

# Model of Handling People with Mental Disorders through Christian Spiritual Therapy at the Gerasa Rehabilitation Center

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## Abstract

Diseases in humans consist of diseases of spirit, body, and soul. Diseases of the Christian faith's spirit are solved by prayer and repentance. Diseases of the body by taking him to the hospital to be treated by medical personnel. While mental illness until now has not had the proper treatment. It needs to do because there are people with mental disorders (ODGJ). This study aims to determine the model and impact of Christian spiritual therapy in dealing with ODGJ patients at the Gerasa rehabilitation center. This research uses the descriptive qualitative method. The results showed that the model of therapy given to ODGJ patients was 1) one year of orientation period; 2) perform worship: prayer, praise worship, and the word of God; pastoral counseling which carried out every day either personally/communally; organize recreation, community service, and sports; and medical treatment. Then the impacts include: 1) behavior change; 2) changes in speech; 3) change of mindset; 4) self-discovery; 5) self-potential development; 6) character change; 7) recovered and allowed to return to the family and get a job.

## Keywords

Gerasa rehabilitation center; Christian spiritual therapy; ODGJ

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## INTRODUCTION

Awareness of the need for mental disorders to be treated in Indonesia is still low. According to data from the Association of Indonesian Psychiatrists, there are only 600-800 psychiatrists throughout Indonesia (Association of Indonesian Psychiatrists, 2020). Only about 30% of the 9000 Puskesmas have mental health service facilities in Indonesia (Psikososial & Pemasung, 2019). It can be a particular concern for Indonesia because it

still needs psychologists and psychiatrists to help deal with mental disorders like this. Mental disorders are still considered a "taboo" thing for some circles due to the lack of information from the local government to socialize the dangers of mental health disorders if professionals in their fields do not handle them. Objective evidence of injustice for sufferers of people with mental disorders (starting now abbreviated as ODGJ) because they are considered to injure people around them so that they receive inhumane treatment by their family members by being in pasung in Kab. Cianjur, West Java (Psychosocial & Seclusion, 2019). Not something that can take lightly because the death rate for people with mental disorders is very high. Every 40 seconds, someone in this world commits suicide.

The World Health Organization (WHO) stated that 79% of suicide cases occurred in low and middle-income countries in 2016 (Lataima et al., 2020). Awareness of mental health disorders that require severe treatment is still lacking in Indonesia. In Indonesia, the high number of ODGJ is not comparable to professional staff such as psychologists and psychiatrists in dealing with mental disorders. According to Nafsiah Mboi, Minister of Health (Menkes) of the Republic of Indonesia, those who indicate to be ODGJ are considered different from the community in general, the treatment they receive includes expulsion from school, termination of employment, divorce by a spouse, abandoned by their family, even in pasung, and their property is confiscated. (Wardhani & Paramita, 2016). Relationship disorders can also trigger mental and psychological health (Zathrahadi et al., 2021). One of the most common causes is abandonment by the family. The role of the family is vital in maintaining the physical, spiritual, and psychological health of family members (Pantan & Benjamin, 2020). The way parents care for and guide is an external factor that shapes the mental health of family members (Onggo et al., 2019).

Not only mental hospitals, but the role of rehabilitation centers also takes part in efforts to recover people with mental disorders, such as the Gerasa rehabilitation center in Bitung city, North Sulawesi, which helps people with mental disorders from various areas around North Minahasa with various conditions. The owner of this rehabilitation center is a church pastor. Thus, the pursued therapy is supported by drugs and through various spiritual activities such as worship, prayer, Bible reading, and pastoral counseling. When the patient's spiritual needs are met, people with mental disorders will feel the effect of inner peace (Pakpahan, 2017). It is where the difference between this research and other studies lies. Given the need for spiritual nourishment for the patient's healing process, King and Bushwick found that many hospitals rarely discuss spiritual issues (King & Bushwick, 1994).

From the statement above, a study in 2019 by Henie Kurniawati found that hospitals in Central Java do not yet have spiritual guidance service facilities due to a shortage of clergy and lack of competence of nurses in providing spiritual care (Kurniawati, 2019). Spiritual intake is a fundamental need in the patient's recovery process. This principle is also the same as Yusuf, Hanik, Miranti, and Fanni argued that spiritual service can help individuals heal through spiritual fulfillment. Spiritual services help reduce stress and relaxation, which triggers the body's ability to heal naturally, improve and maintain mental health (Trisna, 2012; Yusuf et al., 2016). Kozier also agrees by stating that the spiritual need for people with mental disorders is fundamental because people with mental disorders have feelings of anxiety and unstable emotions, so they need encouragement to get better and get the strength to deal with emotional stress or other illnesses (Kozier et al. ., 2004).

