Mental Health Services & Education Policy for Generation Z After the COVID-19 Pandemic in Yogyakarta City

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Abstract

Mental health is a serious issue during and after the pandemic. Young people, including Gen Z, are the most vulnerable group to experience mental health. Yogyakarta is the locus of research where this city has a high life expectancy of 75.04 years, but unfortunately the prevalence rate of mental disorders is the second highest in Indonesia. This research aims to determine and analyze the implementation of mental health education policies. This research uses qualitative research methods with purposive sampling techniques, through 1) in-depth interviews 2) surveys 3) FGD 4) Literature and Documentation Studies. The results of the research show that 1) the implementation of mental health education policies in Yogyakarta City has not been running optimally 2) the factors causing this include 1) economic uncertainty 2) social media 3) toxic relationships 4) mental health services at PUSKESMAS have not been optimal 5) health budget mentally. Conclusion: mental health is a problem that will have a broad impact on human development, therefore a serious commitment from the government is needed in handling this case. Recommendations: 1) the government needs to make improvements to mental health services at PUSKESMAS 2) provide a budget allocation for mental health and 3) encourage the mental health movement in the city of Yogyakarta.

Keywords: Mental Health, Education Policy, Generation Z

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Introduction

Mental health issues have become a serious problem in many countries, and Indonesia is no exception. The COVID-19 pandemic has been the main trigger for a wide variety of mental illnesses that have mushroomed especially among youth due to the duration of quarantine, fear of infection, limited social interaction, and more. Our youth have been mentally and emotionally burdened by the stress of the COVID-19 pandemic (Alsadek et al., 2021). According to the United Nations (UN), youth are defined as people between the ages of 15 to 24. However, the operational definition and nuances of the term 'youth' vary from country to country, depending on relative sociocultural, institutional, economic and political factors (UN, 2024). In Indonesia, Law No. 40/2009 on Youth gives the age range of youth from 16 to 30 years old. According to the results of the National Socio-Economic Survey (Susenas) in 2023, the estimated percentage of youth is 23.18 percent or almost a quarter of the Indonesian population. The average age that is the standard for regulation in Indonesia is the millennial (Y) and Z generations. It is estimated that by 2024, the Z generation population will dominate the Indonesian population, reaching 56 percent (BPS, 2023).

This research will focus on generation Z because of its unique characteristics, has extensive creativity and high intensity of technology use, especially social media which is one of the causes of mental health issues, such as depression, to suicidal ideation (Prasetyo et al., 2021; Yahaya et al., 2023). Not only social media, there are actually many reasons why generation Z is prone to mental health issues, some of the other things are environmental factors such as material poverty, poor living conditions, and social stressors such as violence and victimization (Curtis et al., 2013). Mental illness and poverty tend to be traveling companions. Worry and uncertainty can worsen mental health (Ridley et al., 2020). Violence including war and conflict, child abuse, harsh parenting (Lindert & Bilsen, 2020), then bullying, social isolation, academic pressure, and high societal expectations can also be triggers for mental illness (Cooper & Hornby, 2018).

The complexity of mental health issues is unfortunately not accompanied by quality policy responses. Policies issued by the government during the COVID-19 pandemic such as staying at home, social restrictions, and lockdown measures are not well mitigated for their impact on mental health. There is very little literature that shows the efforts of countries in the world to mitigate these impacts. Most countries only focus on solving health and economic problems. Even after the pandemic, there is little concern from the government. So far, mental health issues are still considered trivial and underestimated (Villarreal-Zegarra et al., 2022). If in the substantive aspect, mental health policy is still not a priority, while in the technical aspect it is still faced with a lack of resources, coverage and access to services and a large treatment gap (Ayuningtyas et al., 2018; Behanova et al., 2013).

As a result of the government's lack of responsiveness, in Indonesia itself, people entrust their mental health consultations to non-government institutions, namely the private sector such as psychology services in private hospitals to the Halodoc, Riliv and similar platforms. According to Handayani et al (2020), people with high mental health literacy tend to utilize mental health services well compared to people with low mental literacy. It can be interpreted that the utilization of mental health services also depends on the behavior of the community.

