



## **Psychological health professionals' perspectives on *Melukat* as a cultural approach to psychological therapy**

Article History

Accepted  
26 June, 2025

Received  
January 03, 2025

Published  
June 30, 2025

**Della Cindy Pristiyanti<sup>1\*</sup>, Listyo Yuwanto<sup>1</sup>,**

<sup>1</sup> Department of Psychology, Universitas Surabaya, Indonesia

### **ABSTRACT**

This study explores the perspective of healthcare professionals in psychology toward the practice of *Melukat* as a culturally based psychological therapy in Bali. Using a qualitative approach, in-depth interviews were conducted with three psychologists experienced in both clinical and traditional practices. The findings indicate that *Melukat* is perceived as an effective religious coping strategy for calming the mind, fostering self-reflection, and supporting relaxation, particularly for individuals who believe in the ritual. However, the practice is not regarded as a primary psychological therapy, as it does not meet the standards of a structured therapeutic process. The integration of *Melukat* into modern therapy is considered promising, especially when combined with psychological techniques such as mindfulness and meditation. The participants emphasized the importance of further research to assess the effectiveness of *Melukat* within the context of modern psychology and the need for collaboration between psychologists and traditional leaders to develop a holistic, culturally sensitive approach. These findings provide new insights for developing more inclusive therapeutic models, integrating traditional practices with scientific methods, and addressing cultural sensitivity challenges in mental health services.

---

<sup>1</sup> Corresponding Author: Della Cindy Pristiyanti, email: [s154223511@student.ubaya.ac.id](mailto:s154223511@student.ubaya.ac.id), Department of Psychology, Universitas Surabaya, Raya Kalirungkut street, Tenggilis, Surabaya postcode 60293, East Java, Indonesia

**KEY WORDS:**

*Melukat; cultural therapy; psychological perspectives; professionals' perspectives, Balinese therapy; mental health*

---



Copyright ©2025. The Authors. Published by Journal of Indonesian Psychological Science (JIPS). This is an open access article under the CC BY NO SA. Link: [Creative Commons — Attribution-NonCommercial-ShareAlike 4.0 International — CC BY-NC-SA 4.0](https://creativecommons.org/licenses/by-nc-sa/4.0/)

## Introduction

The work environment is one of the main determinants of organizational success, because it reflects the conditions that support or hinder the implementation of employee duties and responsibilities (Siedler & Idczak-Paceś, 2021). A conducive work environment, characterized by comfort, safety, and emotional support, can motivate employees to work more optimally, thus contributing to increased productivity and achievement of company goals (Vanessa & Nawawi, 2022). Conversely, an unsupportive work environment, as characterized by a monotonous, inflexible, or even toxic work atmosphere, has the potential to lead to job dissatisfaction, psychological distress, and decreased employee performance. These conditions, if not addressed immediately, can increase turnover rates that are detrimental to the organization (Balqist et al., 2023).

Mental health is now recognized as a critical component of overall well-being, influencing both individual and societal welfare. The World Health Organization (WHO) emphasizes that mental health enables individuals to realize their potential, underscoring its role in achieving holistic health (Franjić, 2022). However, significant gaps persist in mental health services, particularly in low- and middle-income countries, where up to 80% of therapeutic needs remain unmet (Sharan & Krishnan, 2025). Social factors also significantly influence mental health outcomes, necessitating inclusive policies that are responsive to cultural diversity. Furthermore, healthcare professionals play a vital role in providing culturally sensitive psychological support by integrating cultural beliefs and practices into their care approaches.

Culture plays a pivotal role in psychological therapy in Indonesia, shaping how communities perceive mental health and select treatment methods. Indigenous psychology approaches emphasize that mental health issues are socially constructed and must be understood within the context of local culture (Ranimpi et al., 2023). Traditional beliefs, such as supernatural and magical explanations for mental disorders, heavily influence how communities perceive

and address mental health, with many opting for alternative therapies rooted in cultural practices (Subu et al., 2022). Additionally, Indonesia's cultural diversity necessitates a cross-cultural counseling approach that considers self-concepts shaped by cultural interactions and guides therapeutic practices aligned with clients' cultural values (Fadila, 2020). Developing culturally contextualized counseling approaches is essential for creating effective mental health services that embrace multiculturalism, valuing both universal and unique cultural elements in therapy (Adiputra & Mujiyati, 2018; Ampuni, 2005).

In Bali, rituals play a significant role in mental health healing, blending traditional beliefs with spiritual practices. Balinese culture views mental disorders as consequences of ancestral curses or spiritual disturbances, prompting individuals to seek help from balian (traditional healers) before considering medical treatment (Muryani et al., 2018). Rituals such as *Melukat* aim to cleanse spiritual impurities, which are believed to restore mental and physical health (Grantika et al., 2020). Research (Muthmainah et al., 2023) indicates that *Melukat* practices improve mental health outcomes, particularly in trauma recovery. This ritual focuses on purifying the mind and soul, helping individuals overcome post-traumatic stress. The healing process often involves a combination of traditional and modern medical approaches, reflecting an understanding of health that encompasses both the visible (sekala) and the invisible (niskala) realms (Grantika et al., 2020; Muryani et al., 2018).