The Gerasa Rehabilitation Center is the only rehabilitation center that organizes Christian spiritual-based recovery practices in Bitung City. The administrators who have a background as spiritual activists (Pastor and Pastor) in their respective local churches have

the competence to serve the spiritual needs of ODGJ patients. Church leaders do this as evidence of their responsibility to fulfill one's soul needs (Radjagukguk, 2019). The lack of professional staff and the high number of ODGJ in Indonesia have made the owner of a rehabilitation home in Bitung City reduce the number of ODGJ in Indonesia. Based on the love for ODGJ seen on the side of the road around the district. North Minahasa to Bitung city gave impetus to build a rehabilitation center for recovery for the neglected ODGJ. After construction and inauguration by the Ministry of Human Rights regarding the Establishment of Legal Entities of the Manado Waras Indonesia Foundation on October 20, 2016. Then received an Operational Permit from the Prov. North Sulawesi on July 03, 2019, and Bitung City Social Service on November 29, 2019. This orphanage received a positive response from Bitung City residents and brought their family members with mental disorders at no cost, only to help with the consumption of their family members.

This research is essential because of the low number of professionals and the lack of spiritual-based services in hospitals, health centers, and rehabilitation centers. Then what is of particular concern is that the Gerasa Rehabilitation Center is known not to have sufficient financial condition to invite professional personnel such as psychiatrists/psychologists regularly and does not have regular donors. Since it was built in 2016, this orphanage has only been able to invite one psychiatrist from RSJ Ratumbyang Manado, and even then, it is not routine every month. After the Covid-19 pandemic took place, treatment from doctors had to stop. However, even though the financial condition is not adequate, the lack of assistance from professionals can produce results. According to the admission from the rehabilitation center, some patients managed to recover and were sent home and even got jobs through therapy provided by the caretaker of the Gerasa rehabilitation center. Based on these results, it can be of particular concern for researchers to further examine how the model and impact of Christian spiritual therapy in dealing with ODGJ patients at the Gerasa rehabilitation center, Bitung, North Sulawesi.

## **METHOD**

This research uses the descriptive qualitative method. Qualitative research has the intention to understand the situation and conditions regarding the subject experienced by the research subject, such as actions/behaviors, motivations, and perceptions as a whole, by describing the data naturally, which is called the natural setting or actual conditions, according to the conditions when and where the research subject is. The resource persons/informants in this study were the owners of the Gerasa rehabilitation center, nurses, pastoral care team, and those who are members of the management of the rehabilitation center. At the same time, the research object is the Gerasa Rehabilitation Center, Bitung City, North Sulawesi. The data collection technique uses data triangulation, namely observation, interviews, and documentation (Raco, 2010). This data is further confirmed by the theory that has been compiled (Chandra, 2019). Then the data analysis technique is data reduction, data display, and data verification.

## RESULT AND DISCUSSION

### Christian spiritual healing model inpatient recovery efforts

#### *One year orientation period*

The researcher's information about the one-year orientation period aims at knowing the patient's condition at the beginning when the patient entered the rehabilitation center and knowing how to handle these patients appropriately. As stated by the Chairman of the Foundation, Mr. Melki Kairupan, they apply a one-year orientation period to determine the appropriate treatment for patients while monitoring their developmental condition. One year of orientation is the initial stage of rehabilitation for ODGJ patients. The rehabilitation period is helpful so that patients can improve themselves in a better direction (Andi Asadul, 2014). According to Zaenudin et al., social rehabilitation is a variety of physical actions and psychological adjustments that must be adjusted as widely as possible to provide physical, psychological, and social life skills to people according to their abilities (Ruswanto et al., 2015). In the process, guidance to patients is as follows: (i) maximizing the patient's ability to adapt; (ii) skills opportunities to enable them to work together to their fullest potential; (iii) make satisfactory adjustments in their personal and social environment so that they can become members of the community. Thus, the benefit of one year of patient orientation is to adapt to a new environment, which can improve the patient's psychological and physical condition to function normally again.

