

## COMMUNICATION OF PEOPLE WITH MENTAL HEALTH DISORDERS IN MILLENNIAL GENERATION

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### Abstract

Mental health is currently an issue that must be considered in addition to physical health. According to Basic Health Research (2018), it shows that depression is the highest mental illness and 450,000 people are diagnosed as people with severe mental disorders (ODGJ) who have age range of 15-29 years. This study aims to determine the communication made by people with mental health disorders in the millennial generation to their closest people. The theory used in this research is *Communication Privacy Management Theory* and *Constructivism Theory*. CPM theory explains how a person with mental health disorders communicates mental illness by considering their personal information. Meanwhile, constructivism theory supports the CPM theory to explain how sufferers of mental health disorders choose the right diction in order to avoid wrong perceptions. Constructivism theory explains how a person constructs the message to be conveyed. The method used in this study is a qualitative method with purposive sampling, namely determining the informants according to what is needed by the researcher. The result of this research is that each informant has rules to convey his/her private information to the closest person. The informants' trust with other people still has their privacy boundaries made based on gender, culture, and context. Besides, informants used proper diction to convey their mental illness to the closest people.

Keywords: Communication, Mental Health, Millennial

### INTRODUCTION

According to WHO, about 800,000 people died or about 1 natural person died in 40 seconds due to suicide. WHO's exposure in the 2013-2020 Mental Health Action Plan, health insurance anywhere has not served patients with mental health disorders. WHO notes 76-85 percent of

people with severe mental disorders in middle and low-income countries have not received proper treatment. Mental health in Indonesia is subject to a negative stigma. Mental health issues are made worse for someone who experiences them. Mental health can occur due to trauma in the past which becomes a mental disorder.

In a survey conducted by the Global Health Data Exchange in 2017, there were around 27.3 million people in Indonesia who had psychiatric problems. Indonesia is one of the highest countries with mental disorders in Southeast Asia. In 2018, The Ministry of Social Affairs shows that there were only 48 mental hospitals in Indonesia, 32 state-owned mental hospitals, and the rest are privately owned. Data from the Association of Indonesian Mental Medicine Specialists (PDSKJI) there are only 987 psychiatric specialists in Indonesia, which means 1 doctor treats more than 250 thousand people. WHO stated that ideally, 1 doctor would treat 30 thousand people. Meanwhile, according to the Indonesian Clinical Psychology Association (GPA), there are around 2712 psychologists in Indonesia in 2020. The highest mental health disorder in Indonesia is Anxiety Disorder (anxiety), which number more than 8.4 million people. Then, there are 6.6 million people with depression and there are 2.1 million people with behavioral disorders, while 96.5 percent of schizophrenics in Indonesia do not receive proper medical treatment. Indonesia is still an emergency stigma about mental health.



Figure 1. Indonesia's Mental Health Rankings

Source: *Institute for Health Metrics and Evaluation (IHME), 2017*

The Ministry of Health researches what mental disorders are the causes of Disability Adjusted Life Years (DALYs) or better known as years of living with disabilities. Mental disorders are among the top 5 in the calculation of disease burden in 2017. There is 10 major *mental disorder* that causes DALYs according to the ministry of health. In 2017 there are several types of mental illness experienced by people in Indonesia, namely depression, anxiety disorders, schizophrenia, bipolar disorder, behavioral disorders, autism, and Attention Deficit Hyperactivity Disorder (ADHD). There is a change in the pattern of mental illness that has increased DALYs in the last 3 decades (1990-2017) due to mental illness, namely, depression has remained the first rank in the last 3 decades, then there are schizophrenia, bipolar disorder, and autism.

The results of basic health research at the data and information center of the Ministry of Health of the Republic of Indonesia (Indrayani, YA & Wahyudi, T. 2019) stated that the cause of mental disorder in 2018 shows that depressive disorder is a mental disorder that causes DALYs. Depressive disorders begin to be experienced at the age of 15-29 years. Data from the Ministry of Health states that urban people are more prone to depression, bipolar disorder, schizophrenia, and obsessive compulsiveness. This is due to the increasing burden of living in urban communities. Mental health problems are one of the biggest health problems, but the availability of mental health services is very minimal (Christianingrum, Lesmana & Wijayanti, 2018).

