

SOCIAL MEDIA INSTAGRAM, INFLUENCERS, AND ADOLESCENT SOCIAL IDENTITY

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ABSTRACT

The need for psychological services in Indonesia, especially since the outbreak of the pandemic, has increased. The increase in the number of people accessing these services must be followed up seriously by institutions providing psychological services throughout Indonesia in order to ensure that people who use psychological services can make optimal use of them. The aim of research using this descriptive survey research method is to find the initial factors that lead people in using psychology services. Asosiasi Psikolog Rumah Sakit Seluruh Indonesia (APRSI) under HIMPSI will improve a better system and more affordable psychology services for the people of Indonesia. This also includes APRSI as the organization that oversees psychologists who provide psychological services in various health service facilities in Indonesia. Based on the results conducted Asosiasi Psikolog Rumah Sakit Seluruh Indonesia (APRSI) from January to April 2024, the scientific publications division consists of total 249 participants across Indonesia, 57.8% had undergo psychological consultation with majority issue dominated by personal, children and parenting and couple/family issue. Participants who had never used psychological services, 71.7% of them having a desire to consult with same three majority issues. The psychological service practice that is considered ideal by survey result is private psychology practice, followed by hospitals and community health centers. Expensive costs, lack of clear information regarding the location of psychological services that can be reached and lack of confidence in the results of psychological services were the reasons why participants never used psychological service.

Keywords: *psychological services, APRSI, Indonesia, facilities*

1. PREFACE

Since the pandemic outbreak, the physical and psychological health of the individual as well the society began to decline. Mental health disorders are not a thing trivial. Mental health disorders that often affect society as a result of pandemic is a post-traumatic stress disorder, confusion, anxiety, fear, worry, frustration, excessive anxiety, stress, depression, xenophobia, and health problems other mental (Brooks et al., in Vibriyanti, 2020). Women, children and teenagers, and the elderly are groups who has psychological impact of the pandemic the most.

From a survey conducted by the Association of Specialist Doctors Indonesian Mental Medicine (PDSKJI) regarding mental health, which conducted on 1,552 respondents regarding the problem psychological disorders such as anxiety, depression and trauma, making up 76.1% of women at the age of 14-17 years experience these three psychological problems (Winurini, 2020). Mental health disorders cause psychological symptoms in the form of: nausea, dizziness, fever, sore throat, even though the individual does not suffer from COVID-19, they show form of reaction to this anxiety which is called psychosomatics. There are also anxiety reactions that are not causes physiological symptoms in patients.

The stigma in society towards people with mental health disorders, an unfriendly environment to support mental health, and the phenomenon of self-diagnosis are the main reasons why mental health problems urgently need to be mitigated immediately. However, mental health issues have so far not been a priority. The results of a study by the Kaukus Masyarakat Peduli Kesehatan

Mental which were presented on November 2023 concluded that the level of urgency of mental

health issues in Indonesia was very high with 82 percent of respondents saying it was very important and 12 percent saying it was important. As a result, 82 percent of respondents said mental health issues were very important and 12 percent said they were important. The study also found 5 urgencies and 3 essentials of mental health in Indonesia. Judging from the priority dimensions of mental health issues, there are 27 dimensions with 5 value prepositions for mental health in Indonesia. Based on research conducted by Greasley and Small (2015), it was found that mental health problems were the third biggest problem frequently consulted by patients. Furthermore, Greasley and Small also found that anxiety disorders and depression were the two main problems frequently encountered by general practitioners (GP).

The five urgent mental health issues in Indonesia are explained as follows. First, mental health has a multi-sector impact because it is part of a comprehensive health condition. Whether a person's soul is healthy or not will influence the level of productivity and determine the quality of life and achievements of the next generation. Second, it shows the most serious layer targeting children, teenagers and productive age (working adults). The increase in psychiatric cases occurs at various stages/life cycles. An increase in the magnitude of mental health problems occurs in adolescents and productive ages. Third, lack of education and inappropriate distribution of information. Fourth, mental health issues are a priority problem in the world but not yet a priority in Indonesia. Fifth, the causes of mental health problems in Indonesia are closely related to economic, social and cultural issues.

