

HUBUNGAN DUKUNGAN PSIKOSOSIAL DENGAN STRES PADA KELUARGA PASIEN GANGGUAN JIWA DI RUMAH SAKIT JIWA TAMPAN PROVINSI RIAU

THE RELATIONSHIP BETWEEN PSYCHOSOCIAL SUPPORT AND STRESS AMONG FAMILIES OF PATIENTS WITH MENTAL DISORDERS AT TAMPAN MENTAL HOSPITAL, RIAU PROVINCE

Wahyu¹, Fitra Mayenti² dan Arya Ramadia³

¹²³ Institut Kesehatan Dan Teknologi Al Insyirah, Program Studi S-1 Keperawatan

Email: wahyurst@gmail.com; fitramayenti19@gmail.com; aryaramadia@gmail.com

Corresponding author*: wahyurst@gmail.com

ABSTRAK

Data Rumah Sakit Jiwa Tamparan Provinsi Riau tahun 2025 terdapat 4631 penderita gangguan jiwa yang dirawat. Keluarga yang merawat pasien gangguan jiwa rentan mengalami stres, yang dapat mempengaruhi kesejahteraan emosional mereka. Hasil survei peneliti di Rumah Sakit Jiwa Tamparan Provinsi Riau terhadap 5 keluarga pasien diketahui keluarga mengalami kelelahan fisik dan psikologis serta kurangnya dukungan keluarga dan lingkungan. Penelitian bertujuan untuk mengetahui hubungan dukungan psikososial dengan stres pada keluarga pasien gangguan jiwa di Rumah Sakit Jiwa Tamparan Provinsi Riau. Jenis penelitian kuantitatif dengan pendekatan cross sectional. Populasi 389 orang keluarga yang merawat pasien gangguan jiwa di Rumah Sakit Jiwa Tamparan Provinsi Riau, sampel 198 responden diambil menggunakan accidental sampling. Data dianalisis menggunakan uji Korelasi Spearman Rank. Hasil penelitian, mayoritas responden tidak mendapatkan dukungan psikososial sebanyak 54% dan mengalami stres sedang sebanyak 53%. Hasil uji Korelasi Spearman Rank ada hubungan antara dukungan psikososial dengan stres pada keluarga pasien gangguan jiwa di Rumah Sakit Jiwa Tamparan Provinsi Riau ($p < 0,001$, $r = -0,343$). Disarankan kepada Rumah Sakit Jiwa Tamparan Provinsi Riau untuk memberikan pelatihan dukungan psikososial kepada perawat dan mengembangkan program dukungan psikososial yang disesuaikan dengan kebutuhan keluarga dan pasien gangguan jiwa. Dukungan ini penting dalam membantu keluarga menghadapi beban emosional, fisik, sosial, dan finansial selama proses perawatan pasien.

Kata Kunci: Dukungan Psikososial; Keluarga; Pasien Gangguan Jiwa; Stres

ABSTRACT

Data from the Tamparan Mental Hospital, Riau Province, in 2025, there were 4631 people with mental disorders being treated. Families caring for patients with mental disorders are vulnerable to stress, which can affect their emotional well-being. The results of a survey by researchers at the Tamparan Mental Hospital in Riau Province of 5 patient families revealed that the families experienced physical and psychological fatigue as well as a lack of family and environmental support. The study aimed to determine the relationship between psychosocial support and stress among families of patients with mental disorders at Tamparan Mental Hospital in Riau Province. It employed a quantitative research approach with a cross-sectional design. The population comprised 389 family members caring for patients with mental disorders at Tamparan Mental Hospital in Riau Province, with a sample of 198 respondents selected using accidental sampling. Data were analyzed using Spearman Rank Correlation test. The results showed that the majority of respondents, 54%, did not receive psychosocial support and 53% experienced moderate stress. The Spearman Rank correlation test showed a significant relationship between psychosocial support and stress among families of patients with mental disorders at Tamparan Mental Hospital, Riau Province ($p < 0.001$; $r = -0.343$). It is recommended that Tamparan Mental Hospital in Riau Province provide training in psychosocial support for nurses and develop psychosocial support programs tailored to the needs of families and patients with mental disorders.

Keywords: Family; Mental Disorders; Psychosocial Support; Stress

INTRODUCTION

Mental disorders are health conditions characterized by significant disturbances in an individual's cognition, emotional regulation, or behavior, which may affect the ability to carry out daily activities,

build interpersonal relationships, work, and participate in social life. Mental disorders encompass a broad spectrum of conditions, including anxiety disorders, depression, bipolar disorder, schizophrenia, and other mental disorders that may cause disability if not adequately treated. Mental disorders have become an increasingly important issue in health systems because they can occur throughout the life course. A cross-national analysis of 156,331 respondents from 29 countries showed that various mental disorders can emerge at a young age and that their cumulative risk increases throughout life, making prevention, early detection, treatment, and ongoing support important components of mental health services (McGrath et al., 2023).