Interpersonal communication is needed in dealing with sufferers of mental health disorders so that messages can be received. Communicating the condition of people with mental health disorders to their closest people in the millennial era is not easy because the Indonesian people still do not understand mental health. The role of interpersonal communication of people with mental health disorders to the right person, namely a psychiatrist or psychologist, can be a bridge so that these

sufferers are not tormented by the mental health disorders they are experiencing.

The role of digital media today can be used as a forum for education for the public about knowledge about mental health. Digital media can be accessed to find information about mental illness anytime and anywhere. With digital media that can be used to find information about mental health disorders, people can use interpersonal communication with the closest people to exchange information about mental health disorders.

Interpersonal communication is needed to provide motivation and become a socio-cultural treatment for the mental health of sufferers. ODGJ sufferers can get a *support system* from the closest person by conveying what they feel psychologically. Millennials depend on social media.

However, not everyone can adapt to the circumstances experienced by him so that mental disorders arise. There are psychosocial stressor factors (mental stress) that cause a person to change and adjust to the circumstances and what they want (Indrayani, YA & Wahyudi, T. 2019). There are several types of psychosocial stressor factors that cause mental disorders including marriage, parental problems, interpersonal

relationships, environment, employment, finance, law, childhood development until now, physical illness, family factors caused by unfavorable family conditions such as parents rarely at home, and *sex abuse*. This research analyses how the millennial generation compiles messages and conveys the message that they are ODGJ sufferers to their closest people.

## LITERATURE REVIEW

### Interpersonal Communication in Mental Health

Interpersonal communication is the process of sending and receiving messages between two people or a small group of people with effects and instantaneous feedback (DeVito, 2013: 6). Interpersonal communication is considered the most effective for changing attitudes, beliefs, opinions, and behavior of communicants. When conveying an instantaneous message there is also ongoing feedback. The communicant's response to the message conveyed can be with facial expressions and verbal communication styles. Interpersonal communication is also called *dyadic communication*, which is someone who processes and manages messages and reciprocity to create the same perception. Effective communication is characterized by good interpersonal relationships and has a two-way flow of

messages. The effectiveness of interpersonal communication is openness, empathy, positive attitude, support, and equality. Interpersonal communication progresses if communicators and communicants are willing to open up to one another (Maritasari & Lestari, 2020).

Interpersonal communication can be effective if several things support the course of communication, including openness, empathy, support, positive feelings, and equality (DeVito, 2013: 49). The openness in question is the willingness to open up, tell about himself to others who are trusted, and can receive responses or suggestions from others. Empathy here is the same feeling that is felt by other people (putting oneself in someone else's shoes). The support referred to is mental support for ODGJ sufferers and situation support. A positive feeling is communication that feels positive so that you want to open yourself up. Meanwhile, the similarity in question is similarity such as attitudes, behavior, values, and experiences.

Factors that influence interpersonal communication include *self-concept*, *ability*, *skill experience*, *emotion*, and *self-disclosure*. *Self-concept* is the most important self-concept to influence communication with other people. *Ability*

is the ability to be a good listener to others. *Skill experience* is the ability to express ideas and show one's abilities. *The emotion* in question is that someone can overcome their emotions by correcting anger. *Self-disclosure* is a person's self-acknowledgment to others freely and frankly.

Mental health is a condition in which a person can develop physically, mentally, spiritually, and socially so that the individual realizes his abilities, can handle pressure, can work productively, and can contribute (Indrayani & Wahyudi, 2019). The stigma of psychological issues in Indonesia is that people still believe that mental health disorders are caused by irrational things. Research from (Arya, DK 2020) states that there is not enough availability of mental health services to meet the needs of ODGJ. Then, there is research from (Malla, A. Jobber, R. & Garcia, A. 2015) states that the view of mental illness must be well presented to the public by reality, knowledge, and public perceptions. According to research from (Aziz, R. Wahyuni, EN & Wargadinata, W. 2017), being grateful and forgiving has a very important role in developing mental health. According to Ashok Malla, Ridha Jobber, and Amparo Gracia (2015), mental health disorders, on

the other hand, affect a person through various experiences and phenomena that can change the thinking of each individual and one's self-awareness. This is seen in more serious mental health disorders such as psychosis and bipolar disorder. Factors that increase the risk of mental health disorders are the environment that causes trauma.

