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89346-RV-File terbaru_ Januari 2024_F.d ocx

WORD COUNT 6666 Words	CHARACTER COUNT 39299 Characters
PAGE COUNT 17 Pages	FILE SIZE 99.4KB
SUBMISSION DATE Jan 23, 2024 9:32 AM GMT+7	REPORT DATE Jan 23, 2024 9:33 AM GMT+7

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Abstract

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Abstract: Children with special needs require more care than normal children. They are not enough to get parenting assistance from the family. Communities and government also play an essential role in educating them. This study aims to find a mental health service model for children, especially those with special need based on spirituality and community engagement, especially in rural *areas*. Reparch methods a qualitative approach was used in this study. This study involved 19 managers and caregivers of children with special needs who participated in interviews, participant observations, and three focus group discussions. The interview was conducted using *a free association interview technique*. Thematic analysis is used to analyse the data. Results and conclusion thematic analysis of the interview process and focus group discussion resulted in four prominent themes namely the process of forming spiritual and community-based mental health services, description of children who receive mental health services, assessment methods and psychological interventions with an indigenous psychological approach. Contribution This study is expected to find a mental health service model that is suitable for children can be applied in *rural* areas, and can be a mental health service model that is replicated in other areas.

Keywords: Community Mental Health, Spiritual, Mental Health Services, Children with Special Needs, Indonesia

Introduction

Children with special needs require special attention from family, community/society, and government. Including inildren with disabilities is one of the biggest challenges faced by education systems worldwide, in line with UNICEF's sustainable Development Goals (SDGs) to support inclusive and equitable quality education and promote lifelong learning opportunities for all (Franco, 2023). In this case, it is also necessary to think about an integrated mental health service system in the education process for youth. Good social support and career paths for early childbood teachers are needed to guide the development of qualified and competent teachers to help foster the holistic development of children with epecial needs (Saari et al., 2022). In addition to parents, teachers are also prope to stress during the care of children with special needs. High-stress pressure and neglect by eachers of children with special needs

can cause physical discomfort, such as back pain and fatigue, and mental fatigue (Liu, 2022). For this reason, the education system and mental health services for children with special needs will be better pursued jointly by parents, teachers and involving the community.

Community involvement has not been done in rural mental health services. In urban areas, it is still easy for residents of access mental health services. Mental health services in urban areas are felt to be less affordable by rural communities. Mental health services are also sometimes considered incompatible with the needs and expectations of rural communities. Existing mental health services are based on assumptions that are considered incompatible with indigenous communities (*Gone Re-imagining-Mental-Health-Services-for-American-Indian-Communities-Centering.Pdf*, n.d.). The youth and teenagers need mental health services, but few community-based mental health services can reach rural areas. Mental health services are still centered in urban areas.

Rural communities in Indonesia, particularly indigenous children, have difficulty accessing mental health services. According to (Bokst et al., 2015; Lopez-Carmen et al., 2019) just like in canada, New Zealand, and the United States, the utilization rate of mental health services in indigenous communities is also low. The low utilization rate can be caused by several factors, such as fear of coming to the hospital, negative images about mental health services. Other factors that can affect the low utilization of mental health services are assumptions about expensive costs, long waiting queue times for services (Eichsted et al., 2021; Kourgiantakis et al., 2022) lack of knowledge about are importance of mental health, and strong belief in spiritually based medicine. Another thing that can affect mental health services is a lack of confidence and a generation gap between professional clinicians and children and adolescents (Lau-Zhu et al., 2023).

The firm attachment of society to spiritual factors is also related to access to health services provided by the state. The belief that spiritual leaders can help with mental health makes people in rural areas less willing to come to mental health services. Indonesia and countries on the Asian-African continent are also concerned with spiritual approaches and local wisdom (indigenous) in various fields, including access to mental health services. According to (Sastra et al., 2021) the spiritual factor is still some thing crucial in Indonesia and countries in Asia.

Among the various psychological factors that exist, religion and spirituality are important and good things as well (Moordiningsih et al., 2023; Sahrah et al., 2023) Religious and spiritual give individuals different points of view when facing problems (Bhosale & College, 2015; Iannello et al., 2022; Moordiningsih et al., 2023). Opiritual well-being can influence mental health in students. Interpersonal relationships with the environment, social, groups and God are part of the process of spiritual well-being (Hamka et al., 2020). Social support in the form of a strong relationship, with a spiritual group can help someone provide a sense of security, comfort, positive thoughts related to hope, and positive effects obtained when someone experiences mental illness (Park & Slattery, 2012). According to (Michaelson et al., 2019), Spiritual factors also have connections in four relation domains: relations to the self, relations **Commented** [VP5]: Apakah ini "cantered" atau "centered"?