Globally, mental disorders remain a major public health concern, contributing substantially to the overall burden of disease. The latest analysis from the Global Burden of Disease Study 2023 demonstrates that mental disorders continue to account for a substantial proportion of disease prevalence and health loss worldwide. This analysis covered 12 groups of mental disorders across 204 countries and territories, highlighting the need to address the burden of mental disorders as a global health issue requiring responses across all levels of healthcare services (Santomauro et al., 2026). This burden is not limited to the symptoms experienced by patients but also affects social functioning, productivity, long-term healthcare needs, and family involvement in care.

In Indonesia, mental healthcare faces specific challenges because families continue to play a central role in supporting and caring for people with mental disorders (PMD). Families not only assist with daily needs but are also involved in medication monitoring, identifying signs of relapse, facilitating access to healthcare facilities, and meeting patients' social needs. Research in Indonesia indicates that community-based mental health services should consider caregivers' experiences and needs, as families are both service users and important partners in ensuring continuity of mental healthcare. The perspectives of caregivers and healthcare professionals highlight the importance of integrated, accessible mental health services that respond to the needs of patients and their families (Kusumawaty et al., 2023).

This situation is also relevant to mental health services in Riau Province. According to data from the Riau Provincial Health Office in 2024, the target population of people with severe mental disorders in Riau Province was 9,533, of whom 5,773 (60.6%) received healthcare services. Coverage of mental health services for people with severe mental disorders remained below 50% in several areas, including Pekanbaru City, where coverage reached 36.7%. These figures indicate a gap between the number of people targeted for services and actual healthcare coverage. This gap is important because continuity of mental healthcare requires not only the involvement of healthcare professionals but also family participation as the primary caregivers of patients at home and in the community.

The role of families as caregivers can have various psychological, social, physical, and economic consequences. Families must cope with changes in patients' behaviour, uncertainty about the course of illness, the risk of relapse, long-term treatment needs, limitations in social activities, and stigma from the surrounding community. A study by Bahari et al. (2024) involving family caregivers of people with severe mental disorders in Indonesia found that caregivers faced complex challenges, including difficulties in providing care, stigma, insufficient support from the community and healthcare professionals, negative emotional experiences, and the need to develop coping strategies to fulfil their caregiving responsibilities. These findings indicate that families should not be regarded solely as sources of support for patients; they also constitute a group requiring specific health attention and support (Bahari et al., 2024).

Stigma is one factor that can intensify families' experiences of caring for patients with mental disorders. Stigma directed towards people with mental disorders may extend to their family members, causing them to feel ashamed, withdraw from social interactions, or hesitate to discuss the patient's condition with others. Research involving caregivers in Indonesia has also described how caring for a family member with a mental disorder may be associated with stigma and complex family burdens (Kusumawaty et al., 2023). More recent findings in Indonesia indicate an association between family stigma and caregiver burden in caring for patients with mental disorders, suggesting that stigma should be addressed in efforts to improve the well-being of patients' families (Yanti et al., 2025).

Ongoing caregiving demands may increase caregiver stress. Families may experience physical exhaustion due to caregiving responsibilities, anxiety about possible patient relapse, conflicts over the distribution of family responsibilities, financial difficulties, and reduced opportunities to work, rest, and participate in social activities. Research on the experiences of caregivers of patients with schizophrenia has shown that caregivers face psychological and social challenges associated with stigma, limited information, and suboptimal coping strategies (Soni et al., 2024). Research in Indonesia has also demonstrated that the burden experienced by caregivers of patients with schizophrenia is influenced by caregiver-related, patient-related, environmental, and family-functioning factors. Thus, caregiver burden is a multidimensional phenomenon that cannot be understood solely in terms of the patient's clinical condition (Sustrami et al., 2024).

In dealing with these various pressures, psychosocial support represents an important resource for families of patients with mental disorders. Psychosocial support may include emotional support, such as empathy and attention; instrumental support, such as practical assistance with caregiving and daily needs; informational support, such as knowledge and advice about the patient's condition; and appraisal support, which helps caregivers feel valued and capable of fulfilling their roles. A mixed-methods study by Amini et al. (2023) showed that family members of patients with mental disorders require physical, psychological, and social support because caregiving responsibilities can create mental and emotional strain. Therefore, perceived social support is an important component in helping caregivers manage the demands of caring for patients with mental disorders (Amini et al., 2023).

Social and psychosocial support may also serve as resources that help families manage the burden of caregiving. A study by Wang et al. (2025) involving families of patients with severe mental disorders found that caregiver social support plays an important role in the relationship between patients' conditions and the burden experienced by their families (Wang et al., 2025). These findings reinforce the understanding that the well-being of patients and their families is interconnected, and that social support is a mechanism that should be considered in family-based mental healthcare. Another study involving caregivers of patients with mental disorders also demonstrated associations among caregiving burden, social support, and family well-being, indicating that caregivers' psychosocial needs should be incorporated into comprehensive mental health services (Ratre et al., 2025).

