

## **ANALYSIS OF THE EFFECTIVENESS AND IMPACT OF THE IMPLEMENTATION OF SRQ-20 IN SCREENING EMOTIONAL MENTAL DISORDERS IN OUTPATIENTS AT THE TARATARA COMMUNITY HEALTH CENTER**

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### **ABSTRACT**

Emotional mental disorders (EMDs) are one of the mental health issues with a steadily increasing prevalence and significant impact on quality of life and productivity in society. Early detection through screening is a strategic step in managing EMDs, particularly in primary healthcare settings such as community health centers (Puskesmas). One of the most widely used tools is the Self-Reporting Questionnaire (SRQ-20), which is valid and reliable for quickly and simply identifying EMG symptoms. This study aims to analyze the effectiveness and impact of EMG screening using the SRQ-20 among outpatients at the Taratara Community Health Center. This study employed a quantitative, observational, cross-sectional design, using the SRQ-20 questionnaire and medical records. Data analysis was conducted using descriptive and inferential methods. The study revealed a highly significant association between the effectiveness of SRQ-20 implementation and the impact perceived by patients ( $p = 0.000$ ). Of the 84 respondents who rated the screening as effective, 96.4% also reported feeling its impact, while among the 11 respondents who rated it as ineffective, 63.6% reported not feeling its impact. These findings indicate that the higher the perceived effectiveness of the screening, the greater the positive impact on patients' ability to manage GME. There is a highly significant relationship between the effectiveness of SRQ-20 implementation and the impact felt by patients. The implementation of GME screening using SRQ-20 has proven effective, with tangible impacts on early detection, increased awareness, and improved management of mental health disorders in primary healthcare services.

Keywords: Emotional Mental Disorders, SRQ-20, Screening, Effectiveness, Impact, Community Health Centers.

### **1. Introduction**

Mental health disorders (MHD) are one of the most common mental health issues faced by people worldwide, both in developing and developed countries. MHD encompasses various psychological conditions such as anxiety, depression, severe stress, and mood disorders that disrupt an individual's daily activities and social functioning. According to data from the 2018 Riskesdas survey, the prevalence of EMIs among Indonesians aged 15 years and older reached 9.8%, indicating that over 19 million people are affected. These EMIs were measured based on symptoms of depression and anxiety using the Self-Reporting Questionnaire, and this figure tends to increase alongside the growing complexity of life pressures (Ministry of Health of the Republic of Indonesia, 2018).

The high prevalence of GME has a significant impact on individuals' quality of life and on society's productivity. Untreated GME can progress to severe mental disorders and even increase the risk of suicide. Additionally, the economic burden increases due to reduced productivity and rising long-term care costs. Therefore, early detection and appropriate management of GME are crucial steps in maintaining public health stability, as emphasized by the WHO (2022).

Primary health care services such as community health centers (Puskesmas) play a strategic role in screening and managing GME. As the frontline of health care, Puskesmas must be able to detect mental disorders early in outpatients. However, in practice, many patients with GME symptoms go undetected because healthcare workers focus more on visible physical

complaints (Triyono, 2020). This highlights the need for a systematic and integrated screening approach to address this gap.

One approach to identifying GME is screening with the Self-Reporting Questionnaire (SRQ-20), an instrument developed by the WHO. The SRQ-20 has been widely used in various countries, including Indonesia, due to its high validity and reliability in detecting GME quickly and efficiently. This instrument consists of 20 questions that describe psychological and somatic symptoms that may indicate GME (Safitri, D. D., & Widodo, A., 2024).

In Indonesia, the SRQ-20 has been adopted in primary care settings, including community health centers (Puskesmas). However, its implementation still faces various challenges, ranging from limited trained personnel, short consultation time, to high administrative burden (Handayani et al., 2024). Therefore, evaluating the effectiveness and impact of this screening tool is crucial for improving the quality of mental health services at the primary care level.

The effectiveness of GME screening can be seen from the system's ability to improve GME case detection, speed up treatment, and reduce the severity of emotional disorders. Effective screening will produce accurate data and help health workers make the right clinical decisions (Mardhiyah et al., 2019). The success of screening is also determined by patient involvement and the quality of communication between patients and medical personnel. In addition to effectiveness, it is important to assess the impact of GME screening on the management of emotional mental disorders, both from the perspective of healthcare providers and patients. These impacts may include changes in service delivery processes, improved access to psychological services, and the sustainability of interventions. Evaluating these impacts is crucial to ensure that screening is not merely an administrative procedure but truly contributes to comprehensive GME case management.

SRQ-20 as a screening tool is highly effective in quickly and simply detecting symptoms of emotional mental disorders and can be used by healthcare professionals. Its effectiveness is evident in its ability to screen individuals who require further attention, even before symptoms develop into severe mental disorders. Additionally, the systematic use of the SRQ-20 not only accelerates early detection but also promotes greater patient awareness of their mental health. As a result, SRQ-20 serves not only as an initial diagnostic tool but also as an empowerment tool that encourages active patient involvement in the management and recovery of their mental health conditions.

