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The Contribution of Social Capital Interaction and Javanese Cultural Values towards the Status of Mental Health

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Abstract

Background: This study aims to find out model of interaction on social capital and Javanese cultural values on mental health status. This study is a cross-sectional survey research on 226 Javanese people in Surakarta. Social capital and Javanese cultural values are measured by self-developed questionnaire by author and friends. Mental health status parameter is self-efficacy which measured by General Self-Efficacy Scale, coping strategies measured by the instrument of Ways of Coping instrument, stress tolerance are measured by Miller Smith Rating Scale for Stress Tolerance, and emotional distress are measured by Hopkins Symptom Check List-25. All questionnaires are translated into Indonesian and have been tested for its validity and reliability. The hypothesis model was tested by path analysis and correlation test using SmartPLS software. The results indicated that social capital has an effect on self-efficacy (b=0.212; p=0.005), social capital has an effect on coping strategies (b=0.166; p=0.007), social capital has an effects stress tolerance (b=0.501; p=0.000), Javanese cultural values has an effect on self-efficacy (b=0.193; p=0.007), Javanese cultural values has an effect on coping strategies (b=391; p=0.000), stress tolerance has an effect on emotional distress (b=0.286; p=0.001), social capital are related to Javanese cultural values (r=0.279; p=0.000), self-efficacy are related to coping strategies (r=0.553; p=0.000), self-efficacy are related to stress tolerance (r=0.416; p=0.000), and stress tolerance are related to coping strategies (r=0.461; p=0.000). This study conclude that there is an interaction between social capital and Javanese cultural values, which the combination has an effect on mental health status.

Keywords: Social capital • Javanese cultural values • Mental health status

Introduction

The concept of social capital occupies an important position on the study of social determinants of health. Social capital connect structural dimensions (social, economic and political status) with intermediate dimensions of social determinants (residential environment, biological and behavioral factors, and psychosocial factors) (World Health Organization, 2010). Social capital is a resource that arises from the interactions of community. The components of social capital consist of structural components (social networks, social contracts, and social participation), and cognitive components (individual perceptions of trust, perceptions of social support, feelings of belonging, norms, values, attitudes, and reciprocity) [1]. Based on the social capital bonding which consists of bounding, bridging, and linking [2]. Social capital affects mental health status by various mechanisms. Tight social capital is a protective factor against low mental health status [3-5].

Culture is a basic concept that explains social phenomena that occur in society such as social interaction which carried out the activities related to health, include mental health. Cultural ideas can explain the meaning of individual behavior in society [6]. Several studies have found the influence of culture on coping process and stress tolerance. Cultural systems can be an important factor against environmental stress. Although culture is sometimes not always effective as a factor against stress and might even strike a new threat [7].

In Indonesia, Javanese tribe occupies a significant position. Based on 2020 Indonesia Investment report, 41% of Indonesia's population is Javanese. Javanese tribe consists of East Java, Central Java, and Yogyakarta. Javanese society is a society that has feudalistic, paternalistic and hierarchical structure [8]. several values of local wisdom on Javanese culture that are still useful for daily activities of Javanese include: mikul dhuwur mendhem jero (to protect parents good name), narima ing pandum (accept with sincerity), ngewongke wong (respect others), guyub rukun gayeng regeng (harmony and fellowship), Gusti mboten sare (God never sleep), manunggaling kawula Gusti (the unity of man and God), and manners.

Social capital is an internal value or norm that is distributed, therefore social capital is an institutionalization of cultural values. Many studies have found the contribution of social capital to mental health; however none of it interacted with elements of culture and social capital. Moreover, this study aims to find a model of the interaction of social capital and Javanese cultural values on mental health status.

Materials and Methods

This research is a cross sectional survey research with quantitative approach. The research population is a group of people of Javanese ethnic who live in five sub-districts in Surakarta, Indonesia. Surakarta was chosen because it is considered as the center of Javanese culture in Central Java. The Samples were taken by purposive sampling of 226 Javanese people with inclusion age criteria of 19-59 years, domiciled in Surakarta city for at least five years, not suffering from any mental disorders, able to read and write, and willing to participate in research. The research was conducted in March 2021, because it was conducted during pandemic, the questionnaire was distributed via Google form.