In this research, Yogyakarta was chosen as the research location because it is the main reference for young Indonesians to study and get an education. It is no wonder that this city is nicknamed the city of students. The number of campuses in Yogyakarta has led to high

mobility of young people, especially Gen Z from various cities in Indonesia. The high quantity of young people is certainly accompanied by new problems that arise, one of which is mental health. Based on Basic Health Research (Riskesdas) from the Ministry of Health, the prevalence of severe mental disorders in Yogyakarta is the second highest in Indonesia (Kemenkes, 2018). Based on this background, the researcher wants to examine how mental health services and education policies in Yogyakarta City and what factors cause mental health problems in Yogyakarta City.

Literature Review

According to WHO, mental health is an integral part of health and well-being, as reflected in the definition of health in the WHO Constitution: "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity" (WHO, 2013). Mental health is an integral component of health and well-being that underlies our individual and collective ability to make decisions, build relationships, and shape the world in which we live. Mental health is a fundamental human right. And it is important for personal, community and socio-economic development (WHO, 2022). Determinants of health and mental disorders encompass individual attributes as well as social, cultural, economic, and environmental factors, while exposure to adversity, particularly in vulnerable groups such as those living in poverty, individuals with chronic health conditions, and marginalized communities, significantly heightens the risk of mental health problems (WHO, 2013).

Mental disorders, encompassing impairments in cognition, emotional regulation, or behavior, are clinically significant conditions associated with distress or impaired functioning, including anxiety disorders, mood disorders, externalizing disorders, and substance abuse disorders, influenced by both internal factors like personality and external factors such as social circumstances (Darajat, 1982). WHO's research highlights the significant global increase in mental health issues due to the COVID-19 pandemic, including heightened depression and anxiety rates, a higher risk of severe illness and death for those with mental disorders, particularly among younger generations, alongside widened disparities in access to mental health treatment, emphasizing the importance of maintaining mental health services and psychosocial support throughout the pandemic (WHO, 2022).

In Indonesia, the availability of journals addressing mental health policy post-pandemic is scarce, despite extensive research in psychology focusing on individual mental health; however, Kartika's (2020) study on stress symptoms in students during COVID-19, caused by various factors including distance learning challenges, provides insight akin to the mental health concerns of Gen Z. However, during the COVID-19 pandemic, universities shifted to distance learning, fostering increased student learning independence as they manage study time, assignments, and learning resources autonomously. This shift, prompted by the need to prevent the spread of the virus, has compelled both lecturers and students to leverage modern technology for online learning, as conveyed by Firman (2020) on the positive impact of COVID-19 on higher education.

Methodology

This research uses qualitative methods as the main research method because this research aims to map in depth the policies and services related to mental health from the side of the service provider, in this case the Yogyakarta city government and also service users, namely generation Z in the city of Yogyakarta. In parallel, quantitative methods are also used to see

in general what factors cause generation Z to experience mental health problems in the context of the post-COVID-19 pandemic.

Qualitative research was conducted with data collection techniques in the form of interviews. Interviews were conducted with the Yogyakarta city government, doctors in community health center, and students aged 18-26 years. Meanwhile, quantitative research was conducted using survey techniques. The survey was conducted on 51 respondents who are students aged 18-26 years old at Gadjah Mada University. Secondary data was also used in this study, including regulations on Gen Z mental health and the results of previous studies that discuss Gen Z mental health in Indonesia. The sampling method used in this study is a non-probability sampling method, namely purposing sampling, namely by purposive sampling where the author sets the sample of choice according to what the author needs and wants. Data analysis conducted for quantitative data was descriptive statistics. Quantitative data was triangulated with qualitative data and secondary data.