The Taratara Community Health Center is one of the primary care facilities that has implemented GME screening as part of its efforts to improve mental health services. However, the effectiveness and impact of this screening on GME management in the area have not been widely studied. Therefore, this study is important for evaluating the extent to which implementing GME screening has produced tangible results in outpatient care. GME management requires a multidisciplinary and sustainable approach. After patients are identified through screening, follow-up services such as basic counseling, psychosocial therapy, or referral to mental health specialists must be available. However, in many health centers, limitations in human resources and infrastructure pose significant challenges in the continued management of patients with GME (Inkri, 2024).

From the patient's perspective, systematic screening can also increase their awareness of their mental condition. Patients who are aware of their psychological condition from the outset tend to be more open to further therapy or medical treatment (Adrian, 2024). In addition, prompt treatment can prevent worsening of symptoms and reduce the likelihood of broader social and economic complications.

Cultural, social, and societal stigma toward mental disorders also need to be considered in evaluating the effectiveness of screening. In many areas, including the Taratara Community Health Center, patients are often reluctant to express their emotional concerns for fear of being

ostracized. This requires health workers to have communication skills and empathy in encouraging patients to participate in GME screening (Adrian, 2024).

This study aims to analyze how the implementation of GME screening impacts the process of identifying and managing emotional mental disorders. The evaluation focuses on the effectiveness of the screening tool, patient responses, and the relationship between screening results and the interventions provided. Using a quantitative analytical design, this study will provide an objective overview of screening effectiveness in the context of community health center services. Additionally, the findings of this study are expected to serve as a basis for recommendations to the Health Department and Puskesmas managers in strengthening community-based mental health programs. These findings can be used to improve the screening system, enhance healthcare worker training, and adapt mental health service policies at the primary care level to align with local conditions.

Improving the effectiveness of GME screening is expected to enable earlier detection of emotional mental disorders on a wider scale and provide the community with easier, faster, and more efficient access to mental health services. This will significantly support Indonesia's efforts to achieve the Sustainable Development Goals (SDGs), particularly in the mental health and well-being indicator (SDG 3) (Goodwin, J., & Zaman, U., 2023).

To measure the success of GME screening using SRQ-20, indicators are needed that assess effectiveness, impact, and comprehensive management of mental health disorders. The effectiveness of screening can be seen from the tool's ability to accurately detect early symptoms of GME, speed up treatment, and improve patients' quality of life by reducing the risk of serious complications. The impact of screening is also important to assess through increased awareness and access to mental health services, reduced social stigma, and data supporting more targeted service planning and the comprehensive integration of psychological and medical care. Additionally, the success of post-screening management is a key indicator, including the provision of psychotherapy, appropriate medication use, intensive care for severe cases, and social support and self-care involving healthy lifestyle practices. This holistic management ensures sustainable and effective follow-up, preventing deterioration of the condition and supporting patient recovery. By integrating these three aspects, the study aims to provide an objective overview of the effectiveness of SRQ-20 screening in improving detection, management, and the quality of mental health services at the primary care level.

Therefore, it is important to conduct scientific Research examining the effectiveness and impact of GME screening, particularly in the context of outpatient services at community health centers. This Research not only contributes to the development of public health science but also directly improves the community's quality of life through better mental health services.

## **2. Methodology**

### **A. Research Design**

This study used a quantitative, cross-sectional, observational design to evaluate the effectiveness of Emotional Mental Disorder (EMD) screening using the SRQ-20 among outpatients at the Taratara Community Health Center. Data were collected through the SRQ-20 questionnaire, additional questionnaires, and medical records to assess early detection, treatment, and management of EMD. Analysis was conducted using descriptive and inferential methods to examine the effectiveness and impact of screening on EMG management, as well as to test the validity and reliability of the SRQ-20.

## **B. Data Collection Procedures**

### **Data Type**

#### **a. Primary Data**

Primary data are collected directly from respondents (outpatients with mild mental disorders at the Taratara Community Health Center) using research instruments: the SRQ-20 (Self-Reporting Questionnaire-20), an effectiveness questionnaire, and a questionnaire on the impact of GME management.

#### **b. Secondary Data**

Secondary data are obtained from medical records or patient documentation at Taratara Health Center and used to supplement or support primary data. This data may include patient identification, visit history, and medical diagnoses related to mild mental disorders.

Data collection was conducted in a structured manner with permission from the Taratara Community Health Center. Respondents were selected based on inclusion criteria, namely outpatients aged  $\geq 18$  years who were willing and able to complete the questionnaire. Primary data were collected through questionnaires on effectiveness, impact, GME management, and demographic data, while secondary data were derived from medical records documenting treatment history and follow-up. Data collection was conducted at the health center with the assistance of enumerators, after respondents received an explanation of the study and signed an informed consent form. The collected data were then sorted and coded for quantitative analysis.

After the patient completes the questionnaire, the researcher scores it and interprets the results according to the SRQ-20 scoring standards. Based on the screening results, the following follow-up actions are taken:

- a. If the score indicates a possibility of mild to moderate emotional mental disorder, the patient is provided with brief counseling by a healthcare professional to help reduce symptoms and receive education on mental health.
- b. If the score indicates a possibility of severe emotional mental disorder, the patient is referred to a doctor for further examination and intervention as clinically indicated.

