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Research Article

THE EFFECT OF FILM "IS IT POSSIBLE TO LIVE HAPPILY WITH SCHIZOPHRENIA?" ON INDONESIA COMMUNITY LEADER'S PERCEPTION ABOUT SCHIZOPHRENIA

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ABSTRACT

The lack of understanding about schizophrenia creates stigma for Indonesian people diagnosed with schizophrenia. The society thinks that people with schizophrenia are useless and dangerous so they tend to lock and isolate them. Till now, information provided on the electronic media are consisted negative side of schizophrenia. This research aims to create a film and tested its effectiveness in reducing stigma about recovery from schizophrenia among community leader.

This study was a quasi-experimental with pretest and posttest control group design. There were 60 samples of community leader consisting 30 people of intervention group and 30 people of control group. Sampling quota was used to determine sample. Intervention group gain exposure of a film entitled "*Is it possible to live happily with schizophrenia?*" meanwhile control group has no intervention.

The result shows that there is a difference between score of pretest and posttest on group of control and intervention ($p=0,000$), means that health education using film which show the positive things about recovery from schizophrenia has succeeded to improve perception of community leader toward schizophrenia. So, it can be used to change community's perception and combat stigma about schizophrenia.

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INTRODUCTION

Mental illness have become "The Global Burden of Disease" (Rossler, Salize, van Os & Riecher-Rossler, 2005). In Indonesia, about 27 million people suffer from mental emotional disorder and about 12 million suffer from severe mental disorder (Indonesia health department, 2013). The most serious mental disorder is schizophrenia (Suryani, Welch and Cox, 2013). Globally, it is estimated that 24 million people are living with schizophrenia (WHO, 2008), whereas 1.2 million people have been diagnosed with schizophrenia in Indonesia (Balitbangkes, 2013).

Schizophrenia is impacting both live of individuals and the family. WHO estimates that mental disorders are the second largest cause of disease and disability (WHO, 2013), and high budgeted for therapy related to long treatment resulting in declining the individual's quality of life (Evans, Banerjee, Leese & Huxley, 2007). Unfortunately, programs developed and implemented by the Indonesian government are still focusing on medical treatment. None of them aims to focus on empowering the individuals. Whereas in order to recover from schizophrenia, individuals empowerment is crucial so that they

can manage their own live despite they have limitation mentally (Deegan, 2003, Bellack, 2006). This research is a part of my study titled "The Development of Recovery Model in increasing quality of life in people with schizophrenia in Indonesia". This study is the first phase of my study which aims to change perception of all the elements of society who involved on the recovery process in people with schizophrenia. Changing society's perception about schizophrenia is needed today, stigma occurs in society was - recovery of schizophrenics is not possible, they think that individuals who suffer from schizophrenia are danger and useless so they are discriminated and isolated from the community (Irmansyah, Prasetyo & Minas, 2009).

Stigma occurs in four steps (Corrigan and Rao, 2012) including cognitive processes-cues, stereotypes, prejudice and discrimination. The cognitive processes-cues arise from the sign or symptom of schizophrenia such as abnormal behavior and inappropriate physical appearance (Corrigan and Rao, 2012). The behavior and appearance can be seen from presentation or slide on mass media or electronic media like television. Stereotypes is an opinion or perception of a person toward behaviors of people with schizophrenia, such as dangerous and need to avoid

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(Corrigan, Kuwarbara, & O' Shaughnessy, 2009), afraid and angry, blame, and feel pity (Rüsch, Angermeyer, Corrigan, 2005). Next phase is prejudice, a prejudice arise from negative perception about schizophrenia. Last phase is discrimination, in this phase the stigma manifest in behavior in which individuals with schizophrenia are discriminated and isolated by society (Suryani, 2013).

In many media in Indonesia, people who experience mental illness usually describe by poor personal hygiene and inappropriate clothes. Meanwhile according to McQuail (2011) watching television can lead people to believe toward what they showed. Furthermore, stigma of society to schizophrenics creates a stereotype. Stereotype has impacted on the lack of support from societies for individuals with schizophrenia in the process of recovery (Corrigan, 2005). The stereotype also causes self-stigma for the sufferer by internalizing the stigma. Consequently, the individuals feel down, frustrated, apathy and isolated.

Film is an audiovisual media that can improve individual's perception (Burford & Jahoda, 2011). As a media, film consists of visual symbol and linguistic as a code to convey message and potentially influence and create a community's opinion. It ables to meet the society demand about education, information and entertainment (Aufderheide, 2005). In fact, film can be used as a media to overcome the stigma about skizofrenia (Chen, 2006).

A research conducted by Dietrich, Heider, Matschinger, & Angermeyer (2006) compares the effect of media which display with and without violence which have been done by schizophrenics toward adolescent perception which found that at the first group, on display violence the perception of respondent is negative. Meanwhile at the second group, perception of respondent is positive.

In this research, we developed a film entitled "is it possible to live happily with schizophrenia?". This film tells about what the schizophrenia is, how to treat them and how to recover from schizophrenia. This research aims to test the effectiveness of the film towards perception of community's leader about recovery from schizophrenia.

METHOD

This research is a quasi-experiment pre post design aim to test the effectiveness of film titled "Is it possible to live happily with schizophrenia?" towards perception of community leaders about recovery ofschizophrenics. Population in this research is all the community leaders which have been involved in recovery process of schizophrenia.