Table 1. Research Informants and Respondents

No.	Informants	Total
1	Government of Yogyakarta City (Dinas Kesehatan Kota Yogyakarta)	2
2	Community Health Center	1
3	Undergraduate Students (19-22)	24 students
4	Post Graduate Students (23-26)	27 students

Findings and Result

1. Factors Affecting Mental Health in Yogyakarta City

Based on the survey results in 2023-2024, the factors that affect mental health are as follows:

a. Uncertainty of the future
The survey results show that as many as 32.7% of respondents said the factor that affects mental health is the uncertainty of the future, such as the economy, work, education and others. A person experiences anxiety and even depression when thinking about when thinking about future uncertainty. Future anxiety is worry, fear, or uncertainty associated with the future and the possibility of undesirable outcomes. This can include concerns about future career, education, relationships, health, and finances (Wilinaza et al., 2023). It is also something that can affect a person's mental health.

b. Friendship and romance (Toxic Relationship)
Furthermore, the second highest percentage in factors affecting mental health is toxic relationships such as friendships and romance at 19.2%. Toxic friendships and romantic relationships can cause internal conflict within oneself. This internal conflict will cause anger, depression and anxiety. Toxic relationship itself is a relationship that makes one party feel negative actions, feel unsupported, demeaned, attacked. These negative forms can affect a person's mental health in physical, psychological and emotional forms (Keny et.al, 2023).

c. Trauma to a certain thing

The survey percentage was 17.3% that the factor that affects mental health is trauma. Psychological trauma refers to stressors that arise either directly or indirectly, causing significant and serious subjective distress. Mental health trauma is ubiquitous and generally experienced throughout life. Often, the sequelae of traumatic experiences involve functional impairment, which can lead to decreased quality of life, morbidity, and poorer health outcomes (Feriante & Sharma, 2023).

d. Academic pressure (coursework load)

The survey results showed that 11.5% of respondents identified academic pressure such as coursework as a factor affecting mental health. Academic pressure is a potential contributor to adolescent mental health problems, one of the common sources of stress experienced by adolescents is academic pressure (Steare et.al, 2023).

e. Digital technology and mass media

Based on survey results digital technology and mass media are also factors that affect a person's mental health. Increased rates of depression, anxiety, and suicide, especially among women (Mojtabai et al, 2016) who are the heaviest users of new media, have led some to claim that smartphones and social media drive increased suicidal behavior, depression and loneliness (Odgers & Jensen, 2020). Thus the use of digital technologies has led to an increase in adolescent depression and related mental health problems (Daly, 2018; Livingstone, 2018), and digital technologies contribute greatly to the worsening of mental health symptoms and well-being.

f. Genetics/Family History

According to survey results, genetics and family history have also been shown to be factors that influence an individual's mental health. Gershon & Alliey-Rodriguez (2013) explains that the chance of indirect inheritance of mental disorders in the second generation can genetically occur in inheritance from direct descendants or first offspring.

g. Stigma from society

Stigma from society is also confirmed to play a role as a factor affecting a person's mental health. Lack of knowledge about mental health disorders is one component of the stigma construct itself, for example in Thornicroft's concept of stigma as a construct consisting of knowledge (ignorance), attitude (prejudice), and behavior (discrimination) issues (Thornicroft & Kassam, 2008).

2. Mental Health Services, Education Policy in Yogyakarta City and Their Challenge

Yogyakarta City is located in the Special Region of Yogyakarta (DIY) Province, this city has 455,535 inhabitants (BPS D.I. Yogyakarta, 2023). The population in the city of Yogyakarta is mostly dominated by Generation Z. This is because the city of Yogyakarta is a city that is widely known in Indonesia as the "City of Students". The number of students who come from various cities in Indonesia makes Yogyakarta a very complex city. Various problems, especially related to mental health, are important issues that should be the main concern of the government. Based on data from a survey conducted by the author in the period of December 2023 to 52 students in Yogyakarta City. The author found that of the 52 student respondents studied, only 48.1% of students stated that they had received mental health

education while 38.5% and 11.5% said rarely & sometimes, the rest said they had never received mental health education in the city of Yogyakarta.