The importance of supporting families is further reinforced by evidence concerning the effectiveness of family interventions. A systematic review and meta-analysis by Kim dan Park (2023) which included 37 randomized controlled trials, found that family interventions for patients with schizophrenia provided benefits across various patient and family outcomes, with notable improvements in caregiver mental health, treatment satisfaction, and patient adherence (Kim & Park, 2023). These findings indicate that families are not merely companions to patients but are essential components of the care system who require structured education and interventions. A more recent Cochrane review also evaluated family-based interventions compared with standard care for schizophrenia, further highlighting the importance of family-oriented approaches in mental healthcare systems (Chien et al., 2024).

Psychosocial interventions for caregivers have also continued to develop. A systematic review by Kaewwanna et al (2023) reported that internet-based psychosocial interventions have been used to address caregiving burden, psychological distress, expressed emotion, and knowledge about psychosis among caregivers of patients with schizophrenia, although heterogeneity across studies has resulted in inconsistent effectiveness for some outcomes. Furthermore, a recent systematic review by Zou et al (2026) of randomized controlled trials emphasized the importance of psychosocial interventions for family caregivers of patients with schizophrenia. These findings indicate that strengthening family capabilities through education, emotional support, improved coping skills, and access to social resources is an important direction for developing family-based mental health services.

In the context of this study, Tampan Mental Hospital, Riau Province, treated 4,631 male and female patients with mental disorders in 2025. Hospital data also showed a change in the number of outpatient visits, from 10,049 visits in 2024 to 7,790 visits in 2025. This situation highlights the importance of considering not only patient care but also the experiences of family members who accompany patients

throughout the treatment process. Families interact directly with patients in their daily lives and often serve as a link between patients and healthcare facilities.

A preliminary survey conducted by the researcher on January 5, 2025, among five family members visiting Tampan Mental Hospital, Riau Province, found that families experienced fatigue while caring for relatives with mental disorders. Some family members reported feeling ashamed of their social environment and choosing to withdraw from social interactions. Families also faced financial difficulties, particularly transportation costs for those travelling from outside the region, as well as anxiety and fear when patients experienced relapse or displayed aggressive behaviour. These preliminary findings indicate emotional, social, physical, and economic burdens that may be associated with family stress levels.

Although various studies have demonstrated the importance of psychosocial support for caregivers of patients with mental disorders, empirical evidence indicates that caregivers' experiences are strongly influenced by family context, the social environment, patient characteristics, access to healthcare services, and available resources. Studies in Indonesia have shown that caregivers face complex experiences in providing care for patients with mental disorders (Gunawan et al., 2024), while other research has found that families of people with severe mental disorders continue to experience stigma, insufficient support, and various negative emotions while fulfilling their caregiving roles (Bahari et al., 2024). However, research specifically examining the relationship between psychosocial support and stress levels among family caregivers of patients with mental disorders at Tampan Mental Hospital, Riau Province, remains limited. Differences in patient and family characteristics, sociocultural environments, access to healthcare services, and available sources of support may result in caregiving experiences that differ from those reported in other regions. Therefore, this study aimed to determine the relationship between psychosocial support and stress among family caregivers of patients with mental disorders at Tampan Mental Hospital, Riau Province.

METHODE

This study used a quantitative analytical design with a cross-sectional approach. The study was conducted at the Outpatient Clinic of Tampan Mental Hospital, Riau Province. The study population consisted of 389 family members caring for patients with mental disorders, and the sample comprised 198 respondents selected using accidental sampling. The statistical test used was the Spearman Rank correlation test. The DASS-42 instrument was used to measure stress levels; however, the name or version of the psychosocial support instrument was not specified. The data collection procedures and ethical clearance number were also not reported in the source article and therefore have not been added.

RESULT

The research results are presented in the form of frequency distributions and bivariate analysis.

Psychosocial Support

Table 1. Frequency distribution of psychosocial support among family members of patients with mental disorders at Tampan Mental Hospital, Riau Province

Psychosocial Support	f	%
Not Supported	107	54
Supported	91	46
Total	198	100

Source: Research Data, 2025

The majority of respondents (54%) reported not receiving psychosocial support.

Stress Level

Table 2. Frequency distribution of stress levels among family members of patients with mental disorders at Tampan Mental Hospital, Riau Province

Stress Level	f	%
Severe	-	-
Moderate	105	53
Mild	93	47
Normal	-	-
Total	198	100

Source: Research Data, 2025

The majority of respondents experienced moderate stress while caring for patients with mental disorders, accounting for 53%.

Bivariate Analysis

Table 3. Relationship between psychosocial support and stress among family members of patients with mental disorders at Tampan Mental Hospital, Riau Province

			Psikososial	Total stress
Spearman's rho	Psikososial	Correlation Coefficient	1.000	-.343**
Spearman's rho	Psikososial	Sig. (2-tailed)	.	.000
Spearman's rho	Psikososial	N	198	198
Spearman's rho	Totalstres	Correlation Coefficient	-.343**	1.000
Spearman's rho	Totalstres	Sig. (2-tailed)	.000	.
Spearman's rho	Totalstres	N	198	198

Source: Research Data, 2025

The table above shows a p-value of 0.000, meaning $p < 0.005$; therefore, it can be concluded that psychosocial support is associated with stress among family members of patients with mental disorders at Tampan Mental Hospital, Riau Province. The r value of -0.343 indicates a moderate, negative relationship, meaning that when families receive psychosocial support, their stress tends to decrease.