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to nature, relations to transcendence, and relations to the meaning of life. Spirituality also strongly links healthy behaviour and subjective well-being (Bożek et al., 2020). Spirituality is becoming an essential factor in mental health services because spituality presents psychological and social resources for coping with stress (Wattis, 2017) and mental health recovery assistance (Goncąlves et al., 2015; Najafi et al., 2022; Oman & Lukoff, 2018).

⁵⁹Iental health promotion and prevention efforts also require community involvement. Mental health promotion and prevention require activities create living conditions and environments that support mental health throughout the lifespan and get people to adopt and maintain healthy lifestyles (World Health Organization, 2020). Mental health programs require interdisciplinary action in homes, schools, and communities arough culturally safe, strengthsbased, family and community mental health support programs, services, and policies. Community engagement can support aealthy emotional and social outcomes in childhood and support those who are vulnerable to mental disorders.

There are ⁵⁸ any nunity-based and spiritual mental health services that care about the approach of caring for children with special needs in Indonesia through Islamic boarding schools. This boarding school for children with disabilities provides mental health services for the development of children with special needs. Many families with children with special needs in Indonesia choose to provide care for children with special needs in this Islamic boarding school.

Children with special needs have been cared for more at home. Parents sometimes feel ashamed and lack acceptance of the existence of them. Other conditions that can be a factor causing inaccuracy of the care of children with special needs are lack of parental knowledge about mental health services for children with special needs are lack of parental knowledge about mental health services for children with special needs are lack of parental knowledge about mental health services for children with special needs are lack of parental knowledge about mental health services for children with special needs are lack of parental knowledge about them (Widhiak et al., 2022). Stigma is associated with negative atitudes and intentions to seek psychological help and correlates with psychological disterss (Calear et al., 2021; Dagani et al., 2023; Eyllon et al., 2020). This negative stigma about the existence of children (Wibowo & Nurlaila, 2017; Sheikhan et al., 2023). The stigma can cause inaccuracies during the process of aring for children with special needs and have an impact on mental health conditions (Guntur, 5021; Kourgiantakis et al., 2023; Widhiati et al., 2022).

In Yogyakarta, Indonesia, there is an Islamic boarding school that provides mental health services for children with special needs with a spiritual approach and also involves community participation in the care of them. This study wanted to find a spiritual and community-based mental health service model for children with special needs in Yogyakarta, Indonesia. This mental health cervice model for children with special needs obtained can be a model of mentoring and aring for children with special needs in rural areas. This mental health service model can also describe psychological assessments and interventions provided for children with an indigenous psychological approach.

This study aims to find a mental health service model for children based on spirituality and community involvement, especially in rural areas. This research is important to obtain a Commented [AS21]: Oman & Lukoff sudah ada di referensi

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service model for children with special needs with a spiritual and community approach. The previous model of mental health services for children with special needs in Indonesia was generally carried out by formal schools such as special schools (*Sekolah Luar Biasa*) and by the health office. The central question of this study is how is the mental health service model for children with special needs with a spiritual and community approach carried out in an Islamic boarding school?

Methods

The research was conducted using a qualitative approach a the Ainul Yakin Islamic boarding school in Yogyakarta, Indonesia, which provides mental health services or children with special needs. This Islamic boarding school provides education and health services for 128 children with special needs from various regions in Indonesia. Informed consent was given to all informants who participated in the study. The study was conducted between July – November 2020, followed by June-July 2023 in Yogyakarta, Indonesia. This study experienced a gap⁵² due to the Covid 19 pandemic situation that occurred in Indonesia

The methods used are interviews, participant observation, and *focus group discussion*. The main informant of the research was the manager and caregiver at the Islamic boarding school in Yogyakarta, Indonesia. Informants follow the interview process and *focus group discussions*. Observations were also made on them who live and arry out daily activities in Islamic boarding schools. The total number of primary informants was 19, including two who acted as managers and leaders of Islamic boarding schools. Seventeen caregivers out of 52 are caregivers hor children with special needs in Islamic boarding schools. The caregivers work as caregivers who act as teachers, security officers, and providers of food needs for the children.

Focus group discussions were also conducted with nine local community leaders to understand the role of the community caring for children with special needs and four representatives of parents of children with special needs. The interview and focus group discussion results were recorded and made verbatim transcripts. The observations are described in a descriptive narrative manner. Data analysis is carried out by analysing the content of verbatim transcript results. According to (Davison & Smith, 2018), Interpreting content analysis is an effort to present the central message of the document's text data briefly and concisely. Thematic analysis is also carried out by categorizing the themes found according to the purpose of the study.

Results

Four main theme findings describe mental health service models for children with special needs on a spiritual and community basis. The four main themes include:

1.1 Theme 1: Establishment of spiritual and community-based mental health services,

The establishmen¹¹ Islamic boarding schools as a place⁵⁷ care and therapy for children with special needs began with a therapist educational institution to help clients personally.