When accumulated, there are 50% and 1.9% (never) of students who rarely or never get mental health education in Yogyakarta City. Most respondents answered that they obtained more information about mental health education through social media (online) than through offline methods. A total of 84.3% of respondents answered that they mostly obtained information about mental health education through the Instagram platform, 29.4% from Youtube and 23.5% from the X application. Meanwhile, respondents who chose offline answered that most obtained mental health education from socialization and discussions in the campus environment (72.4%) and the rest obtained the most information about mental health education through seminars and discussions by Non Governmental Organizations (NGOs).

Another finding in this survey is that 78.4% of respondents stated that they obtained most of their information on mental health issues from non-government stakeholders. Meanwhile, 13.7% came from the campus and only 7.9% came from government stakeholders. This is of course very concerning considering that the role of the government is considered very lacking in the implementation of mental health services and education policies in Yogyakarta City. The uneven distribution of mental health education throughout the city of Yogyakarta is a homework that must be resolved immediately by the Yogyakarta City Government today. In fact, 50% of respondents answered that they would use online platforms such as Halodoc, Alodokter and Good Doctor to access mental health services rather than offline platforms such as Puskesmas, Hospitals and Psychologist Clinics provided by the Yogyakarta City Government. Generation Z in Yogyakarta City prefers online platforms to access mental health services rather than offline platforms such as hospitals and community health centers.
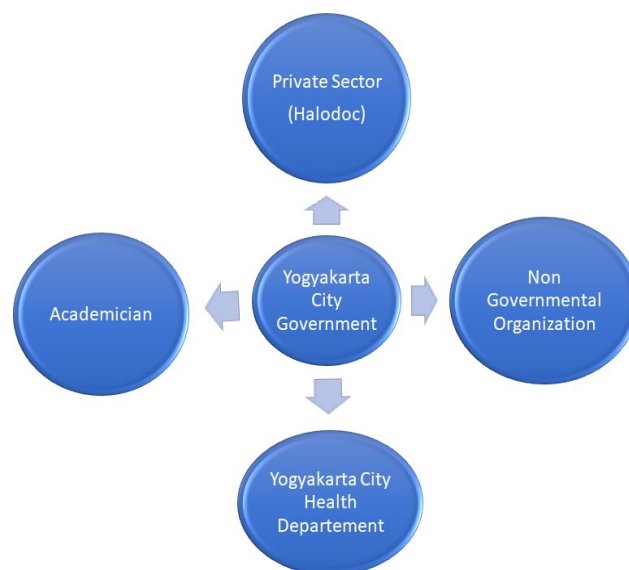

Figure 1. Stakeholders Relation on Mental Health Policy in Yogyakarta City

The Yogyakarta City Government's broad policy granting equal access to mental health services positively impacts accessibility, yet Colombia's centralized mental health policies face criticism for neglecting collaboration, leading to exclusion, especially among young people, exacerbating intergenerational impacts due to uneven service distribution (Fenton et al., 2024). Based on experiences from Latin American countries, after the COVID-19

pandemic, there are several activities ranging from promotive, preventive, rehabilitative, and curative efforts pursued by the Yogyakarta City Health Office together with friends in health facilities in realizing a general mental health policy.

Promotive and preventive efforts through mental health promotion partner with cross-sectors in Yogyakarta. From the promotive side, the Yogyakarta City Health Office in collaboration with the health promotion section always intensifies promotive efforts through Instagram media, websites, infographics that can be shared in groups that can be each WA status. Before the pandemic, the Yogyakarta City Health Office had initiated socialization and advocacy for the development of mentally healthy schools. The target is teenagers. We coordinate with the Education Office and friends from health facilities. In 2023 we have a pilot project for mentally healthy schools in 4 junior high schools (SMPN 3, SMPN 7, SMP Taman Dewasa Jetis, SMP Bopkri 3).

