

Schizophrenia in Indonesia: current situation and future direction

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In Indonesia, research in general has not been a priority for some time. Even in academic institutions only small numbers of research activities have been done. Some factors that contribute to this situation are: limited grant resources, inadequate facilities, weak coordination between departments and un-stimulating reward for researchers. In psychiatry, especially in schizophrenia the situation is even worse. Only small numbers of researches have been conducted and mostly done by individual researchers. Some researches got support from international grants and collaborative partners. Some areas of research are i) the biology of schizophrenia; genetics and drug clinical trials, ii) clinical aspect; duration of untreated psychosis and neuro-cognitive aspect, iii) Social aspect; pathway of health seeking behavior, burden of family of schizophrenia, stigma and mistreated of patient with schizophrenia.

Clinical situation is also far from satisfactory. There were only two models of treatment: in patient and outpatient units. There are no in between. With the limited resources that we have, such as number of psychiatrists and number of psychiatric beds, the lack of clinical services for patients with schizophrenia is understandable.

Some political changes, especially in decentralization policy, currently happen. Academic institutions get more autonomic status. Most of the academic institutions at present try to put research as one of their main priorities. Facilities, such as access to internet library, are improved. In addition to regular grant resources, some local governments can also support research activities. Hopefully this could be a better environment for research activities. In addition to some research activities that have been done, researches on the basic epidemiology data and on innovation clinical and social approaches for schizophrenia are considered the foci of our research on schizophrenia in the future.

Decentralization policy also stimulates the Mental State Hospitals and other mental health services to provide some new innovation services such as empowerment of family members and setting up new model of mental health clinics outside the mental health hospitals. New mental health service delivery is developing in Aceh, and will be a model for all provinces. The aim of all of these activities is to improve service to schizophrenia patients clinically.