#### *Inspiring Worship*

Worship activities carried out by the orphanage's caretaker are not only one day on Sunday, but before eating, they must worship. So their authentic worship is three times a day. On Wednesday nights, there is a unique worship service for all administrators and patients (such as Sunday worship) and on Sundays for patients who are deemed able to participate by the orphanage management and even fast every Friday and participate in Spiritual Revival Services (KKR) or worship invitations from outside churches. As the head of the orphanage said, Mrs. Veibe Tuuk, the worship is held three times a day before eating, the feast of the orphanage on Wednesday night, Sunday worship for those who can worship, then KKR if there is an invitation. The purpose of holding these worship activities is to fulfill the patient's spirituality. The worship liturgy served also follows the patient's needs (Untung et al., 2021). Kozier agrees by suggesting that the spiritual need for people with mental disorders is fundamental. People with mental disorders have feelings of anxiety and unstable emotions, so they need encouragement to get better and get the strength to deal with emotional stress or other illnesses (Kozier et al., 2004). In line with this, Jung suggested that a person's emotions can be stable because of the help of religious influences (Koenig & Larson, 2001). Thus, the researcher concludes that spiritual activities through a series of worship activities can meet the spiritual needs of patients. These spiritual needs are essential so that patients recover faster. The first sign of their recovery is the calm and inner peace that other treatments cannot obtain.

#### *Pastoral Counseling for Patients*

The primary support in meeting the spiritual needs of patients is through pastoral counseling, not only from the worship described above. (Johni Hardori, 2014). Each nursing home administrator has their way of counseling patients personally and communally. Assistance in counseling is needed by individuals with mental disorders (Repi, 2019). The pastoral team, RT, stated that everyday counseling is held for each patient, either communally or personally. Asked how they are, their problems, and others about their lives.

Similar techniques were also used, namely (i) educational counseling. It is counseling whose connotation is teaching and educating the counselee's knowledge, behavior, and actions that were ineffective before (Kathryn et al., 2021); (ii) spiritual counseling. It is a type of counseling that dismantles the dark times of counselees related to sin and helps release the shackles of sin that lodged in their lives (Wiryoahadi et al., 2021); (iii) personal counseling. It is a type of counseling that is private one-on-one, open and free between both parties in the hope of having complete trust so that the counseling process can run smoothly (Apin Miltia Christi et al., 2019); (iv) group counseling. It is a counseling process obtained in a community, for example, in worship fellowships, group discussions, or interest groups in which there are many contributions of thought (Tu'u, 2007). Thus, the researcher concluded that the counseling held every day helped the patient get used to the conversation like ordinary people so that this habit would be patterned in the patient's thinking to communicate well. Administrators use all forms or techniques to dig up information; recognizing patients is an excellent effort to feel loved, cared for, not shunned or mistreated but treated like family. It is because patients do not obtain the feeling of love and kinship before they enter the orphanage.

#### ***Recreation, Community Service & Sports***

Learn to care about the cleanliness of the body and the surrounding environment. Although this Gerasa rehabilitation center prioritizes spiritual recovery, it does not rule out other supporting activities such as recreation to the beach, community service, gymnastics, and sports in the morning, stretching the body, and relaxing the mind (Sumual et al., 2019). As stated by the nurse, Chien Ayu, patients do activities such as morning exercises, cleaning their rooms, helping in the kitchen, and refreshing the beach before the pandemic. Thus the researcher concludes that these non-spiritual activities also teach them to care about themselves and others (Gultom, 2014).

#### ***Medical Treatment***

It is known that medical treatment is given to patients according to their needs. Assistance from experts such as general practitioners and psychiatrists does not routinely visit and provide care. The drugs given are not only nerve drugs and sleeping pills, but other general medicines are given if they start to have symptoms such as fever, skin disease, and others, as stated by Veibe Tuuk, when one of the priests once serving at this orphanage, the priest brought a doctor from the RSJ for three months. There was also doctor Syarif, a general practitioner who gave general medicines such as paracetamol and skin and nerve medicines such as trihexyphenidyl, haloperidol clorilex, and diazepam.

Spiritual and medical therapy cannot be separated. The two models of therapy cannot be separated. Because when the nerve drug is given to the patient, the nerves will begin to function normally again. When normality returns, patients can respond well when God's words are given and prayed for (Suratman, 2020). Researchers see that there is a correlation between spiritual and medical methods. The two methods complement each other and play their respective roles so that the two methods cannot be separated from one another. Seeing this relationship, experts such as Puchalski reveal that in the last few decades, many studies have raised spirituality as a variable to determine the benefits of spirituality for mental health; it is widely recognized that spirituality is starting to be considered as one of the essential elements in the world of health, unite and have a tremendous impact on patient recovery (Puchalski, 2010). Pergament agrees that increasing spiritual behavior will also increase a person's mental health because these two

things are closely related (Pargament, 2001). Seeing the close relationship between the two methods, observations from the caretaker of the orphanage, and the priests and families who came, it was possible to see firsthand that all patients experienced significant changes and recovery.