In the city of Yogyakarta from 2018-2022, the Yogyakarta City Health Office has a Regional Action Plan for Mental Health and Drugs. But during the pandemic, its implementation was slightly constrained. Starting in 2022, the Yogyakarta City Health Office has advocated to the governance department to include the indicators of the Community Mental Health Implementation Team (TPKJM) and the Mental Health Alert Village in the performance indicators of Kemantren. Every year it will be evaluated whether the TPKJM already exists and whether it is running well.

TPKJM and Kelurahan Siaga Sehat Jiwa are a forum for the community to carry out activities in mental health prevention and control efforts in the community. One example is in the Gondomanan area, the community, especially teenagers, can already be engaged, they call themselves Kareja (Kader Remaja Kesehatan Jiwa). So they are socialized and trained as peer counselors and become mental health assistants, in addition to eliminating the associated stigma itself. At the community level, they can also provide assistance to the community around them. This has also been developed in several other areas, such as Kemantren (sub-district) in Kraton, the Community Health Center has partnered with the Kemantren (sub-district) itself. So there are promotive and preventive activities also in collaboration with private universities in Jogja, UNISA, UGM. They conduct promotive, preventive, rehabilitative activities (providing training to people with mental illness problems). The curative efforts are carried out through health facilities at each of the PUSKESMAS and Hospitals in Yogyakarta City.

The Yogyakarta City Health Office, in collaboration with universities and educational authorities, actively engages Gen Z students through discussions, podcasts, and initiatives like Mental Health Schools and Healthy Mental Campus, recognizing and nurturing their high curiosity and literacy about mental health. The Yogyakarta City Health Office conducts advocacy and socialization with several universities in Yogyakarta City as shown in Figure 2.
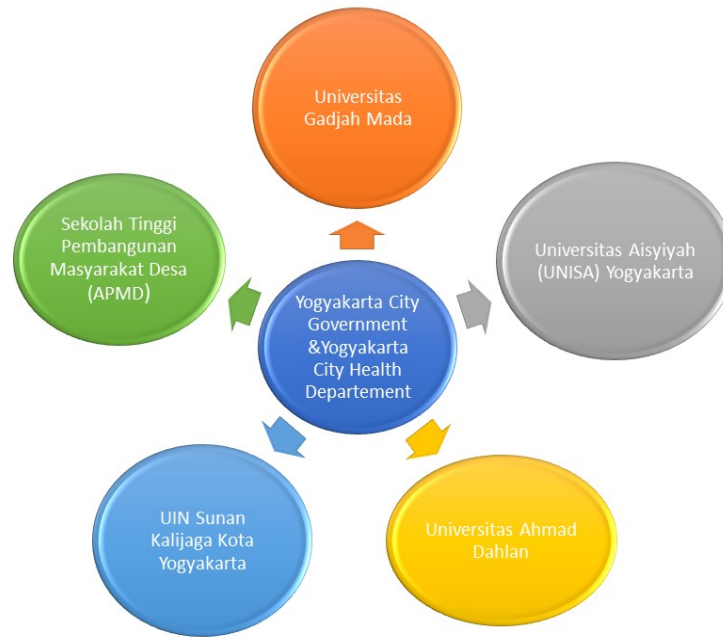
Figure 2. The Mentally Healthy Campus Program in Yogyakarta City

The form of cooperation carried out by the Yogyakarta City Government with several universities can be seen in Figure 2, where the university does not directly cooperate with the Yogyakarta City Health Office, but under the coordination of the Yogyakarta City Government. Figure 2 shows that the main stakeholder leading the way on mental health issues is the Yogyakarta City Government. Meanwhile, the Yogyakarta City Health Office as an extension of the Yogyakarta City Government is authorized to address mental health issues. The Yogyakarta City Government with an open cooperation system provides maximum opportunities for all universities in Yogyakarta City to collaborate in overcoming mental health issues. Some universities that have joined the "Healthy Mental Campus" program include 1) Gadjah Mada University 2) Aisyiyah University (UNISA) Yogyakarta 3) Ahmad Dahlan University 4) UIN Sunan Kalijaga Yogyakarta 5) College of Village Community Development (APMD).