"At first, I did not aspire to have an Islamic boarding school. First, as a therapist, I have a therapist educational institution to deal with children with learning difficulties, dyslexia, dyscalculia, and dysgraphia. I educated by reading, writing, and counting for 30 meetings. Then I met a strange child. I then created a school"

"From school, then in 2012, I established the Ainul Yakin Islamic boarding school ecause there are parents of children with special needs who have a house far from school. he parents of this child with special needs asked me to make a boarding house. Parents hope their children can stay with me and get therapy and care continuously"

"Many children with special needs are afraid to go to the hospital because the hospital model is not felt safe and comfortable for children (Founder, Ai)"

"Then I looked for a place that was spacious, united, and close to the community. I chose Tepus GunungKidul village, Yogyakarta, because it is my mother's birthplace"

"I the created the concept of a particular Islamic boarding school for children with special needs as a community centre for children with special needs in Indonesia. I need a prominent place because (24) basic concept is not only learning and therapy, but there are six concepts earlier; namely, enildren with special needs can learn, therapy, worship, work, family, and community". (Founder, Ai).

"I think this Islamic boarding school was originally not for children like children with special needs, but it turned out to take care of special children" (Community Leader 1)

"For the existence of the Ainul Yakin Islamic boarding school, are, from the beginning, we probably all community leaders escorted the establishment of this slamic boarding school. It was already a meeting of religious leaders from community leaders directly from elements of hamlet institutions from neighbouring communities. The head of the Islamic boarding school still wants to be established here, his parents' homeland here. Maybe his spirit is burning. So the community also followed, supporting and participating in joint activities from the beginning" (Community Leader 2)

"The cooperation 4 ween Islamic boarding schools and the surrounding community is excellent. Cooperation is earried out in a cooperative manner" (Community Leader 3)

The founder of the Islamic boarding school initially established an educational institution and therapists personally. Then it developed into a mental health service the form of an Islamic boarding school because it accommodates the needs of parents about housing for an initial needs. Parents of children with special needs hope their children can get mental health services more continuously and have good habituation when living in Islamic

boarding schools. Another reason for establishing this boarding school is that there are no the services in the rural areas where they live, and children feel afraid to come to the hospital.

Children are treated in Islamic boarding schools because parents cannot educate and provide therapy to them. Parents said no institution cancer for children with special needs in their area or village. Busy parents are entrusted to others, but their conditions do not become good, and they are entrusted because they have no one or are orphans.

This Islamic boarding school also provides mental health services by involving the community. The community has the broadest opportunity to participate in efforts to protect and fulfih are rights of persons with disabilities. As a form of participation, this is arried out by the Ainul Yakin Islamic Boarding School in Gunung Kidul, Yogyakarta, Indonesia. This slamic boarding school has a vision: to care for children with special needs to get the best service, education, and therapy in collaboration with the community.

1.2 Theme 2: Description of children with special needs receiving mental health services

Parenting in Islamic boarding schools applies a humanist approach model, which views them as children with potential and makes them special from their perspectives.

The head of the Islamic boarding school believes God has created his creatures as perfect beings. Therefore, having a positive mind-set in looking a shildren with special needs is very important. The mind-set that they are the same as ordinary children in general, only need special care. The lodge leadership then disseminated this belief to the community around the Islamic boarding school.

"The problem is no with children with special needs. If the child from birth is indeed like that created has flaws. So he seems troubled because our perspective that we feel that we are perfect sees children with special needs as not perfect" (founder, Islamic Boarding School)

Children with special needs who get services at Islamic boarding schools also get a negative stigma from the community.

"Many parents come to Islamic boarding schools for consultations about children with special needs. They said their children were exposed to magic, jinn, and influence from the occult world. That is almost 85% of the parents who came told me this" (founder, slamic boarding School)

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The circumstances of children brought to Islamic boarding schools vary. Children treated in Islamic boarding schools include mental health problems due to communicative and affective disabilities due to autism, *attention deficit and hyperactivity disorder (ADHD), Down syndrome,* psychosocial disorders, and *intellectual disability*. Meanwhile, Islamic boarding schools cannot care for blind and deaf children because accessibility is not yet possible. However, now the Islamic boarding school has started treating children with disabilities and *cerebral palsy (CP)* and some teenagers with mental disorders.

1.3 Theme 3: Forms and processes of parenting children with special needs based on spiritual and community approaches

The leadership 2 the Islamic boarding school chooses the community around the boarding school to be directly 4 avolved in the upbringing of the Islamic boarding school. Children with special needs are expected to be a real example of the existence of special children for those around them. Community involvement is also a form of direct education involving the local community.

In addition, in several activities in the community, such as community meetings, worship together in the village, and play with local children.² hildren with special needs in Islamic boarding schools are also invited and involved in community activities, such as working together to clean the village. This strategy introduces the community to the conditions and needs of them. This effort was ultimately able to change the view of the surrounding community toward them.

