

CHAPTER I

INTRODUCTION

In recent years, mental health has become a global issue that has increased significantly and requires continuous attention. This issue has also raised concern, one of which is in Indonesia, as evidenced by the increasing prevalence of cases due to disturbed mental health. The notably elevated prevalence of mental disorders within the nation underscores the necessity of improvement societal and governmental policy and attention [1]. The prevalence rate of 44% of respondents from 31 countries on mental health makes mental health an issue of concern. [2]. The Indonesia-National Adolescent Mental Health Survey (I-NAMHS)'s most recent survey, conducted in 2022, indicates that 2.54 million adolescents and adults are classified as having mental disorders. According to the survey, 1 in 20 Adolescents experienced mental disorders within the past year. Indonesia still requires additional development in this area, notwithstanding its ongoing endeavors to enhance its mental health system [3]. These budgetary constraints make it difficult for the community to provide the highest standard of health services. [4] [5]. According to research conducted by the Organization for Economic Cooperation and Development (OECD) during the 2020-2021 period, the prevalence of mental health issues among young adults aged 15-24 has increased. The majority of parents are either unaware of or deny the mental health issues of their children. In the I-NAMHS survey, a mere 4.3 percent of parents or caregivers indicated that their teenage and young adults required assistance with mental health disorders. Only 1.67 percent (or 1 in 6) of parents or caregivers who believed their children required support acknowledged that their needs had been properly fulfilled. Over half (43.8 percent) of the respondents stated that they refrained from utilizing services because they preferred to address the issue independently or with family and friends' support. The urgency of enhancing qualities, accessibility, and awareness of mental health services in Indonesia is further underscored by the findings above.

The data suggests that providing services with easy access, such as telephone networks or online chat services such as Social Media, is necessary to fulfill their needs for mental health services. Regarding stress, Social Media can function as a tool for finding and sharing information related to mental health and dealing with stress triggers [6]-[10]. Social Media has become of personal life because users can produce or obtain content, share moments or experiences, play games, etc. In today's age, electronic developments can accelerate the pace of its function and become based on social media [11]. People use Social Media to obtain information because their privacy is protected and readily accessible. Additionally, individuals utilize social media platforms to discuss health-related matters, including requesting advice, engaging in discussions with professionals and individuals who have encountered comparable issues, expressing emotions, and inquiring about alternative treatments [12]. They attempt to acquire e-health literacy skills to mitigate health risks and make informed health decisions through social media [13]. In Indonesia, there are 93 million users of the YouTube social media platform [14]. Based on the explanation, choosing YouTube as media place for self-disclosure is worthwhile to explore. It is unique because the process carried out by the resource person or guest star will be documented and disseminated widely. Peers in a shared social network may provide emotional and informational support when searching for and sharing content on YouTube [15]-[18]. Social media-based coping behaviors facilitate the exchange of verbal or nonverbal messages between users, allowing for the sharing and seeking of emotional and informational support as well as the communication of feelings and feelings. Such a network also encourages the exchange of social companionship and can provide individuals with similar concerns with sympathy, empathy, hope, strength, motivation, and friendship. As a result, health-related issues may be reduced [19]-[21]. It can serve as a way to overcome mental health conditions [16][17][22]. In light of the preceding, this study builds upon previous investigations by applying HBM to examine intentions to seek and share mental health information on social media [23]. The HBM paradigm is composed of four primary components: perceived severity, vulnerability, benefits, and barriers

[24][25]. However, outcome expectations (perceived barriers and perceived benefits) and risk perception (perceived severity and perceived susceptibility) are the primary factors that influence health behavior decisions [24] [25]. To date, there are only several studies that have used HBM to examine how people use Social Media to search for mental health and share information. On the other hand, numerous studies have investigated the predictors of seeking and sharing information on mental health-related in this age group.

In this study, quantitative research was employed to address numerous research queries based on the HBM. Following the topics, the questions were posted: (1) Can the fundamentals of HBM constructs be used to accurately predict the intentions to seek and share mental health information? (2) Which construct of the Health Belief Model (HBM) can predict that seeking and sharing information about mental health is the most significant and insignificant? In other words, do correlations between seeking and sharing intentions and Health Belief Model constructs depend on one or more external variables? The HBM was predicted to predict seeking and sharing behavior on Social Media, with benefits and e-health literacy being the most robust predictors, according to previous research.