Three key essences are factors driving the level of urgency of mental health problems. First, there is widespread and massive stigma towards people with mental health disorders. Second, specific environments, especially at the family, school and workplace levels, are largely unfriendly to mental health. Third, the self-diagnostic phenomenon mainly occurs among teenagers, school children and workers. The Ministry of Health notes that Indonesia has a prevalence of people with mental disorders of 1 in 5 of the population (Badan Kebijakan Pembangunan Kesehatan Indonesia, 2023). The 2018 Riset Kesehatan Dasar noted that the prevalence of depression was 6.1 percent and mental-emotional problems 9.8 percent in the adult population. There are 91 percent of depression sufferers who do not seek treatment. Mental health problems in Indonesia are related to the high prevalence of people with mental disorders. Currently, Indonesia has a prevalence of people with mental disorders of around 1 in 5 residents, meaning that around 20% of the population in Indonesia has potential mental disorders (Rokom, 2021). So far, the increase in cases of mental health disorders has occurred in various life cycles, especially in adolescence and productive age. The community groups that need to be the main targets for mental health mitigation are children, teenagers, and productive age or working adults.

From the many priority issue matrices and the essence of mental health problems in Indonesia, several components are hidden, such as uncontrolled use of gadgets among children and teenagers, the burden of the sandwich generation, the search for identity, the influence of social media, as well as emotional, behavioral and violence problems. family based. The findings of this factorial group directly connect the clash of intergenerational values, which is integrated with digital technology and social media, to the priority issue of mental health for young Indonesians.

This study also found the urgency of addressing mental health issues in Indonesia, namely that mental health has a multi-sector impact because it is part of a comprehensive health condition. Whether a person is mentally healthy or not affects the level of productivity and determines the

quality of life. The results of research conducted by Mawarpury et al. (2017) found that the Keswa program has not become a priority program at the Community Health Center. This is because the Government does not yet view Keswa as an important program because the target to be achieved is the physical factors of ending poverty and child malnutrition (Achievement of the 2015 MDGs in Indonesia, 2015). According to WHO (2022) found that countries with middle and low income have low funding allocations for mental health programs.

The high number of cases of mental disorders has not been matched by an increase in coverage of mental health services. Apart from the minimal number of psychiatrists, not all provinces have mental hospitals. According to data from the Ministry of Health, of around 10,000 community health centers, only 6,000 community health centers provide mental health services. The need for psychological services in Indonesia, especially since the outbreak of the pandemic, has increased. Public awareness on mental health in mass media or social media is also raising. The increase in the number of people accessing these services must be followed up seriously by institutions providing psychological services throughout Indonesia in order to ensure that people who use psychological services can make optimal use of them.

Based on data dated 16 November 2023, HIMPSI is the only Main Organization for the Psychology Profession in Indonesia with 23,883 members and 12,517 psychologists spread across 34 Provinces in Indonesia (HIMPSI, 2023). The number of psychologists available is unequal compared to the increasing number of Indonesian populations. Indonesia continues to record population growth every year. According to the latest Central Statistics Agency (BPS) data, the population in Indonesia has now reached 278.7 million people by mid-2023.

In Indonesia, people may consult psychologists for various phenomenas and challenges that are specific to the country's cultural, social, and environmental context. Some of these phenomena include interpersonal relationships, trauma, workplace stress, education and academic pressure, cultural adjustment, natural disasters, religious and spiritual issues, urbanization and social change, many more. Stigma surrounding mental health is also strike despite of growing awareness. Mental health stigma remains a significant barrier in seeking help in Indonesia. Psychologists work to reduce stigma by increasing mental health literacy and promote access to mental health services. The field of psychology in Indonesia continues to evolve to address the diverse needs of its population within its unique cultural and social context.