DISCUSSION

Psychosocial Support

Based on the research findings, the majority of respondents (54%) reported that they did not receive psychosocial support, while 46% reported receiving psychosocial support. This finding indicates that most family members of patients with mental disorders who participated in this study continued to experience limited support in fulfilling their roles as caregivers. Analysis of the questionnaire responses showed that these limitations were particularly evident in the aspects of emotional support, social recognition, and instrumental support. Most respondents reported that they did not feel sufficiently appreciated by their surrounding community for their role in caring for family members with mental disorders. In addition, respondents stated that, while caring for patients with mental disorders, they sometimes felt neglected or emotionally misunderstood by those closest to them. This situation was further compounded by limited instrumental support, including financial assistance, caregiving assistance, and practical help from other family members and friends. Thus, the findings indicate that challenges related to psychosocial support involve not only emotional support but also social support and practical assistance needed by families in fulfilling their caregiving responsibilities.

This finding is consistent with the study by Amini et al (2023) which showed that families of patients with mental disorders require support in several areas, including emotional support, informational support, tangible support, positive social interaction, and acceptance from family members, relatives, friends, and the community. The study indicated that perceived social support

among families was not yet optimal and that their support needs were not limited to emotional assistance but also involved the need to be understood and accepted by their social environment. This is relevant to the present study, particularly the finding that respondents felt insufficiently appreciated and understood by those around them while caring for family members with mental disorders. Limited psychosocial support should also be understood in the context of the burden associated with the family caregiver role (Amini et al., 2023). A study by Zhang et al. (2024) involving 1,108 family caregivers of patients with severe mental disorders found an association between family illness burden and social support. The study emphasized that caregivers' lives may change as a result of caregiving responsibilities and that social support is one of the factors associated with family burden (Zhang et al., 2024). Therefore, the proportion of respondents who did not receive psychosocial support in the present study may reflect unmet support needs within both the family and social environments.

The findings of this study can also be explained by the support needs of family caregivers. Amini et al. (2023) found that families of patients with mental disorders require family, social, and emotional support. Such support is necessary because families not only face caregiving responsibilities but must also cope with changes in daily life, stigma, social limitations, and various pressures that arise throughout the caregiving process (Amini et al., 2023). Therefore, when adequate support from family members, friends, and the social environment is unavailable, families may experience difficulties in fulfilling their caregiving roles and managing ongoing stressors. Research conducted in Indonesia has also shown that family caregivers of patients with severe mental disorders experience various forms of burden in providing care. Through a phenomenological study of family caregivers of patients with severe mental disorders in Indonesia. Bahari et al. (2024), A phenomenological study of family caregivers of patients with severe mental disorders in Indonesia reported that families experienced complex caregiving burdens (Amini et al., 2023). These findings reinforce the importance of an approach that focuses not only on patients but also considers families' needs as an integral part of the care system. In the context of this study, limited psychosocial support can be viewed as an aspect that requires attention in the provision of family-oriented mental health nursing care.

Psychosocial support is also relevant to efforts to reduce family burden. Wang et al (2025) demonstrated that caregiver social support plays a role in the relationship between patients' quality of life and the illness burden experienced by their families. The study highlights the importance of considering caregivers' social circumstances when understanding the burden experienced by families of patients with severe mental disorders (Wang et al., 2025). This suggests that social support should not be viewed merely as an additional component of mental healthcare services but as an integral consideration in meeting families' needs throughout the caregiving process. Furthermore, evidence on psychosocial interventions indicates that caregiver support can be provided through structured approaches. In a systematic review and meta-analysis. Sampogna et al (2023) examined various psychosocial interventions designed to help caregivers of people with severe mental disorders and substance use disorders cope with caregiving demands (Sampogna et al., 2023). In addition, a clinical trial conducted in 2024 indicated that brief family psychoeducation delivered by psychiatric nurses may be one approach to reducing the caregiving burden among family caregivers of patients with schizophrenia. These findings suggest that nurses have an important role in providing education, emotional support, information about patients' conditions, and connections to available support resources.

Based on the research findings, the low level of psychosocial support among 54% of respondents indicates the need to strengthen family-oriented nursing approaches. The support provided should include emotional support through therapeutic communication and opportunities for families to express their feelings, informational support through education about the illness and patient care, and instrumental support in the form of practical assistance and access to available resources. Research on

psychosocial programs indicates that structured interventions can be part of a strategy to help caregivers cope with caregiving demands.

Family Stress

Based on the research findings, the majority of respondents experienced moderate stress while caring for patients with mental disorders, accounting for 53% (105 respondents), while 47% experienced mild stress. Measurements using the DASS-42 showed that the respondents' mean stress score was 19.35, which falls into the moderate stress category. The manifestations identified included difficulty sleeping at night, muscle tension, particularly around the neck, difficulty resting, and a tendency to feel sad easily. These findings indicate that caring for a family member with a mental disorder involves not only physical responsibilities but may also result in recurring psychological stress. This condition is consistent with the study by Kalhovde dan Kitzmüller (2023/2024) which described how families caring for individuals with severe mental disorders may experience emotional distress throughout an uncertain caregiving journey, particularly when facing changes in patients' conditions, worry, fear, and unpredictable patient behaviour (Kalhovde & Kitzmüller, 2024).