At first, they are considered unable to do anything, so they require total care or assistance from those around them. However, the community's views slowly changed by looking at what is done and the development of them in Islamic boarding schools. They see anildren with special needs as children who can be empowered.

There is an influence on the surrounding community, which initially considers bildren with special needs only limited in their abilities, unable to do anything. I can only stay at home. However, children with special needs can do activities like ordinary cople. Activities such as gardening, meditating, learning, and helping the community around the Islamic boarding school" (Srt, caregiver 1)

Islamic boarding school leaders and caregivers apply the concepted mental health services for children with special needs, including six forms of activities, namely:

"The analysis of the establishment of Islamic boarding schools begins with therapy. Fight boarding school is also a place of therapy. So initially, as a therapy place, I helped clients of children with special needs. Second, as a place to go to school. It turns out that learning time is felt to be less long to form their potential. Good conditions are to form better habits and behaviour patterns, so I need more than 24 hours a day. Based on that, I formed an Islamic boarding school"

"After establishing the solamic boarding school, it turned out that there were stine hildren with special needs who relapsed and checked their condition. After a week, a month, or two months it turns out to come again because it returns to the pattern of behaviour that are not good. Then the last one is that the caregiver and I made a village, or children with special needs. Our curriculum is called the Indonesian Special Needs Children's Recovery Centre curriculum"

"This² slamic boarding school is a place of learning, a place of therapy, a place of worship, a place of work, a place of family, and a place of community. Then these six concepts must be present here. So study, therapy, worship, work, family, and society must exist individually. So we named the village for children with special needs" (Founder, Ai).

Children with special needs in Islamic boarding schools are categorized into 3, namely three categories: all-in-hand, assisted direction, and independent.

"Children with special needs are categorized into three classes. If his ability is below average, he enters the auxiliary class. If his abilities are in, he is a command class. He is an independent class if he has good abilities and is above average"

"As a result of this all-help class, children can only care for themselves, do effortless work, and even then, with orders. In auxiliary landing classes, children can only become professional workers. Being a professional worker, he cannot create and manage jobs"

"This class of auxiliary referrals can be therapists, get instruction, and be nurturing. These independent classes are cadres, so after school and dedication, they must go home and can establish Islamic boarding schools the this. The independent class can become professional workers. The requirements for children with special needs can be independent when they can work professionally, can create jobs, and can manage jobs" (Founder, Ai).

Data on Children with Special Needs December 2020 According to the Classification of Cognition and Self-Care Abilities				
No	Classification	Man	Woman	Sum
1	All-in-hand	36	4	40
2	Assisted direction	41	31	72
3	Independent/ Self-sufficient	13	3	16
	Total	90	38	128

Table1. Classification of Children with Special Needs in boarding school

"Though here, the main activity is praying worship. While waiting for prayer, the children with special needs do other activities" (Founder, Ai)

"Other activities include studying, working, therapy, and caring for family and community. Learning activities such as learning to write, count and memorize scriptures. Children also follow therapy carried out by caregivers. Children with special needs are also trained to carry out family roles such as cooking, washing clothes, and caring for themselves. Community activities and work such as gardening and livestock with community members. It is an amalgamation of behaviour modification. So, every child, if he does good deeds, has a point. If the child does an evil deed, there are points" (Care Giver, Is).

The form of nursing for the children uses the method of forming good habits for children by making worship time five times a try the primary time for habituating behaviour. While waiting for worship time from one time to the next, children with special needs in the Islamic boarding school carry out activities such as studying, undergoing therapy, learning to take care of themselves, gardening, raising livestock, and activities with the community around the Islamic boarding school. Behaviour modification is carried out with a *reward and punishment-approach*.

1.4 *Theme 4*: Methods of assessment and psychological Intervention during the care of Children with special needs with an indigenous psychology approach.

This Islamic boarding school has 128 children from various villages in Indonesia. After registration, children undergo observation for 40 days. Things observed include academic ability, life skills, and personal responsibilities. At this stage, the sincerity and willingness of parents are also observed. According to the values held by Islamic boarding schools, the sincerity of parents will determine the development of children's progress.

"Later, there will be a test, about his academics, about abilities, life skills, and responsibility. Usually included in the all-help category first. After 40 days, we will see how it progresses" (Caregiver, W)

"So, the handling" children with special needs is not at calendar age but looks at mental age abilities. We do screen first, and we make observations. First, enter the observation period of 40 days to see age, gender, and do diagnostic labelling. This diagnostic labelling is related to academics, life skills, and responsibility. The final result is a total index number. If the total score is below average, then the child is given an all-help diagnostic label. If the total score of the index

number, if it is good or above average, then it is included in the class category "(Teacher and Caregiver, Ft)

Children with special needs receive therapy in the process of mental health services. The therapy provided is behavioural therapy, massage therapy, tap therapy, and swab therapy for children with special needs. Reading therapy is also given by reading a spiritual book read by one child in front of other children.