### **Data Analysis**

The data analysis used in this study included univariate and bivariate analyses. Univariate analysis aims to describe each variable's characteristics in terms of frequency and percentage. Meanwhile, bivariate analysis was used to determine the relationship between the application of SRQ-20 (disturbance and non-disturbance categories) and the variables.

#### **1. Univariate Analysis**

Univariate analysis was conducted to describe each variable independently to determine data distribution. The variables analyzed included respondent characteristics (age, gender, education, and occupation), GME screening results based on SRQ-20 scores, and respondents' perceptions of the effectiveness and impact of screening implementation. Data were presented as frequency tables, percentages, and, for numerical data, mean values and standard deviations. This analysis provided an overview of the respondents' conditions and the distribution of each variable.

#### **2. Bivariate Analysis**

To analyze the relationship between these categorical variables, the Chi-Square ( $\chi^2$ ) test was used. The Chi-Square test was performed to test the significance of the relationship between two categorical variables. The test results were considered significant if the p-value

was  $< 0.05$ . This analysis aimed to determine the effectiveness of the SRQ-20 as a screening tool for emotional mental disorders.

### 3. Results

#### 1. Validity and reliability test

Table 1. Data validity test

No	Variable	r-table	Calculated r	Description
<b>Effectiveness</b>				
1	Effectiveness 1	0.444	0.710	Valid
2	Effectiveness 2	0.444	0.755	Valid
3	Effectiveness 3	0.444	0.802	Valid
4	Effectiveness 4	0.444	0.768	Valid
<b>Impact</b>				
1	Impact 1	0.444	0.799	Valid
2	Impact 2	0.444	0.725	Valid
3	Impact 3	0.444	0.745	Valid
4	Impact 4	0.444	0.780	Valid

The validity test was conducted using the Pearson product-moment correlation coefficient with a sample size of 20 respondents ( $df = 18$ ). The criterion is that if the calculated r-value is greater than the table r-value (0.444) at the 5% significance level, then each variable item is considered valid.

#### Reliability test

After conducting validity testing on the effectiveness and impact items of GME management, all of which showed correlation values (r-calculated) greater than the r-table (0.444) and were statistically significant ( $p < 0.05$ ), reliability testing was conducted using the for to ensure internal consistency among the items.

The reliability test results using Cronbach's Alpha yielded a value of 0.861, which exceeds the minimum reliability threshold of 0.70. This value indicates that the variables tested for validity also have a strong relationship with each other, consistently measuring the same construct. Therefore, based on the combination of validity and reliability results, it can be concluded that the Research instrument has excellent measurement quality, as it is not only able to measure accurately (valid) but also consistently (reliable), making it suitable for use in Research on the effectiveness analysis of the implementation of SRQ-20 in screening for emotional mental disorders.

#### 2. Characteristics of respondents

Table 2. *Frequency Distribution of Respondent Characteristics in the Study (N= 95)*

No	Characteristics	Frequency (f)	Percentage
	Age		
	18-25 years	20	21.1
	> 25-44	51	53.7
	> 44-60 years	24	25.3
2	Gender		
	Male Female	33	34.7
		62	65.3

3	Education		
	Elementary,	4	4.2
	Middle, and	15	15.8
	High School	51	53.7
	University	25	26.3
4	Occupation		
	Farmer Self-employed	20	21.1
	Private sector employee	22	23.2
	Civil	16	16.8
	servant/Military/Police	16	16.8
	Other	21	22.1

Based on Table 4.2, the Research results indicate that the majority of respondents are in the 25–44 years age group, accounting for 53.7%. This group is considered the productive age group, which is more susceptible to emotional and mental disorders due to work-related stress, family responsibilities, and social pressure. Meanwhile, the 18–25 age group accounts for 21.1%, and the 44–60 age group makes up 25.3%, both of which also have a potential risk of mental disorders, although in smaller numbers. This distribution indicates that the productive age group is a priority for early detection of mental disorders in primary care services such as community health centers. The productive age group often faces important life transitions, such as career development, marriage, and child-rearing, which can lead to psychological stress. Therefore, this age group requires supportive interventions to prevent mental health issues from escalating into more serious conditions.

The majority of respondents in this study were women (65.3%), while men accounted for 34.7%. The high number of women may be because women tend to be more open about emotional complaints and more active in accessing health services. In addition, biological, social, and dual roles in daily life also contribute to the high vulnerability of women to emotional and mental disorders. This phenomenon also reflects gender disparities in the prevalence of emotional mental disorders, with women generally being at higher risk of anxiety and depression. Therefore, mental health interventions in primary care services need to consider gender sensitivity to be more effective in reaching women.

Most respondents had a high school education (53.7%), followed by college (26.3%), junior high school (15.8%), and elementary school (4.2%). Higher education enables respondents to more easily understand and complete the SRQ-20 instrument independently. Educational level is also associated with stress management skills and access to health information, although stressors can still be experienced by individuals at all educational levels. This indicates that mental health education at the secondary and higher education levels could be an effective strategy for increasing early awareness of symptoms of emotional mental disorders. With good health literacy, it is hoped that the public will recognize symptoms more quickly and seek help from healthcare facilities.