This research focuses on how people with mental illness, namely the millennial generation who become ODGJ, convey messages about their mental health problems to their closest people. Interpersonal communication will run effectively if there is no *noise* and there is an interpersonal relationship. This research is the same as research from Simanjuntak, LS and Nasution, N (2017) which states that interpersonal communication of psychologists on the recovery of patients in the North Sumatra Mental Hospital is needed because it is from that communication that the psychologist can find out the problems suffered by the patient, so the psychologist can help the healing process. The difference in this study from the research of Simanjuntak, LS, and Nasution, N (2017) acknowledges that people with mental health disorders process and convey messages openly to their closest people. Meanwhile, previous

research on how psychologists communicate for the recovery of mental hospital patients. Previous research from Nihayah, U. (2016) described that interpersonal communication to obtain personal information needs assessment, symptoms related to mental health problems experienced by counseling. This is the same as in this study, interpersonal communication is used for how people with mental health disorders can open up to their closest people through existing interpersonal relationships.

### ***Communication Privacy Management Theory (CPM)***

The theory refers to this research is the Communication Privacy Management (CPM) theory proposed by Sandra Petronio. This CPM theory explains how a person navigates personal information that will be shared with others. This theory wants us to think that someone has privacy restrictions (Grifiin, 2012: 169). Within this theory, we are involved in a complex negotiation between privacy and openness. Someone will decide what to keep secret and what to disclose is not an easy act but there must be a balance of the demands of the situation with the needs of us and others. There are 5 important factors for the CPM limit according to Petronio, including:

1. *Ownership and control of private information*, are people who believe that they have the right to control their personal information.
2. *Rules for concealing and revealing*, is someone who uses rules to control their privacy.

There are 5 factors to regulate privacy, including:

- a. *Culture*, cultural differences affect the value of openness and disclosure of one's privacy.
- b. *Gender*, which is meant by gender here, is that it is easier for women to disclose their openness and privacy information than men.
- c. *Motivation*, Petronio emphasizes liking and attraction as interpersonal motivations that can loosen privacy boundaries.
- d. *Context* describes someone who has the same trauma in any case. This trauma affects cultural factors, gender, and motivation to influence someone to regulate their privacy rules.

- e. *Risk/benefit ratio* describes the risk and benefit factors that a person will get when disclosing his / her private information to others.
- 3. Disclosure creates a confidant and co-owner, which is when other people are informed about someone's personal information or find someone's personal information, it will become joint property.
- 4. Coordinating mutual privacy boundaries, is someone negotiating privacy rules to be mutually agreed upon.
- 5. Boundary turbulence - relationships at risk, is when someone who has personal information does not negotiate effectively to follow privacy rules.

The CPM theory is used to discuss this research on how people with mental health disorders provide limited information about the state of their mental illness to the closest people. People with mental health disorders can control information using important restrictions in privacy rules. Previous research from Njotorahardjo, F. (2014) stated a description of the privacy communication

management process of a former mistress to regulate the boundaries of her privacy communication with the family. The similarity with this study is that sufferers of mental health disorders also regulate the limits of their private communication with those closest to them.

### ***Constructivism Theory***

The supporting theory used in this research is the Constructivism Theory by Jesse Delia. This theory explains the differences in a person's cognitive abilities to communicate in social situations. This theory says that a person interprets and acts according to the concepts in his mind (Griffin, 2012: 98). Delia stated that the messages conveyed varied in complexity. Previous research from Karman (2015) in this constructivism theory argues that inter-individual constructs show one's understanding of others. Someone who has the same simple cognitive scheme will easily fall into stereotyped actions and vice versa. Individuals can understand other people is very important for personal construction. Someone who has simplicity in terms of cognitive will tend to simplify everything that is assessed or just understand someone one-sidedly.

The correlation of constructivism theory with this research is when people with mental health disorders who have

cognitive complexity will be able to compile messages that will be conveyed about their mental illness so that they are easily understood by their closest people. Because people with mental health disorders first understand how the social conditions around them. Selection of suitable diction to use when conveying messages related to mental illness conditions.