"Then I have one method called IBT (Isma Behaviour therapy). Isma behaviour therapy that I refer to is spiritual understanding. "You will get a good return if you do one good deed. You will get something in return if you do a good deed as big as a mustard seed. I instilled in them "That every activity has value, there is value, and you will get results according to what you do. The incorporation of behaviour modification is actually about reward and punishment. My independent category children asked me to read spiritual books in front of other children" (Founder, Ai)

"I have learned ILT, Isma Learning Therapist, which is doing. Tap, pat, and wipe on the body parts of children with special needs who experience tension. It can be in the position of hands, head, neck, shoulders, back, and feet. Children are expected to feel relaxed after the therapy process" (Care Giver, As)

"To eliminate the effects of heat on the body after therapy, we wipe first... and patting on the right part of the child's body. It must be done carefully and precisely, so caregivers should also learn about therapy first. Caregivers should not do carelessly" (Caregiver, St).

"Providing therapy and education to these children requires the expertise of caregivers. Caregivers need tremendous perseverance and patience" (Leader, Ai)

The assessment method and psychological intervention are based on the spiritual and psychological understanding the founder of the Islamic boarding school about the therapeutic process that is important for observing children with special needs for 40 days. After seeing the habitual process by children, it is categorized into class categories according to diagnostic labels.

Psychological intervention is carried out by conducting behavioural therapy based on behaviour modification rules. Therapy is also done by doing massage techniques, tapping, and wiping to provide a relaxing effect to them.

Discussion

This paper finds a community-based and spiritual mental health service moder in the form of an Islamic boarding school in Yogyakarta, Indonesia. This mental health service model finds four essential themes, namely; 1) the process of initial establishment of mental health services in rural areas; 2) descriptions of enildren with special needs who can receive mental health services; 3) community-based and spiritual-based forms and processes of parenting

Unildren with special needs; and 4) assessment methods and psychological intervention the process of caring for children with special needs.

Spiritual leaders who care about the community's needs play a key role in mobilizing the community. According to the WHO health system, the health system change framework includes 1) service delivery; 2) human resources; 3) the treatment process and technology used; 4) health information systems; 5) financing, and 6) leadership (WHO, 2010). Caring leaders with a strong vision can motivate communities to deliver health services, including and a strong vision can motivate communities to deliver health services, including and a leaders such as Imam, Kyai, Priests, and Buddhist monks make arrangements, give messages about health when they feel health problems in times of safety or emergency, and try to provide solutions for their communities communities [] (Luetke Lanfer et al., 2023). Leaders and caregivers of Islamic boarding schools have a positive mind-set in viewing the existence of the children boarding schools have a positive mind-set in viewing the existence of the children boarding to their potential.

The community has the awareness to care and work together to help the process of caring for children with special needs. When parents cannot adequately provide appropriate care for their children, community, and religious leaders work together to provide co-carefor children with special needs (Saari et al., 2022). They live and interact with the community and give the children many examples of learning in the community. Healthcare professionals such as psychologist, doctor, psychiatrist, nurse anould encourage families to use community support resources for childcare(Wakimizu et al., 2018).

Community stigma against children with special needs can prevent parents from finding mental health services (Sheikhan 4 al., 2023). Medical professional should pay attention to reduce the stigma(He et al., 2023). In this boarding school, the types of children are categorized more positively, namely the all-help category, auxiliary direction, and independent category. This difference in the category of diagnostic labels can reduce the stigma against children with special needs (Grattidge et al., 2023). When categorizing levels remove stigma according to children's abilities after 40 days of observation, children with special needs are still projected to develop according to their circumstances.

Nursing is done with a behavioural approach by forming good behavioural habits, reading book-bibliographic therapy, and practicing social skills (Badi'ah et al., 2021) Nursing uses a reward and punishment approach—nurturing and giving activities based on worship time five times daily. The parenting process also involves are community around the Islamic boarding school. In addition to academic and religious learning taught by caregivers in Islamic

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Commented [vp28]: Dijabarkan saja referensi dari siapa Commented [AS29R28]: Sudah diperbaiki. boarding schools, the community provides examples of learning such as life skills, raising livestock, gardening, and interacting in social environments.

Assessment methods and psychological interventions in mental health services are based on the spiritual understanding of Islamic boarding school leaders and caregivers. Psychological intervention is provided through habitual therapy and therapy with a biopsychological approach by providing counselling and direction to children with special needs when undergoing massage, tap and wipe therapy.