Respondents in this study mostly worked as entrepreneurs (23.2%) and farmers (21.1%), followed by other categories (22.1%), private employees (16.8%), and civil servants/military/police (16.8%). Informal jobs such as self-employed and farmers have high levels of economic uncertainty, which can increase the risk of emotional and mental disorders. The type of work is closely related to the level of stress experienced, the burden of responsibility, and financial stability, which affect a person's mental health. These findings underscore the importance of social support and community-based mental health programs, particularly for informal workers. Interventions focused on strengthening stress-coping mechanisms and on simple financial management can help reduce the psychological pressure experienced by this group.

### 3. Univariate analysis

Table 3. Frequency Distribution of Respondents Based on SRQ Questions

No	Question	Answer			
		Yes		No	
		n	%	n	%
1	Do you often experience headaches?	64	67.37	31	32.63
2	Have you lost your appetite?	61	64.2	34	35.79
3	Do you have trouble sleeping?	72	75.79	23	24.21
4	Do you easily feel afraid?	64	67.37	31	32.63
5	Do you feel anxious, tense, or worried?	61	64.2	34	35
6	Do your hands shake?	70	73.68	25	26.32
7	Do you have digestive problems?	76	80	19	20
8	Do you find it difficult to think clearly?	76	80	19	20
9	Do you feel unhappy?	66	69.47	29	30.53
10	Do you cry more often?	70	73.68	25	26.32
11	Do you find it difficult to enjoy your daily activities every day?	67	70.53	28	29.47
12	Do you find it difficult to make making decisions?	63	66.32	32	33.68
13	Are your daily activities/tasks neglected?	71	74.74	24	25
14	Do you feel unable to play a role in life?	67	70.53	28	29.47
15	Have you lost interest in many things?	71	74	24	25
16	Do you feel worthless?	61	64.21	34	35.79
17	Have you ever thought about ending your life?	3	3.2	92	96.8
18	Do you feel tired all the time?	66	69.47	29	30.5
19	Do you feel unwell in your stomach?	69	72.63	26	27.3
20	Do you get tired easily?	71	74	24	25

Based on the results of univariate analysis of 20 items in the Self-Reporting Questionnaire (SRQ-20) instrument, the majority of outpatients at the Taratara Community Health Center showed symptoms that pointed to emotional mental disorders, both in the form of physical (somatic) complaints, psychological complaints, and decreased social functioning.

Somatic (physical) symptoms are quite prominent, with a high percentage, such as Digestive disorders and difficulty thinking clearly, experienced by 80.00% of respondents. Poor sleep (75.79%), trembling hands (73.68%), stomach discomfort (72.63%), and easy fatigue (74.74%) are also commonly reported. These symptoms suggest a high level of stress among patients, manifesting as physical complaints.

Psychological symptoms such as feeling unhappy (69.47%), easily frightened (67.37%), anxious and tense (64.21%), and feeling worthless (64.21%) indicate the presence of affective disorders and anxiety that are quite widespread among respondents. s of crying more frequently (73.68%) and loss of interest (74.74%) are also strong indicators of mild to moderate depression.

From a social and cognitive perspective, the following findings were observed: difficulty making decisions (66.32%), neglecting daily activities (74.74%), and feeling unable to fulfill roles (70.53%), indicating a decline in the ability to perform daily roles and functions. Interestingly, only 3.20% of respondents reported having thoughts of ending their lives, significantly lower than other symptoms. This suggests that while many respondents experience emotional distress, the severity or intensity of these symptoms has not yet reached

a critical stage where individuals feel hopeless and consider ending their lives. However, caution is still warranted, as even one case falls into the high-risk category and requires serious attention.

Overall, the SRQ-20 proved effective in identifying symptoms of emotional mental disorders in outpatients at the Taratara Community Health Center. Most respondents answered "Yes" to more than half of the questions, indicating a need for more attention to mental health at the primary care level. These data also support the importance of integrating emotional mental health screening services into routine services at community health centers.

**Table 4. Frequency Distribution of Respondents Based on SRQ Categories**

No.	Effectiveness Indicator	F	%
1	Mild	4	44.2
2	Moderate	50	52.6
3	Weight	3	3.
<b>Total</b>		<b>95</b>	<b>10</b>

Based on the screening results using SRQ-20, out of 95 respondents, most were in the moderate category, totaling 50 people (52.6%). Respondents in the mild category numbered 42 (44.2%), while those in the severe category numbered only 3 (3.2%).

This distribution shows that the majority of outpatients at the Taratara Community Health Center experienced mild to moderate emotional and mental disorders. This condition highlights the importance of counseling, education, and early detection in primary care to prevent worsening symptoms. Meanwhile, although the number of severe cases is relatively small, their presence still requires special attention as they require further medical treatment. This finding also shows that the SRQ-20 instrument is quite effective in identifying variations in the severity of emotional mental disorders among respondents.