The proportion of respondents experiencing moderate stress in this study also indicates that the psychological burden experienced by families is an issue that requires attention in mental health services. Previous studies cited for comparison in this manuscript showed that 79% of families caring for people with mental disorders in Banjarnegara Regency experienced moderate stress, while Kirana et al. (2023) found that 60.3% of families experienced moderate stress. These findings indicate a relatively consistent pattern in which families undertaking caregiver roles may experience moderate levels of stress. However, differences in percentages across studies may be influenced by patient characteristics, the caregiver's relationship with the patient, duration of caregiving, caregiving intensity, social support, economic conditions, and residential environment (Kalhovde & Kitzmüller, 2024). Therefore, family stress levels should be understood in the context of family characteristics and patient conditions, rather than solely on the basis of the percentages in each stress category. Stress among family caregivers can also be understood through the concept of caregiver burden, which refers to the burden arising from caregiving demands and their physical, psychological, social, and economic consequences. The systematic review by Sustrami et al (2023) showed that families caring for individuals with schizophrenia experience various forms of burden, including emotional and financial problems. Factors associated with this burden include caregiver characteristics, time spent caring for patients, knowledge of mental disorders, the severity of patients' disorders, stigma, social support, and professional support from healthcare workers (Sustrami et al., 2023). These findings reinforce the results of the present study, indicating that family stress does not occur in isolation but may arise from the interaction of various demands experienced by caregivers throughout the caregiving process.

More recent research has also shown that caregiver burden is associated with economic conditions and family functioning. Deng et al. (2026), in a study involving 400 family caregivers of patients with mental disorders, found that 57.25% of caregivers experienced caregiving burden. Caregivers experiencing burden had greater financial strain, disruptions in family activities and leisure, strained family relationships, and poorer physical and mental health conditions within the family. Longer caregiving duration and a lack of additional caregivers were also associated with caregiving burden, whereas the presence of other caregivers could serve as a protective factor (Deng et al., 2026). These findings are relevant to the respondents in the present study because the responsibility of caring for patients with mental disorders may require families to divide their time, energy, attention, and financial resources to meet patients' needs. In addition to caregiving burden, uncertainty and changes in patient behaviour may become important sources of stress. Kalhovde and Kitzmüller found that family caregivers experienced an emotional journey characterised by intense worry, uncertainty, fear, sadness, and regret. This distress may vary according to the caregiver's relationship with the patient, living

conditions, illness trajectory, and the presence of violent or suicidal behaviour in patients. This may explain the complaints reported by respondents in the present study, such as difficulty sleeping, muscle tension, difficulty resting, and a tendency to feel sad easily. These symptoms indicate that caregiver stress may manifest in both psychological and physical aspects.

Social stigma is also an important factor that requires attention. The study by Soni et al. (2024) on the experiences of family caregivers of patients with schizophrenia showed that families faced various psychological and social challenges related to stigma, limited information, and less adaptive coping strategies (Soni et al., 2024). The study by Li et al. (2024) also found an association between affiliate stigma among family members of people with schizophrenia and family burden (Li et al., 2024). Thus, stigma affects not only patients but may also influence families' experiences in fulfilling their caregiving roles. When families feel ashamed, fear negative judgement, or withdraw from their social environment, their opportunities to obtain emotional and instrumental support may become more limited. The findings of this study should also be considered in relation to social and psychosocial support. Families who receive support from other family members, friends, communities, and healthcare professionals may have greater resources to cope with caregiving demands. Zhang et al. (2024) showed that family burden among caregivers of patients with severe mental disorders is associated with family living conditions and the social support received (Zhang et al., 2024). Furthermore, a controlled trial by (Zhang et al., 2024). Furthermore, a controlled trial by Yasuma et al. (2024) showed that brief family psychoeducation delivered by psychiatric nurses can be used as an approach to address caregiver burden among family caregivers of patients with schizophrenia (Yasuma et al., 2024). This suggests that nursing interventions should not be directed solely at patients but should also consider family needs as part of the care system.

Relationship Between Psychosocial Support and Stress Among Families of Patients with Mental Disorders at Tampan Mental Hospital, Riau Province

Based on the results of the Spearman's Rank correlation test, a significant association was found between psychosocial support and stress levels among family members of patients with mental disorders at Tampan Mental Hospital, Riau Province ($p < 0.001$; $r = -0.343$). The correlation coefficient indicates a moderate negative association. Thus, higher levels of psychosocial support received by family members tend to be associated with lower stress levels. Conversely, limited psychosocial support tends to be associated with higher stress levels. These findings indicate that psychosocial support is an important aspect to consider in understanding the psychological well-being of family members who serve as caregivers for patients with mental disorders. However, because this study employed a *cross-sectional* design, this relationship should be interpreted as an association and cannot be considered a causal relationship.