## METHOD

This study uses a qualitative method that collects data arranged in a sentence (Pawito, 20017: 35). Qualitative research places more emphasis on the researcher as a research instrument so that the researcher can reveal the social situation in the field. Qualitative research does not question how many informants will be taken, but how deep the informants explain to answer problems (Moeleong, 2002: 87). Data collection is more flexible and follows cultural assumptions. Qualitative research aims to analyze human social behavior. Data collection techniques in this study are interviews, observation, and literature study. Qualitative research seeks data not to generalize because it examines the process. The technique for retrieval of informants is using *purposive sampling*, *purposive sampling* which is of informants

under the criteria required by the researcher (Moeleong, 2002: 93).

This research is a qualitative descriptive study. Descriptive research is research that provides an overview of the social situation in society. Research that classifies social phenomena with the problem under study. Descriptive research does not use variables to explain a social phenomenon. Researchers The subjects in this study were the millennial generation who became ODGJ from various parties. The object of research is communication that explains mental health conditions. The data that has been obtained is then processed to become research results. The results of these studies can be drawn to a conclusion.

## RESULT AND DISCUSSION

Based on Law Number 18 of 2014 concerning Mental Health. Mental health is a condition in which individuals can develop physically, mentally, spiritually, and socially so that they can realize their abilities, can handle pressure, can work productively, and can contribute to their community. According to WHO mental health disorders consist of various problems and various symptoms. ODGJ is someone who experiences disturbances in thoughts, behavior, and feelings in the form of symptoms or meaningful changes.



Data from Basic Health Research 2018, the most mental disorders are depression and anxiety.

In today's digital era, social media is a medium for finding information and providing information. The existence of a digital media mental health campaign has started on social media. People with mental health disorders can access information quickly with digital media about mental illness. This digital media serves as a socialization media to educate the public with a campaign on mental health disorders. This is what made some informants aware of the symptoms of mental health disorders which eventually led the informants to go to a psychologist or psychiatrist.

#### *Ownership and control of private information*

The results of the research of 4 millennial generation informants with different backgrounds and different mental health disorders show that according to the CPM theory, the informants limit information about mental health disorders to their closest people. For informant 1 (25 years), a woman diagnosed with depression in 2018 by a psychologist, the informant experienced several symptoms, namely feeling sad and crying constantly, being irritable, feeling very guilty and worrying excessively, hurting

herself, and having thoughts of suicide during months at a time. Informants seek information through social media about symptoms that have been felt for months. Then, the informant decided to visit a psychologist after reading information about mental health through social media Instagram. Depression is a medical disorder that affects feelings and thoughts in the form of constant sadness and a sense of loss of interest before doing an activity (Pratikaningtyas, Wahyuni, Aryani, 2019). However, the informant still did not inform the closest person when going to a psychologist. After coming from a psychologist, the new informant conveyed to the closest person related to his mental illness. The informant provides this information to his closest friend, namely his friend. There are many things that the informants consider when conveying their situation. Informants do not choose their parents because they are afraid to make their parents no longer trust themselves and are afraid to disappoint their parents. The selection of the closest person to the informant, namely his friend, was because the informant felt he could open up and trust his friend more about his current state.

Informant 2 (26 years old) and informant 3 (27 years old) received a diagnosis by a psychiatrist, namely Borderline Personality Disorder (BPD) or borderline personality disorder. BPD is a mental disorder characterized by changing moods and self-images, and impulsive behavior (Wibhowo, So, Siek, Santoso, 2019). BPD has a different

way of thinking in general. This mental disorder appears in the period before adulthood. People with BPD can improve with age. These two informants were women who experienced trauma which resulted in becoming people with BPD mental disorders. Informant 2 decided to go to a psychiatrist because he felt something was not going normally with him. The psychiatrist diagnosed BPD with the symptoms the informant felt. After the informant was diagnosed with BPD, the informant further limited his mental state to others. The informant said that only telling stories with a friend was the only one who could be trusted and his best friend was also a woman. In contrast to informant 3, the informant was diagnosed with BPD after seeing a psychiatrist and experienced sudden symptoms of being sad and crying without any cause causing sadness and crying. These symptoms occur without knowing the time and can occur at any time. Informant 3 had tried to commit suicide several times when the sadness and tears came. Informant 3 shared information with several people closest to him and not just one. However, there is still a limit to information about his mental illness to those closest to him, namely only informing him that informant 3 is a person with BPD and does not provide details about the cause. Informants 2 and 3 carried out the therapy suggested by the psychiatrist and took drugs given by the psychiatrist to minimize their mental disorders.