Mental health status that measured are self-efficacy, coping strategies, stress tolerance, and emotional distress. Social capital and Javanese cultural values was tested using questionnaire developed by author and his friends. The dimensions of social capital that measured are cognitive social capital, relational social capital, structural social capital, communication social capital, bounding, bridging, and linking. The dimension of Javanese cultural values that measured are spirituality, narima ing pandum (accept

with sincerity), social standard, tepa slira aja dumeh (tolerance), guyup rukun gayeng regeng (communal work), reduce the conflict, self-adjustment, pekewuh (reluctant), mikul dhuwur mendhem jero (protect the good name of parents), tata krama (manners), and ngewongke wong (respect others). Self-efficacy measured by General Self-Efficacy Scale, coping strategies measured by the instrument of Ways of Coping, stress tolerance measured by Miller Smith Rating Scale for Stress Tolerance, and emotional distress measured by Hopkins Symptom Check List-25. Every questionnaire is translated into Indonesian and have been tested for its validity and reliability. Before filling out the questionnaire, respondents were first asked to fill out a consent form to participate in this study.

Based on the assumption which stated that normality of the data will not be normal, because it uses an ordinal scale that transformed into an interval scale, statistical analysis is carried out using SmartPLS 3.2.9 software, it is based on non-parametric tests. Conceptualization of the model was done based on theory. this model will consider on several aspect of social capital effect on self-efficacy, coping strategies, stress tolerance, and emotional distress; the influence of Javanese cultural values on self-efficacy, coping strategies, stress tolerance, and emotional distress; the effect of self-efficacy, coping strategies, and stress tolerance on emotional distress; the relationship of social capital with emotional distress; the relationship between social capital and Javanese cultural values; the relationship between self-efficacy and stress tolerance; the relationship between self-efficacy and coping strategies; and the relationship between stress tolerance and coping strategies (Figure 1).
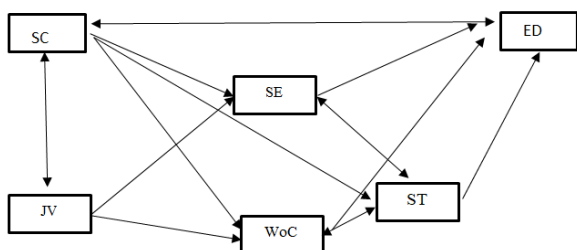
Figure 1. Hypothesis of Social Capital contribution and Javanese Cultural Values on Mental Health Status.
Note: SC: Social Capital, JV: Javanese Values, SE: Self-Efficacy, ST: Stress Tolerance, WoC: Ways of Coping, ED: Emotional Distress, Line with an arrow indicates influence. Line with two arrows indicates the relationship.

The research design has received ethical approve from the research ethics committee of Blinded for Review.

Results

A survey has been conducted on 226 respondents of Javanese people that scattered in various areas of Surakarta. Most of the respondents are female, aged between 19 to 26 years old, use Javanese as their daily language, have a bachelor's degree education, Muslim, students, not married, and do not have any occupation. The socio-demographic characteristics of respondents are listed in Table 1 below.

Table 1. Socio-demographic characteristics of respondents.

Socio-demographic characteristics	Total
Gender	
Male	96
Female	130
Age	
19-26	76
27-34	41
35-42	46
43-51	32
52-59	31

Daily languages	
Javanese	96
Indonesian	68
Mixed	62
Others	0
Education	
Not completed primary school	2
Primary school	2
Junior high school	5
Senior high school	78
Diploma	35
Undergraduate	99
Post graduate	4
Doctoral program	1
Occupation	
Government employees	25
Soldier/Police	14
Private sector employee	42
Entrepreneur	55
Do not work	47
Students	43
Religion	
Islam	177
Protestant	24
Catholic	25
Hindu	0
Buddha	0
Confucius	0
Other	0
Marital Status	
Single	112
Married	103
Divorced	11
Income	
None	87
<3 million each month	82
3-5 million each month	34
>5 million each month	23

To determine the effect of independent variables on dependent variables, path analysis was performed using the bootstrapping process. The results of path analysis are shown in Table 2.

Table 2. Path analysis result.