### **The impact of the Christian spiritual healing model on the patient's recovery Changes in behavior**

After the researchers visited the orphanage, there was a very significant change in the behavior of all patients in the orphanage based on observations and interviews that the researchers did; as stated by Veibe Tuuk, there was one patient who had a rude and fierce behavior, tended to do acts of violence against their parents (Sumarno, 2008). Then from the supervision as well as the pastoral team, Revol. Tuuk, also said that the patients who were brought to the orphanage after approximately 1-2 months were able to bathe themselves, defecation and urination were no longer arbitrary; in fact, they began to feel embarrassed if they were seen while doing bathing because at first, they did not can clean themselves properly.

Based on these data sources, it can be seen that the behavior changes of each patient began to improve. It is the same as the purpose of the Mental Health Law no. 18 of 2004 article 1 states that a healthy soul is where a person's condition can be productive again and can contribute to the surrounding environment (Ministry of Health, 2014). Researchers believe that the care provided by the caretaker of the nursing home is by the provisions of the law and expectations for patients and their families, where one of the main focuses towards the patient's recovery begins with changes in the patient's behavior.

### **Speech Change**

Veibe Tuuk, patients have frequent fluctuating emotions, so they often say swear words, shout, and even swear words too often every day. The use of few sentences from the patient made the people around feel uncomfortable, and the administrator took several precautionary steps. The following change experienced by the patient is a change in speech.

Based on these data, it can be judged that acts of violence begin when emotions are not controlled. When a person's emotions become out of control, obscene words, harsh or evil, are straightforward to say (Muryati et al., 2020). This kind of behavior, when viewed from a medical review, has emotional or feeling disorders (Pakpahan et al., 2021). (Yosep & Titin, 2014) suggested that Emotional Disorders are disorders caused by feelings of pleasure joy in excess. Feel like a rich person, influential person, an official, wealthy businessman, Etc. Researchers realize that emotions significantly influence changes in a person's good and bad behavior. As experienced by the patients described by Veibe, on average, they show their inability to manage their feelings so that they quickly say inappropriate words and harm those around them. The treatment, such as threatening to rub chilies in the mouth, was felt to be just a small method that turned out to be quite effective in deterring one of the patients who often uttered swear words. However, more than that, coaching them is the main thing. Give good advice directions to stop saying inappropriate words like that.

### **Change of mindset**

The emergence of awareness in the patient to distinguish between good and bad shows a change in thinking patterns. Veibe Tuuk said that patients ate leftover food and drinks on

the streets or the ground. Then Revol and Melki stated that they understood how to bathe properly, defecate and urinate properly. Then, the pastoral team, Kaunang, that a patient was crying while eating; after being asked, it turned out that the patient never prayed before eating, then after further investigation, the patient's religious background was non-Christian, and he claimed to feel peaceful and inner peace. Researchers see that efforts to change the patients' mindset are pretty successful. All forms of routine activities that they carry out give birth to new habits, positive habits that have been patterned in their subconscious so that a willingness to change emerges. As Pergament puts it, they have "self-directing." A belief in which God equips each individual with the skills and resources needed to overcome their problems. This meaning is more internal because it is centered on one's ability to overcome every problem. (Rammohan et al., 2002)

Experts suggest how to reconstruct a mindset like Ellis through Cognitive Behavioral Therapy (CBT) approach, which is an approach that tends to integrate two aspects, namely cognitive and behavioral, in one complete understanding through counseling designed to solve problems by performing cognitive restructuring and deviant behavior. The purpose of this CBT technique is to restructure distorted cognitive and belief systems to bring about emotional and behavioral changes for the better (Beck, 2011).

Furthermore, the treatment carried out by the administrators is to reconstruct their mindset through counseling either personally or communally which is held every day.

Based on the theory that the treatment carried out by the caretakers of the rehabilitation center seeks to reveal the past through counseling, then give direction and guidance and advice slowly according to the ability of the patient's thinking power. Then with the existence of self-directing or the ability to direct oneself, it is seen that the signs of the patient's recovery are getting better. Of course, in constructing the patient's mindset, not only through counseling but through prayer and preaching the Word of God and medical treatment to improve their nervous system so that all advice and directions can be received optimally.