The Mentally Healthy Campus Program has made several efforts to address mental health issues including 1) preventive efforts through early detection services and socialization in the form of podcasts, social media and various other media platforms 2) rehabilitative efforts are carried out in the form of empowering students with the Community Health Center in Yogyakarta City 3) holding cross-sectoral meetings by inviting various universities that are members of the mentally healthy campus program. The Yogyakarta City Government encourages various universities to optimize the resources they have. For example, by developing the resources they have in the faculty of psychology, when universities open services for their students it will encourage students to do counseling. Students who come from various cities in Indonesia make counselors (those who provide counseling) feel difficult in dealing with various problems experienced by students with diverse backgrounds.

Some of the challenges faced by the Yogyakarta City Government include:

1. The existence of informal behavior, actions from the community in the form of reluctance to use counseling facilities provided by the Yogyakarta City government

is a challenge faced by the Yogyakarta City government. Young people (Generation Z) are reluctant to seek help for mental health problems due to various factors such as stigma from society (Fronteira et al., 2024).

2. Stigma from the community, the negative view from the community about people accessing mental health services is a major challenge faced by the Yogyakarta City Government. Changing people's views to always monitor their mental health with counseling is a major task for the government. Currently, the government can do socialization and education to the entire community to change their stigmatized view that mental health is needed. The existence of stigma that hinders mental health education policies is not only experienced by Indonesia (Yogyakarta City Government), it is also experienced by the United States Government, Latinos face various cultural & structural barriers in accessing & utilizing mental health services. The stigma in Latin society is that men are masculine (strong) and at high risk of receiving inadequate mental health care. Masculinity influences barriers & facilitators of depression care among Latino men at the stages of self-recognition, help-seeking, and diagnosis and treatment of depression (Swetlitz et al., 2024).

3. Mental health services that have not been optimally accessed by the community are a challenge for the Yogyakarta City Government. Promotion and education to various lines of society continues to be carried out in order to create optimal health services.

Conclusion and Recommendations for Mental Health Education Policy in Yogyakarta City

The City of Yogyakarta implements mental health policies and services across promotive, preventive, and rehabilitative scopes through collaborations with NGOs, campuses, and schools, employing methods such as infographics and youth cadres. While psychologists are accessible in health centers, challenges like budget constraints and human resources hinder the city's efforts to provide optimal mental health services. Generation Z in Yogyakarta primarily obtains mental health education and information from online sources and non-government entities, highlighting a gap in government outreach efforts. Furthermore, as they prefer online mental health services over offline options, adapting communication strategies and service delivery to cater to the preferences of Generation Z is essential for the Yogyakarta city government.

To effectively engage Generation Z in Yogyakarta with mental health education, the city government should expand its online presence and utilize platforms like Instagram, Tiktok, and for reach out many people. Collaborating with popular social media influencers could also help increase awareness and understanding of mental health among Generation Z by providing relatable role models and accessible information. The Yogyakarta City government should collaborate with NGOs and community organizations involved in mental health education to enhance outreach efforts to Generation Z. By pooling resources and expertise, both government and non-government entities can effectively engage Generation Z and provide essential mental health information and support. Additionally, allocating resources to improve the quality and accessibility of mental health services, including training more psychologists at community health centers, is essential for addressing mental health needs comprehensively in Yogyakarta.

The Yogyakarta City government should tackle budget and human resource limitations by considering innovative solutions like telehealth services, which would enable Generation Z to access mental health support online, offering convenience and comfort while increasing accessibility to services. The Yogyakarta City government should prioritize mental health education for Generation Z by organizing seminars and workshops in schools and community spaces, focusing on stress management, self-care, and resilience. Collaboration with educational institutions and NGOs to integrate mental health education into the school curriculum will ensure comprehensive and structured learning, catering to Generation Z's preference for interactive and practical learning methods.

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