Informant 4 (27 years old) also carried out controlling privacy, the

informant received a diagnosis from a psychiatrist, namely *anxiety*. *Anxiety* (anxiety) is a psychological disorder that causes the sufferer to experience great and excessive anxiety accompanied by certain signs and symptoms (Eridani, Rifki, & Isnanto, 2018). Informants experience *generalized anxiety disorder (GAD)* who think too much about things (overthinking). The informant admitted that he had difficulty concentrating and could not focus, causing depression. The symptoms of GAD experienced by the informants were irritability, often feeling overly tired so that it interfered with daily activities. This millennial informant found out about the symptoms experienced through social media, which in the end the informant decided to go to a psychiatrist and get a diagnosis of GAD. After receiving a diagnosis of GAD, the informant informed his parents what was going on in his mental health. The informant explained in detail about GAD so that the parents would understand. The informant only informs GAD to the person closest to him, namely the parents, because the informant wants his parents to know his condition. Informants control their privacy about GAD so that it is not consumed in general.

*Rules for concealing and revealing*

The results showed that informant 1 controlled information on mental illness using self-made rules such as 5 factors to regulate privacy (Griffin, 2012: 170), namely the informant conveyed the state of his mental illness to his female friend because the informant trusted his friend not to disseminate the condition of the disease state. mentally to others. Besides, the informant explained that his friend had the same context, namely having childhood trauma.

Informant 2 was traumatized by a love story with her ex-lover, was left with a position of pregnancy outside of wedlock hidden from her parents, and then aborted because she was ashamed of her condition and ashamed of her family. Informant 2 tends to control the information that will be shared with those closest to them. In this case, the informant admitted that he was traumatized by his love story and only shared information with one close friend. The rules for controlling information work with what the informants want according to the context. Meanwhile, informant 3 explained that there was the trauma of *sex abuse* during childhood. Informant 3 shares information about mental health problems with some of his closest people, but there are still limitations to this information, such as the trauma of *sex*

*abuse* not being shared with several of his friends, only one friend can be trusted to receive the trauma information.

For informant 4, the results showed that the informant was very open with his parents after receiving a diagnosis of GAD. Informants know the risks that will be obtained when disclosing their private information. Informants get benefit factors after informing GAD to their parents, namely parents understand what is happening to their children and care more about their child's mental health.

### *Constructivism*

The theory of constructivism discusses the ability cognitive a person to communicate in social situations and everyone has different thoughts. The results showed that the informants compiled messages with the appropriate diction selection when conveying private information about their mental health disorders. Informants try to understand the closest people who will be given information about mental illness. Informants compile messages based on their concepts that are adapted to reality into perceptions to form impressions. The cognitive complexity of the research results shows that there are several ideas about the personality that are used to

describe a person (differentiation). Informants make messages that are conveyed according to the people closest to them. Messages are formed based on a certain context so that the closest people can understand others.

## CONCLUSION

Communication of people with mental health disorders in the millennial generation to people who are considered close uses the privacy rules of each sufferer to provide information about their mental illness. 3 informants were looking for information about mental health disorders through social media, which in the end the 3 informants decided to go to a psychologist or psychiatrist. People with mental health disorders have different rules and will limit the information that will be shared with those closest to them. These boundaries are based on gender, culture, and context to influence the information to be provided. 3 informants informed their friends about mental health problems because they could understand more based on the context of the information presented. Meanwhile, 1 informant chose to provide information about mental health disorders to his parents because it was based on the risks and benefits that the informant would get when communicating his mental illness.

Also, it can be concluded that the informants used the right diction to convey information to the closest people because everyone has different thoughts to interpret a message.

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