Conclusion and Recommendation

This paper presents the findings of a spiritual and community-based mental health service model. Spiritually-based mental health services are based on religious leaders' understanding of the whereabouts of the children. They are also seen as perfect human figures but have special needs and treatment in parenting. Based on this understanding, to reduce negative stigma for the children with special needs using favourable terms such as the all-in hand category, assisted direction category, and independent categories. The process of nursing children with special needs is aimed at bringing children closer to God by doing activities between waiting for worship time. Nursing with this habitual therapy approach can form good behaviour patterns in children with special needs.

Religious leaders carry out community-based mental health services by involving the community around Islamic boarding schools to care for them. In addition to learning about religious knowledge and school lessons, they also learn to garden, livestock, live skills, and community with the community. The results of the observation also showed that children with special needs who live in Islamic boarding schools can adjust to the new habits formed. Children are mostly comfortable and happy to have family care with this spiritual approach.

The assessment methods and psychological interventions provided during the process in mental health and childcare services are based on the level of the child's category and the child's needs in life. This model of nursing and mental health services in Islamic boarding schools can be used as an example of nursing and providing mental health services, especially in rural areas. **Commented [U30]:** Judulnya juga membingungkan, sepintas melihat ditujukan kepada ABK, namun ternyata sampelnya kepada pemuka agama. Atau judulnya digi pengalaman pemuka agama terhadap peran Spiritual an 19 mmunity-Based Mental Health Services for Children with Special Needs

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26 Acknowledgment

The authors would like to thank several parties who have facilitated this study: The Consortium of Indonesian Psychocultural, the Robert Lemelson Foundation, Elemental Productions, and the Give2Asia Foundation.

Author Contribution

M, AK, PBK & HBPM compiles research designs, retrieves data, and conducts data analysis. M focusing on writing the research publications. NS & MA as supervisor guide the research team in reviewing, adjusting and approving the final manuscript.

Conflict of Interest

The author states that there is no conflict of interest in the research, writing, or publication of this study.

42 unding

This work was supported by the Robert Lemelson Foundation, Elemental Productions, and the Give2Asia Foundation.

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References

- Badi'ah, A., Mendri, N. K., Palestin, B., & Nugroho, H. S. W. (2021). The effect of applied behavior analysis on the gross motor development of autistic children. *Open Access Macedonian Journal of Medical Sciences*, 9(T4), 55–59. https://doi.org/10.3889/oamjms.2021.5754
- Bhosale, S., & College, A. M. (2015). Review Article Impact of Spirituality on Mental Health. International Journal of Current Research, 7(05), 16112–16116.
- Boksa, P., Joober, R., & Kirmayer, L. J. (2015). Mental wellness in Canada's aboriginal communities: Striving toward reconciliation. *Journal of Psychiatry and Neuroscience*, 40(6), 363–365. https://doi.org/10.1503/jpn.150309
- Bożek, A., Nowak, P. F., & Blukacz, M. (2020). The Relationship Between Spirituality, Health-Related Behavior, and Psychological Well-Being. *Frontiers in Psychology*, 11(August). https://doi.org/10.3389/fpsyg.2020.01997

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- Dagani, J., Buizza, C., Ferrari, C., & Ghilardi, A. (2023). The role of psychological distress, stigma and coping strategies on help-seeking intentions in a sample of Italian college students. *BMC Psychology*, 11(1), 1–15. https://doi.org/10.1186/s40359-023-01171-w
- Davison, R. C. R., & Smith, P. M. (2018). Quantitative data analyses. In Research Methods in Physical Activity and Health. https://doi.org/10.4324/9781315158501-17
- Eichstedt, J. A., Singh, D., Chen, S., Collins, K. A., & Cawthorpe, D. (2021). Who should be seen when? Establishing wait time benchmarks for children's mental health. *Canadian Journal of Community Mental Health*, 40(1), 105–122. https://doi.org/10.7870/cjcmh-2021-008
- Eyllon, M., Vallas, S. P., Dennerlein, J. T., Garverich, S., Weinstein, D., Owens, K., & Lincoln, A. K. (2020). Mental Health Stigma and Wellbeing Among Commercial Construction Workers: A Mixed Methods Study. *Journal of Occupational and Environmental Medicine*, 62(8), E423–E430. https://doi.org/10.1097/JOM.000000000001929
- Franco, V. (2023). School inclusion of children with disabilities in Mozambique: The teachers' perspective. *Frontiers in Education*, 8(April), 1–9. https://doi.org/10.3389/feduc.2023.1058380
- Goncąlves, J. P. B., Lucchetti, G., Menezes, P. R., & Vallada, H. (2015). Religious and spiritual interventions in mental health care: A systematic review and meta-analysis of randomized controlled clinical trials. *Psychological Medicine*, 45(14), 2937–2949. https://doi.org/10.1017/S0033291715001166
- Gone-Re-imagining-mental-health-services-for-American-Indian-communities-Centering.pdf. (n.d.).
- Grattidge, L., Hoang, H., Mond, J., Lees, D., Visentin, D., & Auckland, S. (2023). Exploring Community-Based Suicide Prevention in the Context of Rural Australia: A Qualitative Study. *International Journal of Environmental Research and Public Health*, 20(3). https://doi.org/10.3390/ijerph20032644
- Guntur, A. (2021). Persepsi Dan Stigma Penyandang Disabilitas Pada Siswa-Siswi Sekolah Menengah Atas. Media Husada Journal Of Nursing Science, 1(1), 73–78. https://doi.org/10.33475/mhjns.v1i1.2
- Hamka, Ni'matuzahroh, & Mein-Woei, S. (2020). Spiritual Well-Being and Mental Health of Students in Indonesia. 395(Acpch 2019), 149–152. https://doi.org/10.2991/assehr.k.200120.032
- He, D., He, L., Yuan, Y., Huang, L., Xiao, Q., Ye, X., & Zhang, J.-E. (2023). Stigma and its correlates among patients with Crohn's disease: A cross-sectional study in China. *International Journal of Nursing Sciences*, 10(3), 318–324. https://doi.org/10.1016/j.ijnss.2023.06.012
- Iannello, N. M., Inguglia, C., Silletti, F., Albiero, P., Cassibba, R., Lo Coco, A., & Musso, P.