WHO has stated that the COVID-19 pandemic has created a worldwide mental health crisis. Priambudi et al. (2022) tried to examine whether the fulfillment of mental health is the state's responsibility, what is the urgency of the fulfillment of mental health services and how is the ius constituendum for the fulfillment of the right to mental health services in Indonesia. By combining some of doctrinal research and Research-Oriented Reform, this study finds that based on the UDHR, ICESCR, 1945 Constitution of the Republic of Indonesia, Health Law, and Mental Health Law conclude that the fulfillment of mental health services is the state's responsibility. However, Indonesia law hasn't been fulfilled facilities and access to mental health.

Community Health Center or in Indonesia named as Puskesmas is a basic mental health service that can be accessed directly by the community. According to the Directorate of Mental Health Development, Ministry of Health of the Republic of Indonesia (2015), it was found that the imbalance in the ratio of professional mental health workers to the community population was 1.07 per 100,000 population with the distribution of health professional workers being uneven,

only found in big cities. Research conducted by Bodenheimer and Pham (2010) found that 71% of patients who accessed basic services were from people with a low economic level. The large number of people accessing community health centers is not balanced by the availability of facilities and infrastructure as well as improving the skills of health workers. On the other hand, Community Health Centers are basic services that can reduce the stigma of mental disorders in society (Greasley & Small, 2015).

Therefore, the article recommends three things. First, regulations for the development and management of human resources in the psychology profession. Second, law regarding the procedures for implementing mental health services. Third, Regulations to manage mental health administration's planning, financing, and supervision (Priambudi, et.al, 2022). The government should focus more attention on providing greater and wider access to psychological services, so that people's mental health is more secure and equal to other physical health.

As one of 21 associations under HIMPSI (Himpunan Psikologi Indonesia or in English Association of Indonesian Psychologists), the Association of Indonesian Hospital Psychologists or Asosiasi Psikolog Rumah Sakit Seluruh Indonesia (APRSI) has vision, mission and responsibility to develop and improve a better system, and to provide more affordable and reachable psychology services for the people of Indonesia. This also includes APRSI as the organization that oversees psychologists who provide psychological services in various health service facilities in Indonesia. This survey will determined standard of psychological services public policies in Indonesia.

2. RESEARCH METHOD

This research uses a quantitative descriptive approach with a survey method with the aim of obtaining basic description data regarding what kind of psychological services are available, how people reach and experience the benefits of these psychological services.

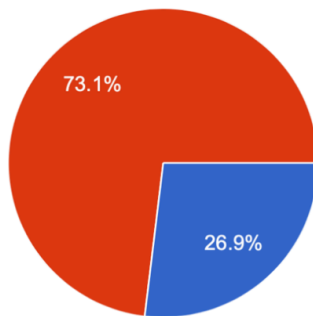
The participants involved are adults with range age of 18-65 years, men or women, living in all regions of Indonesia, working and having a permanent living as Indonesian citizen in regions of Indonesia, and willing to fill out this survey questionnaire according to the conditions they experience. The sampling method uses a random sampling technique by sending a survey link to psychologist colleagues and asking them to distribute the link to clients, family, friends in their surrounding environment.

This survey method was carried out to facilitate access to obtain the simplest information in accordance with general educational background by using questions to describe how Indonesian people use and reach psychological services so far. The survey questions were created by researchers with 10 items that needed to be answered upon their experiences. The questions contained information regarding the conditions of having used psychological services and never used psychological services, problems that were consulted and will be consulted, an overview of the costs of psychological services that participants can afford, the location and form of psychological services that are considered ideal, as well as suggestions for establishing better psychological services. well in the future. This survey is distributed in the form of a Google Form where the results can be directly viewed and collected in the form of tables and graphs.