### ***Self-discovery***

When the patient's mindset begins to change through the treatment provided by the rehabilitation center through medical and spiritual therapy, the patient will find his identity, his calling/purpose in life before God (Apin Militia Christi, 2012). As stated by Revol Tuuk, some patients are starting to read the Bible diligently, and there is a willingness to go to Bible school. Every human being is created from the beginning in the image and likeness of Christ. It is the fundamental human identity (Sugiono & Hardori, 2020). When the patient interprets his true identity before God, his self-concept will awaken. Staines also stated that there are three aspects of self-concept, namely: (i) essential self-concept. This aspect is an individual's view of his status, role, and abilities; (ii) social self. This aspect is the self as believed by the individual and others who see and evaluate; (iii) ideal self. This aspect describes personality expected by an individual, partly in the form of a desire and partly in the form of a necessity (Fitriyani, 2019).

When viewed from the patient's condition, according to the admission from the administrator, there was one patient who had received treatment and began to show signs of recovery, which was realized through his behavior in life, he realized that the love of God that he felt during his recovery at the orphanage made him high-achieving for school. Bible when he was declared completely healed. Thus, the researcher concluded that self-concept has the highest role in determining the next steps after the patient is declared cured because when the self-concept is found, the desire to live life will be higher and

trigger the patient to be able to live a better life after completing the recovery process at the orphanage.

### ***Potential development***

Awareness that occurs after finding one's identity develops potential in terms of emotional, social behavior, and other soft skills. As a developmental psychologist, Hurlock argues that development means a series of progressive changes that occur as a result of the process of maturity and experience (Hurlock, 1980). Thus the development in terms of emotional, social behavior, and soft skills of the patient began to be seen. The emotional development of patients can be seen from their nature which begins to obey the words and directions of the administrators. Then the administrators began to teach in spiritual matters such as being a worship leader and praying during their worship services ; as stated by Veibe Tuuk, the patients here are also taught how to pray correctly, bravely, and willing to appear worship leaders at the services held.

This potential is carried out in stages through guidance and practice taught by the administrators because what the administrators do reflects the patients. Langer also put forward the mechanistic mirror theory of the branch of the developmental theory, which states that humans grow into something like what their environment made them. Then Lemner, in the phasing theory, suggests that development occurs based on stages, from one to another in stages (Gunarsa, 2014). The development of the patient into a complete person (emotional and social behavior) cannot be separated from the influence of the rehabilitation center administrators.

### ***Healed and has been discharged***

Recovering or being physically and psychologically healthy is the greatest longing and goal of the orphanage for all patients whom the orphanage has treated. The application of the method has shown success. It is shown through the data of patients who have experienced physical and psychological healing. In fact, according to sources, some of the patients have already found jobs. However, some patients were sent home because of the family's request because it was seen that they could be treated independently at home. According to previous researchers, spiritual recovery methods make the condition of ODGJ patients more stable and gradually recover (Harold G. Koenig & David B. Larson, 2001). Spiritual service is one of the activities that can help individuals heal through spiritual fulfillment. Spiritual services help reduce stress and relaxation, which triggers the body's ability to heal naturally improve and maintain mental health (Yusuf et al., 2016). However, of course, it is not concluded only because of spiritual influence in the patient's recovery, but there is a share of medicine from nurses and doctors who come to visit. The two components can be said to complement each other to maximize the ODGJ patient's recovery.

According to the above information, factual data on how many patients have been treated after the researcher checked directly the contents of the notebook noted that 63 patients had been recorded as patients and received treatment at the orphanage, then 37 patients recovered and were allowed to return to their respective families. -each. Then four patients died. Meanwhile, currently, there are 16 patients in the nursing home. So, six patients are still without information.

According to the researcher, it is better to do bookkeeping immediately because the patient's data that comes in and out is accurate and can be objective evidence that the patients treated here even though with a simple method (without the intervention of routine experts such as psychiatrists or psychologists) but promote spiritual methods. The purpose

of the bookkeeping can be considered, not just indirect evidence, but directly through the data if in the future there are patients who are brought by the family or Satpol PP officers. Because, judging from the evidence, more than half of the total number of patients recovered. So it can be acknowledged that the method used by this rehabilitation center can be said to be an effective method.

## CONCLUSION

Based on all the researchers' findings when they were in the field and compared with various theories, there was no gap but a positive correlation between the two. However, the gap found is the lack of professional personnel and a forum for ODGJ recovery compared to ODGJ in North Minahasa district, Bitung city. Then, the answer was already answered, referring to the research objective, namely, an in-depth study of the model and impact of Christian spiritual therapy in dealing with ODGJ at the Gerasa Rehabilitation Institution. After the researchers went directly into the field and witnessed it for themselves, many patients who recovered and returned home had even found work again. If viewed from the theory, some argue that the spiritual method only achieves the effect of inner peace and higher life satisfaction, but this orphanage is different because even though the treatment is not fully based on professional personnel, it can produce excellent results.

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