(2022). How Do Religiosity and Spirituality Associate with Health-Related Outcomes of Adolescents with Chronic Illnesses? A Scoping Review. *International Journal of Environmental Research and Public Health*, 19(20). https://doi.org/10.3390/ijerph192013172

- Jafari, E., Dehshiri, G. R., Eskandari, H., Najafi, M., Heshmati, R., & Hoseinifar, J. (2010). Spiritual well-being and mental health in university students. *Procedia - Social and Behavioral Sciences*, *5*, 1477–1481. https://doi.org/10.1016/j.sbspro.2010.07.311
- Kourgiantakis, T., Markoulakis, R., Hussain, A., Lee, E., Ashcroft, R., Williams, C., Lau, C., Goldstein, A. L., Kodeeswaran, S., & Levitt, A. (2022). Navigating inequities in the delivery of youth mental health care during the COVID-19 pandemic: perspectives of youth, families, and service providers. *Canadian Journal of Public Health*, 113(6), 806– 816. https://doi.org/10.17269/s41997-022-00670-4
- Kourgiantakis, T., Markoulakis, R., Lee, E., Hussain, A., Lau, C., Ashcroft, R., Goldstein, A. L., Kodeeswaran, S., Williams, C. C., & Levitt, A. (2023). Access to mental health and addiction services for youth and their families in Ontario: perspectives of parents, youth, and service providers. *International Journal of Mental Health Systems*, 17(1), 1–15. https://doi.org/10.1186/s13033-023-00572-z
- Kowalewski, K., McLennan, J. D., & McGrath, P. J. (2011). A preliminary investigation of wait times for child and adolescent mental health services in Canada. *Journal of the Canadian Academy of Child and Adolescent Psychiatry*, 20(2), 112–119.
- Lau-Zhu, A., Anderson, C., & Lister, M. (2023). Assessment of digital risks in child and adolescent mental health services: A mixed-method, theory-driven study of clinicians' experiences and perspectives. *Clinical Child Psychology and Psychiatry*, 28(1), 255–269. https://doi.org/10.1177/13591045221098896
- Liu, Y. (2022). Effects of Reflection on Preschool Teacher Efficacy and Stress Related to Caring for Children with Special Needs. In Asian Journal of Human Services (Vol. 22, pp. 76–87). https://doi.org/10.14391/ajhs.22.76
- Lopez-Carmen, V., McCalman, J., Benveniste, T., Askew, D., Spurling, G., Langham, E., & Bainbridge, R. (2019). Working together to improve the mental health of indigenous children: A systematic review. *Children and Youth Services Review*, 104(February). https://doi.org/10.1016/j.childyouth.2019.104408
- Luetke Lanfer, H., Rossmann, C., & Kargbo, S. I. (2023). Exploring the Contextual Factors of Religious Leader Participation in Health Communication: Evidence from a Qualitative Study in Sierra Leone. *Journal of Religion and Health*, 62(3), 1695–1715. https://doi.org/10.1007/s10943-022-01632-3
- Michaelson, V., King, N., Inchley, J., Currie, D., Brooks, F., & Pickett, W. (2019). Domains of spirituality and their associations with positive mental health: a study of adolescents in Canada, England and Scotland. *Preventive Medicine*, 125(May), 12–18. https://doi.org/10.1016/j.ypmed.2019.04.018
- Moon, J., Kang, S. J., Kwon, Y. D., Song, E. M., & Noh, J. W. (2023). Current status and needs in the primary healthcare system in Yangon, Myanmar: a mixed-method evaluation. *Primary Health Care Research and Development*, 24. https://doi.org/10.1017/S1463423623000178