The findings of this study are consistent with those of et al. (2023) who specifically examined the relationship between psychosocial support and stress among family members of people with mental disorders. Their study employed a *cross-sectional* design and Spearman's rho analysis, revealing an association between psychosocial support and stress among family members caring for people with mental disorders (Kirana et al., 2023). These findings reinforce the results of the present study, indicating that psychosocial support is associated with the stress experienced by family members in fulfilling their caregiving roles. These findings are also supported by Amini et al. (2023) who conducted a study involving 200 family members of patients with chronic mental disorders. Their study showed that perceived social support among family members was at a moderate level, with support needs identified in the areas of emotional support, informational support, tangible assistance, and positive social interaction. The researchers emphasized that family members of patients with mental disorders have varying support needs and require support from family members, relatives, friends, and the broader social environment. This is relevant to the present study because limited psychosocial support may make

it more difficult for family members to cope with the demands of patient care and the various stressors associated with it (Amini et al., 2023).

More broadly, Lohrasbi et al. (2023) explained that family caregivers of patients with chronic mental disorders face various psychosocial challenges that may affect their mental health. Long-term caregiving burdens may be accompanied by emotional exhaustion, limited social support, stigma, and difficulties in carrying out daily life activities. Therefore, efforts to strengthen the psychosocial well-being of families should focus not only on their ability to care for patients but also on addressing the psychological and social needs of caregivers. This perspective supports the findings of the present study, indicating that family members who receive better psychosocial support tend to experience lower levels of stress (Lohrasbi et al., 2023).

The relationship between social support and family burden was also demonstrated in a study by Zhang et al. (2024) involving caregivers of patients with severe mental disorders. The study showed that caregivers experience life changes and psychological pressures that may increase family burden, while social support is associated with the burden experienced by caregivers. These findings provide a basis for understanding that social support is not only related to emotional aspects but also serves as a resource that helps families cope with caregiving demands. In the context of the study conducted at Tampan Mental Hospital, Riau Province, such support may take the form of emotional assistance from family members, practical help in caring for patients, information regarding mental health conditions and their management, as well as acceptance from the social environment (Zhang et al., 2024).

More recent findings were also reported by Huang et al. (2025) in a study involving 1,169 family caregivers of patients with mental disorders in China. The study found that caregiving tasks were associated with caregiver burden, while social support served as a factor that could reduce the impact of caregiving tasks on personal strain. These findings indicate that the burden arising from caregiving is influenced not only by the number of caregiving tasks but also by the social resources available to caregivers. The researchers recommended strengthening psychoeducation and social support for families of patients with mental disorders (Huang et al., 2025). A study conducted by Syarif et al. (2025) in Indonesia also provides empirical support for the findings of the present study. The study involved caregivers of patients with schizophrenia and demonstrated that caregiver stress was associated with various psychosocial conditions, including social support. Social support was considered a resource that helps caregivers cope with caregiving-related stress and improve their well-being. This study context is relevant to the findings at Tampan Mental Hospital, as both studies were conducted within the Indonesian healthcare setting and involved family caregivers of patients with mental disorders (Syarif et al., 2025).

Psychosocial support for family members can be understood through several forms. Emotional support provides a sense of acceptance, understanding, and reassurance that they are not facing challenges alone. Instrumental support may include assistance with caregiving activities, patient accompaniment, and financial assistance. Informational support helps families understand the illness, treatment, signs of relapse, and ways to manage changes in patients' behavior. Meanwhile, appraisal or esteem support helps families gain encouragement and confidence in their ability to fulfill their caregiving roles. Amini et al. (2023) demonstrated that the support needs of families of patients with mental disorders include informational support, nonjudgmental interactions, social acceptance, and support from family members and the community (Amini et al., 2023).

The findings of this study also have implications for mental health nursing services. Family members should not only be positioned as patient companions but also recognized as individuals with their own psychosocial health needs. Nurses can identify family members who show signs of stress, provide education regarding patient care, facilitate family communication, and connect families with available support resources. Recent studies have shown that the needs of families caring for people with

mental disorders include information, emotional support, family involvement, and long-term support mechanisms.

Thus, the correlation coefficient ($r=-0.343$) in this study indicates a moderate negative association between psychosocial support and family stress. These findings are consistent with recent research evidence highlighting the importance of social support for caregivers of patients with mental disorders. Therefore, mental health services at Tampan Mental Hospital, Riau Province, may consider strengthening psychosocial support programs that include family education, emotional support, information provision, problem-solving assistance, and the development of family social support networks. These efforts are not intended to conclude that increased psychosocial support directly causes a reduction in stress, but rather to propose a relevant service approach based on the observed association between the two variables in this study.

CONCLUSION

The majority of family members of patients with mental disorders at Tampan Mental Hospital, Riau Province, reported not receiving psychosocial support (54%). Most respondents experienced moderate stress while caring for patients with mental disorders (53%). There was a significant association between psychosocial support and stress among family members of patients with mental disorders at Tampan Mental Hospital, Riau Province ($p<0.001$; $r=-0.343$).