The sample taken by quota sampling technique. The technique has been chosen because the number of population among the group of respondents involved in this study are not the same. There are four groups of respondent including group of sufferer, family, community leader and health professional. In this article I reported the result from the group of community leaders. Another reason is the need for specific character of the sample, with minimum 30 people (Cohen et al 2007). To anticipate possibility of drop out, the researcher did correlation to 10%, with amount of sample 33 people. The inclusion criteria of community leader which involved in this research are being a community leader, adult, fluent in Bahasa

Indonesia, and willing to be a respondent while exclusion criteria are not following the health education entirely.

Respondents were accessed through sub-district office. The names of community leaders in the District were taken randomized and selected as many as 33 people. However, at the time of intervention, 2 respondents did not come, and 1 respondent did not follow the full event. While in the control group there were 3 questionnaires dropped because of the incompletion.

Descriptive analysis were used to analyze community leaders perception about recovery and presented in table 3.1. Comparative test using paired samples t-test had been done to analyze the difference between interventions and control group.

RESULTS

Based on the univariate analysis results, as seen in Table 3.1, in pretest shown that 83% of respondents have negative perception and only 17% who have positive perception, while in posttest, all the respondents have positive perception. In control group, in pre and posttest almost all the respondents have negative perception. Based on the result of the calculation of mean comparative by using paired samples T-test (table 3.2) obtained p-value as many as 0.000 < 0.05, so H₀ rejected. It shows that there is a significant difference between community leaders perception on intervention group about recovery from schizophrenia between pre and post intervention. Based on the results of the calculation of mean comparative by using paired samples T-test obtained p-value as many as 0.0091 > 0.05 (Table 3.3), therefore H₀ accepted. This results means that there is no significant difference between pre and post test in control group.

Comparative between intervention group and control group by using independent sample t-test obtain p-value as many as 0.000 < 0.05, as the result H₀rejected. This finding shows that there is a significant difference among community leader's perception about recovery between intervention and control group. So, it can conclude that health education by using film "Is it possible to live happily with schizophrenia?" effectively change people's perception about schizophrenia.

Table 1 Description of community leader perception about recovery from schizophrenia

Community Leader's Perception	Explanation	Intervention		Control	
		Pre Test	Post Test	Pre Test	Post Test
Negative	Frequency	25	0	29	24
	Percentage	83%	0%	97%	80%
Positive	Frequency	5	30	1	6
	Percentage	17%	100%	3%	20%
Total	Frequency	30	30	30	30
	Percentage	100%	100%	100%	100%

Table 2 Comparative perception of community leader on intervention group about recovery from schizophrenia between pre and postintervention

Testing	Community's leader Perception (Intervention)		t calculate	p-value
	Mean	Deviation Standard		
Pre	73.63	5.90	-8.852	0.000
Post	92.20	9.93		

Table 3 Comparative perception of community leader on control group about recovery from schizophrenia between pre and post intervention

Testing	Community leader's Perception (control)		t Calculate	p-value
	Mean	Deviation Standard		
Pre	65.80	5.56	-1.747	0.091
Post	68.53	4.81		

Table 4 Comparative perception of community leader about recovery between intervention and control group

Group	Community's leader Perception		t calculate	p-value
	Mean	Deviation Standard		
Intervention	18.57	11.49	6.051	0.000
Control	12.73	8.57		

DISCUSSION

The data from pretest both intervention and control indicate that community leader's perception about recovery is negative. This data means that societies stigma to the individuals diagnosed with schizophrenia still exist. It affects the individual life entirely including their recovery process. Individuals with schizophrenia often gain unfavorable treatment such as shunned, ridiculed, isolated and discriminated from the society (Suryani, 2013; Minas and Diatri, 2008). Consequently, they cannot live in peace, unable to learn or work in society (Chong, Verma, Vaingankar, Chan, Wong, Heng, B.H., 2007) and can inhibit their recovery process and socialization in communities (Bellack, 2006). The stigma is not only impacting on individuals. It also has an impact to the family. Families feel shame and burdened (Suryani, 2015). So the families avoid seeking help from a psychiatrist, psychologist or other health professionals (Kurihara, Kato, Reverger, Tirta & Kashima, 2005) and confined them at home or locked them (Minas and Diatri, 2008).

This study was done to test the effectiveness of health education using a film titled "Is it possible to live happily with schizophrenia?" The film content describes what and how to recover from schizophrenia. The description in the film supported by facts of people who have recovered from schizophrenia. The contents demonstrated the positive aspects of schizophrenia. All of them are meant to combat the stigma and stereotype about schizophrenia. The result of the study showed that health education is effective in improving the community leader's perceptions about schizophrenia.

Film have a strong capacity in changing people's perceptions, including the perception of mental disorders (Burford & Jahoda, 2011), it creates knowledge, change perceptions and finally change people's behavior (Hackett, 2008). Health education using media such as film composes more interesting information because it is delivered in the form of a story (Krahn and Outram, 2012). Besides, it can also increase the internalization of the information conveyed. By watching film, the audience's emotions are involved, the visuals effect and back sounds makes the information easier to understand. Health education using film can be used to educate public (Weber and Silk, 2007) the film which had been produced can

be used as a media to educate public about recovery from schizophrenia so that the stigma can be reduced.

CONCLUSION

From the results of the research it can be concluded that health education using a film titled "Is it possible to live happily with schizophrenia?" succeeded in improving people's perception about recovery from schizophrenia. It is advisable for health workers, especially those in primary care to do health education routinely using audio-visual media such as film that contains positive things about schizophrenia and the process of healing and recovery in order to combat the stigma.

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Ethical approval

Ethical approval was obtained from Ethic Committee Faculty of medicine Padjajaran University

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