**Table 5. Frequency Distribution of Respondents Based on Effectiveness Indicators**

No.	Effectiveness Indicator	Effective		Not	
		n	%	n	%
1.	Does the SRQ-20 screening help Detect early symptoms of emotional mental disorders?	95	100	0	0
2	Did you receive immediate treatment Or follow up after the screening results are available?	86	90	9	9.5
3	Did this screening contribute to improving your quality of life?	90	94	5	5.3
4	Did using the SRQ-20 help prevent the worsening of your mental condition?	95	100	0	0

Based on the analysis of the effectiveness indicators of the SRQ-20 implementation among outpatients at the Taratara Community Health Center, the majority of respondents considered this tool very effective in detecting and managing emotional disorders. A total of 95 (100%) respondents stated that the SRQ-20 screening helped them in the early detection of symptoms of emotional mental disorders they experienced. This indicates that all respondents found the SRQ-20 to be an appropriate initial identification tool. Furthermore, 86 (90.0%) respondents reported receiving immediate treatment or follow-up after their screening results were obtained, whereas only 9 (9.5%) did not receive direct follow-up. This indicates that the implementation of the SRQ-20 was followed by sufficiently responsive medical or counseling interventions from healthcare providers. Most respondents also reported positive impacts on

their quality of life, with 90 (94.7%) acknowledging that the screening contributed to improved quality of life, both in terms of mental health and overall well-being.

Meanwhile, only 5 (5.3%) have not yet felt these effects directly. Furthermore, all respondents, 95 (100%), also stated that the use of the SRQ-20 helped prevent the worsening of their mental health conditions. This confirms that the SRQ-20 is not only effective as a detection tool but also plays a role in preventing more severe emotional and mental disorders.

Table 6: Frequency Distribution of Respondents Based on Effectiveness

No	Variable	Frequency (f)	Percentage
	Not effective	1	11
2.	Effective	8	88.4
	<b>Total</b>	<b>95</b>	<b>100</b>

Based on the table above, most respondents (84, 88.4%) considered the implementation of SRQ-20 for screening for emotional mental disorders at the Taratara Community Health Center to be effective. Meanwhile, only 11 respondents (11.6%) rated the implementation as ineffective. This indicates that the SRQ-20 instrument is well-received and considered beneficial in identifying early symptoms of emotional mental disorders. The high perceived effectiveness also suggests that the SRQ-20 is suitable for use in primary care services, as it is easy to understand and can be completed independently by patients.

Table 7. Frequency Distribution of Respondents Based on Impact

No.	Impact Indicators	Impact		No	
		n	%	n	%
1.	Does the SRQ-20 screening increase Your awareness of the importance of mental health?	95	100	0	0
2.	Do you feel that your access to mental health services has become easier after screening?	94	98.	1	1
3.	Does screening make you feel more open or less embarrassed to talk about mental health?	85	89.5	10	10
4.	Did this screening help you understand where to seek help if you experience mental health issues?	91	95.8	4	4

The results of the impact indicator analysis show that the implementation of SRQ-20 had a significant positive effect on outpatients at the Taratara Community Health Center in terms of awareness, access, openness, and understanding of mental health. All respondents (95, 100%) stated that the SRQ-20 screening increased their awareness of the importance of maintaining mental health. This indicates that the tool not only functions as a screening tool but also as an effective educational tool. Additionally, 94 (98.9%) respondents felt that their access to mental health services became easier after participating in the screening, while only 1 (1.1%) did not experience such ease. This indicates that the SRQ-20 helps open the door for patients to connect with available psychological or psychiatric services.

Regarding openness, 85 (89.5%) respondents stated that the screening made them feel more open and less ashamed to discuss mental health issues, while 10 (10.5%) still felt uncomfortable. This is an important impact because stigma surrounding mental health often

serves as a major barrier for individuals seeking help. Finally, 91 (95.8%) respondents acknowledged that the screening helped them understand where to seek help if they experienced mental health issues, while only 4 (4.2%) did not have a complete understanding of this. This demonstrates that the SRQ-20 also helps direct patients to appropriate sources of assistance.

Table 8. *Frequency Distribution of Respondents Based on Impact*

No	Variable	Frequency (f)	Percentage
1	No impact	1	1
2.	Impact	8	89.5
	<b>Total</b>	<b>85</b>	<b>100.0</b>

Based on the table above, it shows that most respondents, namely 85 people (89.5%), stated that the implementation of SRQ-20 had an impact on the screening process for emotional mental disorders. Meanwhile, only 10 respondents (10.5%) reported no impact. These findings indicate that the use of the SRQ-20 is not only considered effective but also has a tangible impact on increasing awareness and early identification of emotional mental health conditions among outpatients. This reinforces the importance of integrating mental health screening into primary care services at healthcare facilities such as community health centers.

