kesehatan Jiwa. Bandung: Midina Media Utama.
  11. Niriayah, S. 2023. Keperawatan Kesehatan Jiwa. Bandung: Midina Media Utama.
  12. Ramadia, A., Aziz, A, R., Eri, M., & Jannaim. 2022. Faktor-Faktor Yang Berhubungan Dengan Kepatuhan Kontrol Berobat Orang Dengan Gangguan Jiwa. Jurnal Keperawatan Jiwa (JKJ): Persatuan Perawat Nasional Indonesia Volume 10 No 1 Hal 1 - 10, Februari 2022, e-ISSN 2655-8106, p-ISSN 2338-2090.
  13. Riyadi, P. 2015. Asuhan Keperawatan Jiwa. Yogyakarta : Graha Ilmu.
  14. Silviana, A., Kusumajaya, H., & Fitri, N. 2024. Faktor – Faktor Yang Berhubungan Dengan Kekambuhan Pada Pasien Skizofrenia. Jurnal Penelitian Perawat Profesional Volume 6 Nomor 1, E-Issn 2715-6885, P-Issn 2714-9757 <http://jurnal.globalhealthsciencegroup.com/index.php/jppp>.
  15. Stuart, G, W. 2016. Keperawatan Kesehatan Jiwa. Indonesia: Elsever.
  16. Stuart, G, W. 2016. Keperawatan Kesehatan Jiwa. Indonesia: Elsever.
  17. Sutejo. 2019. Keperawatan Jiwa. Konsep Dan Praktik Asuhann Keperawatan Kesehatan Jiwa: Gangguan Jiwa Dan Psikososial. Yogyakarta: Pustaka Baru Press.
  18. Videbeck. 2019. Psychiatric-Mental Health Nursing. 8 Ed. New York: Wolters Kluwer.
  19. Who. 2022. Mental Disorders. World Health Organization. Available From: <https://www.who.int/news-room/factsheets/detail/mental-disorders>.
  20. Yosep, I & Sutini T. 2016. Buku Ajar Keperawatan Jiwa. Bandung: Refika Aditama.
  21. Zhu, X., Wen, M., He, Y., Feng, J., Xu, X., & Liu, J. 2023. The Relationship Between Level Of Education, Cognitive Function And Medication Adherence In Patients With Schizophrenia. Neuropsychiatric Disease And Treatment, 2439–2450. <https://doi.org/10.2147/ndt.S424694>.