ACKNOWLEDGMENTS

The authors would like to express their gratitude to all parties who contributed to the implementation of this study.

REFERENCES

- Amini, S., Jalali, A., & Jalali, R. (2023). Perceived social support and family members of patients with mental disorders: A mixed method study. *Frontiers in Public Health*, 11. <https://doi.org/10.3389/fpubh.2023.1093282>
- Bahari, K., Bachtiar, A., Pertiwi, G. H., & Syahlani, A. (2024). Heavy Burdens of Family Caregivers Caring for Persons with Severe Mental Disorders. *Jurnal Keperawatan Indonesia*, 27(1), 36–46. <https://doi.org/10.7454/jki.v27i1.914>
- Chien, W. T., Ma, D. C. F., Bressington, D., & Mou, H. (2024). Family-based interventions versus standard care for people with schizophrenia. *Cochrane Database of Systematic Reviews*, 2024(10). <https://doi.org/10.1002/14651858.CD013541.pub2>
- Deng, R., Wu, Y., Huang, S., He, Y., Liu, C., Zhang, Z., Wu, K., Fong, L. M., Wu, F., & Li, H. (2026). Prevalence and related factors of caregiving burden among family caregivers of patients with mental illness in China. *Frontiers in Psychiatry*, 16. <https://doi.org/10.3389/fpsyt.2025.1744877>
- Gunawan, I., Huang, X.-Y., Restiana, N., & Rosnawanty, R. (2024). A Lived Experience of Being A Family Caregiver for People with Schizophrenia in Indonesia; A Phenomenological Study. *Indonesian Journal of Global Health Research*, 6(3), 1243–1254.
- Huang, Z., Yi, Q., Yao, H., Li, K., Li, C., Shi, Y., Hu, S., Chen, J., & Xu, Y. (2025). Care Tasks and Caregiver Burden Among Family Caregivers of Patients With Mental Disorders in China: Illness Perception as a Mediator and Social Support as a Moderator. *Journal of Psychiatric and Mental Health Nursing*. <https://doi.org/10.1111/jpm.13156>
- Kaewwanna, W., Bhatarasakoon, P., & Kitsumban, V. (2023). Effectiveness of Internet-based Psychosocial Interventions among Family Caregivers of People with Schizophrenia: A Systematic Review. *Pacific Rim International Journal of Nursing Research*, 27(3), 564–584. <https://doi.org/10.60099/prijnr.2023.262390>