#### 4. Bivariate analysis

Table 9. *Relationship between Effectiveness and Impact of GME Management*

History SC	Impact				Total	p-alue
	Not Impact		Impact			
	n	%	n	%		
Not effective	7	63.6	4	36.4	11	0.000
Effective	3	3.6	81	96.4	84	
<b>Total</b>	<b>10</b>	<b>10.5</b>	<b>85</b>	<b>89.5</b>	<b>89.5</b>	

Based on Table 4.9, the bivariate analysis indicates a highly significant relationship between the effectiveness of SRQ-20 implementation and the impact on patients ( $p = 0.000$ ;  $p < 0.05$ ). Of the 11 respondents who rated SRQ-20 as ineffective, the majority (63.6%) also stated that its implementation had no impact. Conversely, among the 84 respondents who rated the SRQ-20 as effective, nearly all (96.4%) reported experiencing its impact. This indicates that perceptions of effectiveness are strongly correlated with the experience of benefits from using the SRQ-20. Thus, the higher the perceived effectiveness of the SRQ-20 implementation, the greater the likelihood that respondents will experience its benefits and positive impacts.

These findings confirm that the success of SRQ-20 implementation depends not only on the instrument itself, but also on how screening results are followed up through counseling, education, and medical referral when necessary. With appropriate intervention, SRQ-20 can function optimally as an early detection tool and have a real impact on raising awareness and improving the management of emotional disorders in primary care.

Table 10. *Linear Regression Analysis*

<i>Model</i>	<i>Unstandardized Coefficients</i>		<i>Standardized</i>	<i>R</i> <i>(Square)</i>	<i>Sig.</i>
	<i>B</i>	<i>Std. Error</i>	<i>Beta</i>		
<i>Constant</i>	0.364	0.073			0.000
<i>Category Effective</i>	0.601	0.078	0.626	0.392	0

The results of the simple linear regression test indicate that there is a significant influence between the effectiveness of SRQ-20 implementation (X) and the impact (Y) on outpatients at the Taratara Community Health Center. Based on the SPSS output, a significance value of 0.000 (<0.05) was obtained, indicating that effectiveness significantly influences impact. The coefficient of determination (R<sup>2</sup>) of 0.392 indicates that 39.2% of the variation in impact can be explained by effectiveness, while other variables outside the model account for the remaining 60.8%. The simple linear regression equation obtained is  $Y = 0.364 + 0.601X$ , indicating that a 1-unit increase in effectiveness increases the impact score by 0.601 units.

These results confirm that SRQ-20's effectiveness significantly contributes to patients' positive impact, although it is not the only determining factor. This means that the success of SRQ-20 implementation still needs to be supported by other variables, such as counseling quality, family support, socioeconomic conditions, and healthcare workers' skills in providing follow-up care. Therefore, optimizing screening results should not only focus on the instrument but also on the supporting healthcare system.

## 4. Discussion

### 1. Effectiveness

The effectiveness of a screening instrument in health services is assessed by the extent to which it achieves its intended objectives: detecting a condition early with accuracy, speed, and user acceptability. According to Notoatmodjo's (2018) theory of health program evaluation, an intervention is considered effective if its outcomes align with the initial objectives and provide tangible benefits to the target population. In the context of emotional mental disorders, an effective screening tool must be able to identify symptoms early and encourage patients to undergo further examinations or receive necessary interventions. One widely used instrument is the SRQ-20, developed by the WHO.

The results of the study indicate that the implementation of the SRQ-20 as a screening tool for emotional mental disorders at the Taratara Community Health Center was considered highly effective by the majority of respondents. A total of 95 (100%) respondents stated that the SRQ-20 helped them in detecting early symptoms of emotional mental disorders that they experienced. These findings indicate that no respondents felt disadvantaged or unassisted by the use of this tool, indicating a very high level of acceptance of the SRQ-20 instrument. Additionally, 84 respondents (88.4%) rated the implementation of the SRQ-20 as effective, while 11 respondents (11.6%) rated it as ineffective. The high level of effectiveness indicates that the SRQ-20 can serve as a reliable tool in primary healthcare, particularly in the early detection of mental disorders.

These findings are consistent with the Research by Prasetyo et al. (2021), which found that the SRQ-20 is effective for initial screening of mental disorders in community health centers due to its high sensitivity and specificity. This reinforces that the SRQ-20's effectiveness is not only demonstrated in this study but also supported by previous studies in

similar contexts. Furthermore, regarding the direct impact of screening, 86 respondents (90.5%) reported receiving treatment or follow-up immediately after screening, while only nine respondents (9.5%) did not receive immediate follow-up. These findings indicate that the SRQ-20 is not only effective in initial identification but also promotes a more responsive service system, whether through referrals, counseling, or other medical interventions.

The correlation between screening results and health worker responses indicates that the system at the Taratara Community Health Center has established a responsive emotional mental health service mechanism. This is particularly important in the context of community-based health services, as early detection and treatment can be crucial factors in preventing psychological disorders from developing into more severe or chronic conditions. Ninety respondents (94.7%) also acknowledged that using the SRQ-20 had a positive impact on their quality of life. These impacts included increased self-understanding, improved ability to control emotions, and readiness to seek professional help if needed. Only five respondents (5.3%) reported no direct impact, which may have been influenced by differences in symptom severity, access to follow-up services, or other personal factors. However, all respondents (100%) stated that the screening helped them prevent the worsening of their mental health condition. This demonstrates that the SRQ-20 is not only a valuable initial diagnostic tool but also has significant promotional and preventive value. In communities where knowledge about the importance of mental health may still be limited, the availability of tools like the SRQ-20 is crucial in fostering broader awareness and psychological literacy.