3. RESULT AND DISCUSSION

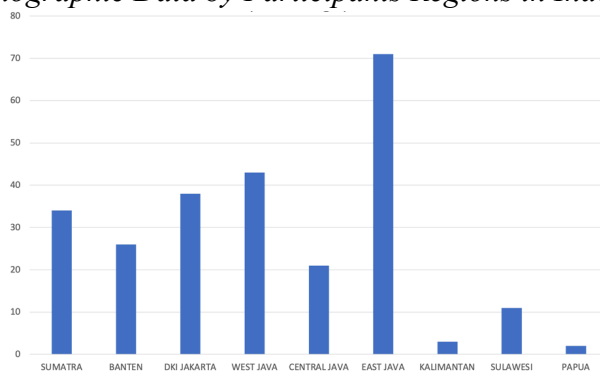
Based on data collection through January to April 2024, 249 participants involved in this survey. By sex, the participants consist of 67 males (26.9%) dan 182 females (73.1%).

Figure 1
Sex Demographic Data



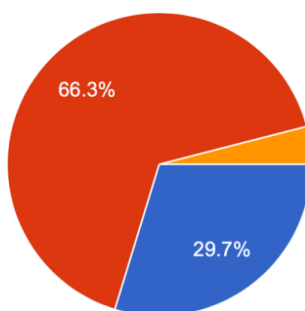
By regions, the participants mostly lived in East Java, Central Java and West Java. Other participants lived in Sumatra areas, Banten, DKI Jakarta, Sulawesi areas, Kalimantan areas, and Papua, eastern part of Indonesia.

Figure 2
Demographic Data by Participants Regions in Indonesia



By marital status, 66.3 % (165 participants) are married, 29.7% (73 participants) are single and 4% (11 participants) are divorced/separated.

Figure 3
Marital Status Demographic Data



Based on their knowledge between psychiatrist and psychologist, 71.5 % (178 participants) have knowledge on difference between psychologist and psychiatrist, 22.1% (55 participants) don't know and 6,4% (16 participants) have uncertainty about the difference between psychiatrist and psychologist.

Meanwhile based on their experiences to get psychological services, 57.8% of participants (143 participants) had undergo psychological consultation with majority issue dominated by personal issue, children and parenting issue and couple/family issue. Based on the 3 priority issues that have been consulted, it appears that issues relate to personal psychological problems or disorders, problems or disorders related to children or parenting, and interpersonal relationship problems with their partners/spouses.

106 Participants (42.4% from total participants) who had never used psychological services, 71.7% of them (76 participants) having a desire to consult with same three majority issues (personal issue, children and parenting issue and couple/family issue). This shows that there are still many participants who actually want to carry out consultations as part of psychology services but are still unable or have not succeeded in reaching psychology services in their area.

Expensive costs, lack of clear information regarding the location of psychological services that can be reached doubt on the results of psychological services, and others causal were the reasons participants still unable or never used psychological service in their lifetime.

The psychological service practice that is considered ideal by participants are private psychology practice, followed by hospitals and community health centers (Puskesmas).

Considered affordable psychological service cost will be mostly categorised on range 100-200.000 rupiah, 200-400.000 rupiah, and 50-100.000 rupiah. Some of participants choose the range of psychological service ia above IDR 500.000 which cost range for psychology services in big city areas.

4. CONCLUSIONS AND RECOMMENDATIONS

Based on the results of this survey, it appears that there is a need for more equitable education regarding psychological services and qualifications of psychologists, equal distribution of the provision of psychological services at the district level, for example for more reachable and affordable psychological services and better improvement for public facility to raise psychologist's competency standard.

There is a need to increase the competency of psychologists and other mental health workers in providing services to the community. The government needs to establish good cooperation with private practice providers that are more accessible and more accurate in disseminating information about psychology services. APRSI needs to standardize policies and standards for psychological services in hospitals, clinics, health centres and private practices as well as standardize costs that are acceptable throughout Indonesia.

The improvement of education and dissemination of appropriate information related to mental health issues needs to be more massive by involving government and private sector stakeholders. Cross-sector collaboration is needed between government policy on mental health equality, the availability oh psychological facilities across regions in Indonesia, health ministry regulations for mental health professionals and workers, and easier access to psychological services in public center or hospital to ensure that mental health problems in Indonesia become a priority to be addressed.

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