- Kalhovde, A. M., & Kitzmüller, G. (2024). Family Caregivers' Trajectories of Distress While Caring for a Person With Serious Mental Illness. *Qualitative Health Research*, 34(1–2), 154–165. <https://doi.org/10.1177/10497323231203627>
- Kim, S., & Park, S. (2023). Effectiveness of family interventions for patients with schizophrenia: A systematic review and meta-analysis. *International Journal of Mental Health Nursing*, 32(6), 1598–1615. <https://doi.org/10.1111/inm.13198>
- Kirana, W., Anggreini, Y. D., Yousriatin, F., & Safitri, D. (2023). Hubungan Dukungan Psikososial dengan Stres Pada Keluarga Orang dengan Gangguan Jiwa. *Jurnal Kesehatan*, 12(1), 138–144. <https://doi.org/10.46815/jk.v12i1.138>
- Kusumawaty, I., Yunike, & Upoyo, A. S. (2023). Perspectives of Indonesian Caregivers and Health Practitioners on Community-Based Mental Health Services. *Health & Social Care in the Community*, 2023, 1–13. <https://doi.org/10.1155/2023/5954810>
- Li, Y., Qiu, D., Wu, Q., Ni, A., Tang, Z., & Xiao, S. (2024). Affiliate stigma and its association with family burden among family members of people living with schizophrenia in China. *Schizophrenia Research*, 267, 193–200. <https://doi.org/10.1016/j.schres.2024.03.046>
- Lohrasbi, F., Alavi, M., Akbari, M., & Maghsoudi, J. (2023). Promoting Psychosocial Health of Family Caregivers of Patients with Chronic Mental Disorders: A Review of Challenges and Strategies. *Chonnam Medical Journal*, 59(1), 31. <https://doi.org/10.4068/cmj.2023.59.1.31>
- McGrath, J. J., Al-Hamzawi, A., Alonso, J., Altwaijri, Y., Andrade, L. H., Bromet, E. J., Bruffaerts, R., de Almeida, J. M. C., Chardoul, S., Chiu, W. T., Degenhardt, L., Demler, O. V., Ferry, F., Gureje, O., Haro, J. M., Karam, E. G., Karam, G., Khaled, S. M., Kovess-Masfety, V., ... Zaslavsky, A. M. (2023). Age of onset and cumulative risk of mental disorders: a cross-national analysis of population surveys from 29 countries. *The Lancet Psychiatry*, 10(9), 668–681. [https://doi.org/10.1016/S2215-0366\(23\)00193-1](https://doi.org/10.1016/S2215-0366(23)00193-1)
- Ratre, D., Gupta, R., Martis, M., & Singh, V. (2025). Caregiver burden, social support, and family well-being among caregivers of common mental disorder patients in Bhopal. *Journal of Education and Health Promotion*, 14(1). https://doi.org/10.4103/jehp.jehp_1419_24
- Sampogna, G., Brohan, E., Luciano, M., Chowdhary, N., & Fiorillo, A. (2023). Psychosocial interventions for carers of people with severe mental and substance use disorders: a systematic review and meta-analysis. *European Psychiatry*, 66(1), e98. <https://doi.org/10.1192/j.eurpsy.2023.2472>
- Santomauro, D. F., Miller, P. A., Shadid, J., Wulf Hanson, S., Vo, A., Roy, D. J., Hagins, H., Mantilla Herrera, A. M., Scott, J. G., Erskine, H. E., McGrath, J. J., Aalruz, H., Abbastabar, H., Abdel Razeq, N. M. I., Abdelgalil, A. A., Abdolizadeh, A., Abdulah, D. M., Abdulmalik, A. E., Abebe, M. G., ... Ferrari, A. J. (2026). Updated trends in the global prevalence and burden of mental disorders, 1990–2023: a systematic analysis for the Global Burden of Disease Study 2023. *The Lancet*, 407(10543), 2040–2064. [https://doi.org/10.1016/S0140-6736\(26\)00519-2](https://doi.org/10.1016/S0140-6736(26)00519-2)
- Soni, A., Kumar, R., & Das, A. (2024). Experiences of the family caregivers of persons with schizophrenia in north Indian region: A qualitative inquiry. *Archives of Psychiatric Nursing*, 51, 17–24. <https://doi.org/10.1016/j.apnu.2024.05.005>
- Sustrami, D., Suhardiningsih, A. S., Setyowati, A., Fauk, N. K., & Arifin, H. (2024). Family caregiver burden in schizophrenia: A structural equation model of caregiver, patient, environmental, and family function factors. *Jurnal Keperawatan Padjadjaran*, 12(3), 261–269. <https://doi.org/10.24198/jkp.v12i3.2599>
- Sustrami, D., Yusuf, A., Fitryasari, R., Suhardiningsih, A. V. S., & Arifin, H. (2023). Determinants of Burden in Family Caregivers of Individuals With Schizophrenia: A Systematic Review. *Journal of Psychosocial Nursing and Mental Health Services*, 61(2), 38–43. <https://doi.org/10.3928/02793695-20220804-02>
- Syarif, I., Amqam, H., Syamsuddin, S., Hadju, V., Russeng, S., & Amir, Y. (2025). Determinant Factors of Stress in Caregivers of Patients With Schizophrenia: Cross-Sectional Study. *JMIR Formative Research*, 9, e70648–e70648. <https://doi.org/10.2196/70648>

- Wang, S., Dong, J., Wen, L., Tang, W., Zhang, X., Fu, J., Zhu, J., Wang, Y., Zhang, H., Lyaruu, L. I., & Fan, H. (2025). Relationship between quality of life of patients with severe mental illnesses and family burden of disease: the mediating effect of caregivers' social support. *BMC Public Health*, 25(1), 616. <https://doi.org/10.1186/s12889-025-21819-z>
- Yanti, R. D., Putri, V. S., Yesni, M., Rahmadhani, D. Y., Pebrianti, D. K., & Yuliana, Y. (2025). Hubungan Stigma Keluarga dengan Beban Caregiver dalam Merawat Pasien Gangguan Jiwa di Poliklinik Rumah Sakit Jiwa Provinsi Jambi. *Jurnal Akademika Baiturrahim Jambi*, 14(2), 220–227. <https://doi.org/10.36565/jab.v14i2.856>
- Yasuma, N., Sato, S., Yamaguchi, S., Matsunaga, A., Shiozawa, T., Tachimori, H., Watanabe, K., Imamura, K., Nishi, D., Fujii, C., & Kawakami, N. (2024). Effects of brief family psychoeducation on family caregiver burden of people with schizophrenia provided by psychiatric visiting nurses: a cluster randomised controlled trial. *BMC Psychiatry*, 24(1), 445. <https://doi.org/10.1186/s12888-024-05884-z>
- Zhang, X., Wang, S., Zhao, R., Zhao, N., Tao, S., Zhang, H., Wu, B., Xia, X., & Fan, H. (2024). Analysis of factors associated with family disease burden and correlation with social support among family caregivers of patients with severe mental illnesses. *International Journal of Social Psychiatry*, 70(1), 218–226. <https://doi.org/10.1177/00207640231204217>
- Zou, W. Y., Japar, S. B., Rajen Durai, R. A., Liang, G. M., & Ma, Q. C. (2026). Effectiveness of Psychosocial Interventions Among Family Caregivers of People with Schizophrenia in China: A Systematic Review of Randomized Controlled Trials. *Community Mental Health Journal*, 62(3), 548–560. <https://doi.org/10.1007/s10597-025-01547-9>