The effectiveness of the SRQ-20 implementation cannot be separated from local values and social norms in the Taratara community, especially the Minahasa community. Local cultural characteristics that uphold values of togetherness, mutual cooperation, and social solidarity provide a strong foundation for the acceptance of community-based health services, such as SRQ-20 screening. Additionally, the open culture of sharing stories and accepting advice from healthcare workers strengthens community trust in the screening process. With an empathetic and communicative approach from Puskesmas staff, the implementation of SRQ-20 becomes more easily accepted, as it is not viewed solely as a medical intervention but rather as a form of care for individual psychological well-being. These local values reinforce that the SRQ-20 is not only clinically relevant but also socially contextual, making it a suitable and highly effective tool for implementation within a culturally-based primary healthcare system.

## **2. Impact of GME management**

The impact of an intervention in mental health services can be measured by the extent to which the intervention produces positive changes in patients' knowledge, awareness, and behavior regarding their mental condition. According to the impact evaluation theory by Rossi, Lipsey, and Freeman (2019), as cited in Seberová (2023), a program is considered impactful if there is a significant change in beneficiaries compared to before the intervention was implemented. In the context of mental health screening, impact can include increased awareness, early detection, and faster referral for further treatment.

The implementation of the Self-Reporting Questionnaire (SRQ-20) instrument at the Taratara Community Health Center showed significant effectiveness in detecting cases of emotional mental disorders (EMD) in outpatients. Based on the data obtained, 95 (100%) respondents stated that screening using SRQ-20 increased their awareness of the importance of maintaining mental health. This shows that the SRQ-20 not only serves as a screening tool but also as an educational medium capable of changing public perceptions of mental health. The finding further reinforces the effectiveness of the screening, as 94 respondents (98.9%) reported that their access to mental health services became easier after participating, while only one respondent (1.1%) did not experience such ease. This improved access can be interpreted as a form of success in integrating mental health services into the primary healthcare system,

which has long been a significant challenge in many areas, particularly those with limited mental health personnel.

Furthermore, the impact of implementing SRQ-20 can be seen from changes in people's attitudes toward openness in discussing mental health issues. A total of 85 respondents (89.5%) reported feeling more open and less ashamed to discuss mental health issues after undergoing the screening. This is particularly significant, as stigma surrounding mental health disorders remains a major barrier to seeking psychological assistance. This change is closely tied to the SRQ-20, a self-assessment tool, making it more personal, confidential, and comfortable for patients.

These findings are consistent with Research by Prahastuti, N. F. (2023), which showed that the use of SRQ-20 in primary care significantly improved the early detection of mental disorders and reduced patient stigma toward mental health. Thus, SRQ-20 not only accelerates detection but also shifts behavioral norms regarding how the community views and responds to mental health issues. This study also highlights the importance of patients' understanding of referral pathways and the types of assistance available. A total of 91 respondents (95.8%) stated that they now know where to seek help if they experience mental health issues, indicating that the SRQ-20 contributes to improving mental health literacy.

The local values embraced by the Taratara community, such as a culture of mutual care, openness within small communities, and the importance of balance between body and mind, greatly support the acceptance of this tool. In Minahasa culture, for example, the concept of harmonious living within families and communities creates a more inclusive space for preventive and promotive approaches such as mental health screening. In the Taratara community, there are values of *mapalus* (cooperation), *karai* (empathy), and strong emotional bonds among residents, so that mental health issues are no longer considered taboo when raised in a polite, educational format such as the SRQ-20. This local knowledge indirectly strengthens the community's trust in health workers and increases their willingness to speak openly. Therefore, integrating SRQ-20 into primary care services is not only clinically appropriate but also aligned with the social and cultural norms of the local community, making it more easily accepted and having a broader impact.

### **3. Relationship between the effectiveness and impact of GME management**

The results of this study indicate a highly significant relationship between the perceived effectiveness of the Self-Reporting Questionnaire-20 (SRQ-20) and the impact felt by patients, as reflected in the p-value of 0.000 ( $p < 0.05$ ). Of the 11 respondents who rated the SRQ-20 as ineffective, the majority (63.6%) also stated that its implementation had no meaningful impact. Conversely, of the 84 respondents who rated the SRQ-20 as effective, nearly all (96.4%) reported positive impacts from its implementation. These findings confirm that perceptions of the effectiveness of screening instruments

are directly proportional to the tangible benefits experienced by patients. When patients believe that the SRQ-20 can accurately identify symptoms of emotional disorders, they are more likely to experience increased self-awareness, psychological validation, and readiness to accept further intervention.

Analysis indicates that the effectiveness of SRQ-20 implementation is greatly influenced by how the instrument is used in clinical practice. A 2023 scoping review in BMC Primary Care confirms that the use of structured communication methods with two-way interaction between healthcare providers and patients significantly enhances the effectiveness of mental health screening and patients' quality of life. This indicates that the SRQ-20 cannot be considered effective solely on the basis of statistical validity; real-world success depends on how interactions and communication are conducted (Lukito, M., & Gani, A., 2024).