- Moordiningsih, Rustam, A. M., Sahrah, A., Na'im, R., & Dwidiyanti, A. (2023). Literature Review: Psychospiritual Interventions to Improve the Spiritual Well-Being of Cancer Patient. Atlantis Press SARL. https://doi.org/10.2991/978-2-38476-080-0_7
- Najafi, K., Khoshab, H., Rahimi, N., & Jahanara, A. (2022). Relationship between spiritual health with stress, anxiety and depression in patients with chronic diseases. *International Journal of Africa Nursing Sciences*, 17(June), 100463. https://doi.org/10.1016/j.ijans.2022.100463
- Oman, D., & Lukoff, D. (2018). Mental Health, Religion, and Spirituality. Religion, Spirituality and Health: A Social Scientific Approach, 2, 225–243. https://doi.org/10.1007/978-3-319-73966-3_13
- Park, C. L., & Slattery, J. M. (2012). Spirituality, Emotions, and Physical Health. *The Oxford Handbook of Psychology and Spirituality*, May 2018, 379–387. https://doi.org/10.1093/oxfordhb/9780199729920.013.0024
- Saari, E. M., Aziz, N. A. A., Rasli, R. M., Mustafa, M. C., & Yassin, S. M. (2022). Early Childhood Education of Children with Special Needs in Malaysia: A Focus on Current Issues, Challenges, and Solutions. World Journal of English Language, 12(2), 274–281. https://doi.org/10.5430/wjel.v12n2p274
- Sahrah, A., Dwidiyanti, A., & Moordiningsih, M. (2023). Improvement of Spiritual Well-Being in Students Experiencing Quarter Life Crisis through Solution-Focus Brief Therapy. Academic Journal of Interdisciplinary Studies, 12(4), 305–312. https://doi.org/10.36941/ajis-2023-0116
- Sastra, L., Büssing, A., Chen, C. H., Yen, M., & Lin, E. C. L. (2021). Spiritual Needs and Influencing Factors of Indonesian Muslims With Cancer During Hospitalization. *Journal* of Transcultural Nursing, 32(3), 212–220. https://doi.org/10.1177/1043659620908926
- Satrio Budi Wibowo dan Siti Nurlaila. (2017). Self Esteem Pada Anak Berkebutuhan Khusus Di Sekolah Inklusi. *Intuisi : Jurnal Psikologi Ilmiah*, 8(1), 30–34.
- Sheikhan, N. Y., Henderson, J. L., Halsall, T., Daley, M., Brownell, S., Shah, J., Iyer, S. N., & Hawke, L. D. (2023). Stigma as a barrier to early intervention among youth seeking mental health services in Ontario, Canada: a qualitative study. *BMC Health Services Research*, 23(1), 1–12. https://doi.org/10.1186/s12913-023-09075-6
- Valente, T. W., & Pumpuang, P. (2007). Identifying opinion leaders to promote behavior change. *Health Education and Behavior*, 34(6), 881–896. https://doi.org/10.1177/1090198106297855
- Wakimizu, R., Fujioka, H., Nishigaki, K., & Matsuzawa, A. (2018). Family empowerment and associated factors in Japanese families raising a child with severe motor and intellectual disabilities. *International Journal of Nursing Sciences*, 5(4), 370–376. https://doi.org/10.1016/j.ijnss.2018.09.006
- Warren, R., Young, L., Carlisle, K., Heslop, I., & Glass, B. (2023). A systems approach to the perceptions of the integration of public health into pharmacy practice: A qualitative study. *Exploratory Research in Clinical and Social Pharmacy*, 10(May), 100279. https://doi.org/10.1016/j.rcsop.2023.100279

- Wattis, J. (2017). Spirituality and Mental Health. *Spiritually Competent Practice in Health Care*, 7(March), 115–128. https://doi.org/10.1201/9781315188638-8
- WHO. (2010). Monitoring the Building Blocks of Health Systems : a Handbook of Indicators and. 110.
- Widhiati, R. S. A., Malihah, E., & Sardin, S. (2022). Dukungan Sosial dan Strategi Menghadapi Stigma Negatif Anak Berkebutuhan Khusus Dalam Pendidikan. Jurnal Paedagogy, 9(4), 846. https://doi.org/10.33394/jp.v9i4.5612
- World Health Organization. (2020). Monitoring action on Social Determinants of Health: The web-based consultation and revised framework. February. https://cdn.who.int/media/docs/default-source/documents/social-determinants-of-health/actionsdhmonitoring_web-consultantion-report-with-revised-framework.pdf?sfvrsn=618db0a4_5&download=true

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