The path of independent variable to dependent variable	Regression coefficient (b)	P
Social capital-emotional distress	0.074	0.291
Social capital-self-efficacy	0.212	0.005*
Social capital-ways of coping	0.166	0.007*
Social capital-stress tolerance	0.501	0.000*
Javanese values-emotional distress	0.056	0.464
Javanese values-self efficacy	0.193	0.007*
Javanese values-ways of coping	0.391	0.000*
Javanese values-stress tolerance	0.093	0.115
Self-efficacy-emotional distress	1.053	0.143
Ways of coping-emotional distress	0.047	0.591
Stress tolerance-emotional distress	0.286	0.001*
*Meaningful, with significance level of 0.05		

Based on Table 2, it is known that social capital has an effects on self-efficacy (b=0.212; p=0.005), social capital has an effect on coping strategies (b=0.166; p=0.007), social capital has an effects on stress

tolerance (b=0.501; p=0.000), Javanese cultural values has an effect on self-efficacy (b=0.193; p=0.007), Javanese cultural values has an effect on coping strategies (b=391; p=0.000), and stress tolerance has an effect on emotional distress (b=0.286; p=0.001).

To find out the correlation among variables, a correlation test was carried out within the bootstrapping process. Correlation test results are presented in Table 3 below. Based on the path analysis test and correlation test, it obtains the following Figure 2 below:

Table 3. Variables correlation test results.

The path of independent variable to dependent variable	Correlation coefficient (r)	P
Social capital–emotional distress	0.040	0.543
Social capital –javanese values	0.279	0.000*
Self-efficacy–ways of coping	0.553	0.000*
Self-efficacy–stress tolerance	0.416	0.000*
Stress tolerance–ways of coping	0.461	0.000*

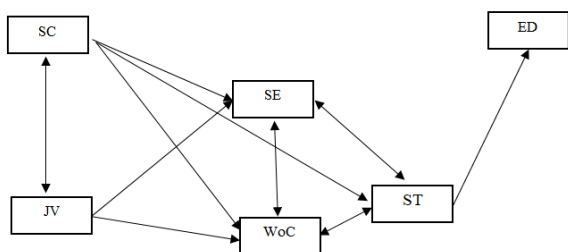*Meaningful, with significance level of 0.05

Figure 2. The Scheme of Social Capital Contribution and Javanese Cultural Values on Mental Health Status.
Note: SC: Social Capital, JV: Javanese Values, SE: Self-Efficacy, ST: Stress Tolerance, WoC: Ways of Coping, ED: Emotional Distress Line with an arrow indicates influence. Line with two arrows indicates the relationship.

Discussion

A survey research has been conducted on 226 Javanese respondents to determine the contribution of interaction on social capital and Javanese cultural values on mental health status. The parameters of mental health status that were measured include self-efficacy, coping strategies, stress tolerance, and emotional distress. In general, the correlation coefficient and path coefficient values are obtained in low and medium range, indicates that there are many other factors which play a role in mental health status, besides Javanese social and cultural capital. The factors include macroeconomic policy, public policy, social class, gender, racism, gender, education, occupation, living environment, psychosocial factors, and biological factors (World Health Organization, 2010).

The result shows a positive relationship between social capital and Javanese cultural values. It is related to the study that was done by Kaasa [9], who found that culture was more important than personal values in building social capital of individual. According to Boerdiau [10], social capital can provide support for individuals and groups to achieve the common goals. The form of social capital are influenced by the values and norms that was collectively held, or it can be said that they are influenced by cultural values that adopted by local community. The obedience to the norms are expected to create a better social relations, institutionalizing collective consciousness, equality in attitude and action, which can be used as energy to develop social capital.

According to Fukuyama [11], trust is the additional aspect that help to makes every social systems work better. Trust is an important variable to form a functional society, because it contains expectations for order, honesty, and cooperative behavior that arise in a community based on the regulated norms. Communities depend on trust and trust is determined culturally [12]. If it has strong trust aspect, cohesion will also be strong, and

strong ties will facilitate the transfer of values and norms that considered as valuable in community.

In general, the influence of social capital on mental health can be explained by psychosocial and neo-materialist theories. Psychosocial theory suggests that low levels of trust and lack of social cohesion will cause negative emotions. Furthermore, through psych neuroendocrine mechanisms, it will cause health problems, including mental disorders. Besides, low levels of social capital will induce unhealthy behavior, such as the use of addictive substances [13]. A research that was done by Brouwer [14], found that social capital provides several benefits during the crisis, and people with high social capital will respond more effectively to stress than people with low social capital.