Additionally, a 2023 rapid review in BMC Health Services Research found that high-quality communication, including empathy, active listening, patient involvement, and

consistent use of easy-to-understand language, improves patient trust and emotional outcomes. When healthcare providers use mindful and empathetic communication, patients feel valued and are more open to sharing underlying emotional symptoms, which, in turn, improves the accuracy and trust in screening results (Lukito, M., & Gani, A., 2024).

An additional qualitative study in BMC Health Services Research (August 2024) also shows that screening success depends on how the procedure is explained in a clear, communicative manner. Patients are more likely to accept screening if they perceive the process as humane and informative, rather than a mere formality. Conversely, limited consultation time and insufficient education can lead to negative perceptions of the screening tool. This is fully consistent with your findings that perceptions of effectiveness are closely correlated with perceptions of impact (Savill et al., 2024).

Based on the evidence above, it is clear that optimal implementation of SRQ-20 requires training for health workers that covers not only technical aspects but also communicative and empathetic skills. Health centers need to apply the principles of relationship-centered care, in which patients are placed at the center of a respectful dialogue, are clearly informed about each stage of the process, and are involved in decision-making. This will help transform the perception of screening from a mere formality into a meaningful experience that can pave the way for better intervention and patient involvement. Furthermore, this effective and empathetic approach is directly correlated with improved mental health outcomes for patients. Open and empathetic communication not only enhances the accuracy of detecting psychological disorders through the SRQ-20 but also provides initial therapeutic effects, such as reducing anxiety, increasing feelings of being valued, and building trust in healthcare services. When patients feel heard and understood, they are more motivated to follow up on referrals or further interventions, resulting in impacts that extend beyond screening outcomes to long-term psychological recovery and well-being.

The results of the simple linear regression indicate a significant relationship between the effectiveness of the SRQ-20 instrument implementation and the impact on outpatients at the Taratara Community Health Center. The significance value of 0.000 ( $<0.05$ ) indicates that screening effectiveness significantly contributes to improving outcomes, such as increased awareness of the importance of mental health, greater courage to open up about emotional symptoms, and greater acceptance of mental health services. The regression equation  $Y = 0.364 + 0.601X$  confirms that a one-unit increase in the effectiveness of SRQ-20 implementation increases the impact score by 0.601 units. This indicates that the more effectively the instrument is implemented—from staff training and question-delivery methods to patient comfort in responding—the greater the positive changes patients feel. These findings are supported by Prasetyo et al. (2021), who stated that the SRQ-20 is effective for initial screening of mental disorders in community health centers due to its high sensitivity and specificity.

The effectiveness of the SRQ-20 implementation in the Taratara community, Minahasa, is greatly influenced by the local culture that highly values cooperation (*mapalus*), empathy (*karai*), and openness in social communication. These values promote acceptance of community-based mental health services, especially when staff use a polite, educational, and empathetic approach, understand the culture, and use the local language. Thus, the SRQ-20 is not only clinically effective but also socially and culturally accepted, making it a relevant and highly useful tool in primary care. However, the effectiveness and impact of the SRQ-20 are not solely determined by the technical superiority or validity of the instrument itself. Data show that the coefficient of determination ( $R^2$ ) is only 0.392, indicating that 60.8% of the variation in impact is still attributable to factors beyond the instrument's effectiveness. One of the main factors influencing this is cultural norms that still view mental health issues as taboo, shameful, or even contrary to one's image of mental and spiritual strength.

In Minahasa culture, mental resilience is often associated with strength of faith, personal resilience, and family support, so a screening approach that is too medical or direct can cause resistance or alienation. Therefore, the success of the SRQ-20 as a screening tool depends heavily on healthcare workers' ability to align their approach with local wisdom. Using familiar language, understanding social and communal dynamics, and presenting screening as an act of care and social concern will enhance community trust in healthcare providers. Participatory strategies that respect local cultural contexts not only help reduce stigma but also foster healthier dialogue about mental health. In the Taratara community, this makes the SRQ-20 not merely an assessment tool but also a means of empowering the community to maintain mental health balance in a harmonious and dignified manner consistent with the local values they hold dear.

## **Conclusion**

The majority of respondents were of working age, predominantly female, had completed high school, and worked as self-employed individuals or farmers. These characteristics indicate a group vulnerable to emotional mental health disorders due to social and economic pressures, and dual roles, making them an important target for early detection in primary healthcare services.

Most respondents considered the implementation of SRQ-20 in the screening process for emotional mental disorders at the Taratara Community Health Center to be effective. This shows that SRQ-20 is well accepted, easy to use, and suitable for primary health care because it can be completed independently by patients.

Most respondents stated that the implementation of SRQ-20 had a positive impact on the screening process for emotional mental disorders. This shows that the use of SRQ-20 can increase awareness and early detection of emotional disorders in patients, reinforcing the importance of integrating mental health screening into basic services. There is a highly significant relationship between the effectiveness of SRQ-20 implementation and the impact felt by patients. Most respondents who rated the SRQ-20 as effective also reported that it had a tangible impact. This suggests that the higher the perceived effectiveness, the greater the positive impact felt in the screening process.

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