Self-efficacy is belief and confidence of individual ability to perform certain tasks. Self-efficacy is used as a cognitive variable of how a person feels and behaves related to health, dealing with certain situations, and satisfaction to a health services. In general, self-efficacy can be increased by practicing to control the situation; a successful person was used as role models, social persuasion, and reducing stress reactions to certain situations. In societies with a collective cultural orientation, such as Javanese and Latino, self-efficacy is related to strong family relation and social support. Building social capital, will improve self-efficacy, and create meaningful relationships between individuals and other individuals, organizations, resources, and opportunities for self-development. The dimensions of social capital that have highest influence on self-efficacy are bounding and bridging [15,16]. Another similar research was conducted by Andersson [17,18]. Both authors found a significant effect of social capital on self-efficacy. An individual who grew up in family with strong bounds and a community that has strong social relation will be a tough and strong person on dealing with stressors.

One of the resources that a person has to deal with stressors is culture. Cultural systems might be an important buffer against stressors that caused by the environment, although culture itself is sometimes not always effective as a buffer for stressors, and may cause a new threat [7]. Culture affects the process of coping, self-efficacy, and stress tolerance in four ways, such as (1) Culture shapes the type of stressor a person experiences. For example, for Javanese women, living as single can be a stressor, however for woman who grew up in a Western culture, single is a choice; (2) Culture build individual perception toward stressors; (3) Culture influences coping strategies of individuals that can be use in certain situations; (4) Culture provides different institutional supports that individuals can use in dealing with stressors [19].

Most of studies on culture and coping have found that culture plays a role in determining coping strategies that could be useful. Coping strategies in form of confrontation and modifying external stressors, or often referred as problem-focused, are widely found in individualistic cultures, for example in Europe. Coping strategies that avoid external stressors and modify more internal psychological status, or referred as emotional coping, are often found in collective cultures, such as Asia [20].

Collective Javanese culture provides psychological support resources, which are used to coping with stressors. It can be proven by the research result of [21], who found that the Javanese cultural values that have the most closest relation to stress tolerance was the principle of Guyup Rukun Gaeng Regeng, or referred as communal work. Communal work is a form of social integration based on voluntary principles. Communal work is an action of social solidarity. The examples of communal work in Javanese society are community service by cleaning the environment and helping neighbors whose family members have died. Communal work (Gotong royong) provides institutional support.

Stress tolerance is a personal level of endurance to deals with stressors, whether it physical, psychological, or psychosocial stress. Basically, stress tolerance is the result of a person's coping stress mechanism. Coping stress mechanism creates resistance or the ability of a person to control him against stress. According to Welle and Graf [22], Stress tolerance is influenced by several things, such as genetics, lifestyle, and coping strategies. Someone with good self-efficacy will choose a problem-

focused coping strategy. Stress tolerance is the result of coping strategies; therefore, adaptive coping strategies will produce a good stress tolerance. A good stress tolerance due to genetic and lifestyle will affect the choice of coping strategies, such as adaptive coping strategies. an individual that have a feeling of able to control the situation, calmly dealing with stressor and belief that he has a complete control will increase their self-efficacy.

Emotional distress also referred as psychological distress or mental distress is anxiety and depression disorders or mild mental disorders, which are not easily detected. Stress tolerance or sometimes also referred as stress intolerance, is the only intermediary variable that has direct effect on the emotional distress variable. It is in related to several studies which have found that stress tolerance is a risk factor of psychopathology. Stress tolerance is thought which can be an underlying factor in anxiety, depression, and a number of other psychological disorders [23-25].

Conclusion

Based on the explanation above, it can be concluded that there is a positive relationship between social capital and Javanese cultural values. The types of social capital are influenced by values and norms that are held collectively, it can be said that they are influenced by cultural values adopted by local society. The obedience of norms is expected to be able to create social relations, institutionalize collective awareness, equality in attitude and action, which will become energy to develop social capital.

The interaction between social capital and Javanese cultural values will affect mental health status. In this research, author tried to explore local wisdom of Javanese cultural values as a resource to obtain a good mental health status. The output that has obtained can be used as a model for mental health promotion programs.

The strength of this research is that the author tried to explore local wisdom as a resource in obtaining good mental health status. The output obtained can be used as a model for mental health promotion programs. The weakness of this study were the self-reported and cross sectional data used, the sample used was relative small, it did not analyze the influence of sociodemographic factors, and only use several Javanese cultural philosophies, from many existing Javanese cultural philosophies. There are suggestions for further research, such as the need to use more samples and analyze the influence of socio-demographic factors.

Data Availability

Data sharing is not applicable to this article as no new data were created or analyzed in this study.

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Conflict of Interest

The authors declare that there is no conflict of interest.

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