Modern psychology, grounded in scientific principles, often encounters potential conflicts with culturally rooted ritual practices. While modern psychology prioritizes empirical methods, cultural rituals involve spiritual dimensions that are challenging to explain scientifically. Some healthcare professionals advocate for integrating these approaches, arguing that cultural rituals can provide emotional comfort and social support that aid healing. However, others remain skeptical, perceiving traditional approaches as potentially compromising the accuracy of diagnosis or the efficacy of evidence-based interventions. In addition to these professional perspectives, several phenomena and challenges have emerged concerning the practice of *Melukat*. The increasing popularity of *Melukat*, especially among tourists and public figures, has led to its commodification, raising concerns about the dilution of its sacredness and cultural significance. Furthermore, the integration of *Melukat* into wellness tourism packages has sparked debates about cultural appropriation and the potential for misinterpretation of its spiritual essence. There are also discussions within the Balinese community about the authenticity of *Melukat*.

practices when performed outside traditional contexts or without proper guidance from spiritual leaders, with some practitioners reporting inconsistent psychological outcomes depending on the ritual's setting and the participant's cultural background and belief system. These differing perspectives reflect the influence of professional and cultural backgrounds on the application of cultural rituals in psychological therapy, impacting therapeutic relationships and treatment effectiveness (Muthmainah et al., 2023; Rifa'i & Kamaludin, 2021).

Attitudes in the context of social psychology are defined as individuals' evaluative responses toward specific objects, situations, or phenomena, comprising three main components: cognitive (beliefs or perceptions), affective (emotions or feelings), and conative (behavioral tendencies) (Hill et al., 1977; Ostrom, 1969). Attitudes play a vital role in understanding how individuals respond to experiences or phenomena, including cultural contexts. This study focuses on the attitudes of psychology professionals toward *Melukat* as a psychological therapy, aiming to understand the extent to which they accept or reject this practice. Exploring these attitudes offers deeper insights into how psychology professionals perceive the integration of cultural approaches in therapy. Inclusive attitudes may align with patients' cultural values, while skeptical attitudes may highlight barriers stemming from differences between scientific and traditional approaches.

Understanding the attitudes of healthcare professionals in psychology toward culturally based therapies is crucial, as these attitudes shape their acceptance and appreciation of patients' cultural practices. Professionals with a deep understanding and positive attitudes toward culturally based therapies can more effectively build therapeutic relationships with culturally grounded patients (M. X. Patel, 2004). Inclusive attitudes enable them to integrate approaches that align with patients' cultural beliefs and values, making care more relevant and meaningful. This ultimately enhances therapy effectiveness, strengthens emotional support, and fosters a sense of value and understanding in patients, positively influencing mental health outcomes (Soto et al., 2019).

Previous research has explored the importance of cultural competence in mental health care. For instance, a systematic review by Smith et al. (2023) highlighted that culturally competent interventions lead to improved patient satisfaction and treatment adherence. However, there remains a gap in understanding how specific cultural rituals, such as *Melukat* in Balinese culture, are perceived and integrated by psychological health professionals into therapeutic practices. This study aims to fill this gap by examining the

perspectives of psychological health professionals on *Melukat* as a cultural approach to psychological therapy, thereby contributing to the development of culturally sensitive therapeutic models that respect and incorporate indigenous healing practices.

This study aims to identify the attitudes of psychology professionals toward cultural rituals, whether positive, negative, or neutral. The research seeks to capture the extent to which mental health professionals support, are skeptical of, or remain neutral toward culturally based practices such as *Melukat* in Bali. Gaining a deeper understanding of these attitudes provides comprehensive insights into the factors influencing acceptance or rejection of cultural rituals in psychological healing contexts.

The relevance of this research is significant, particularly in developing psychological therapy models that are more adaptive and responsive to local cultural contexts. By understanding the attitudes and perspectives of healthcare professionals toward culturally based therapies, therapeutic models can be designed to align more closely with the cultural needs and values of communities. Specifically, in Balinese society, with its strong traditional beliefs and rituals, therapeutic models integrating cultural approaches are likely to be more acceptable and effective for patients. This study is ultimately expected to contribute to the development of inclusive and culturally sensitive mental health services in Indonesia.

## **Empirical Studies**

### ***Melukat***

*Melukat* is a traditional practice of the Balinese Hindu community aimed at cleansing oneself physically and spiritually through the medium of holy water blessed with sacred mantras. This ritual is not only considered a spiritual purification process but also a means to achieve harmony between the physical body (*stula sarira*), the mind (*sukma sarira*), and the soul (*anta karana sarira*) (Artana, 2019; Parmiti & Simamora, 2021). In the psycho-spiritual context, *Melukat* is believed to neutralize negative energy, provide a sense of tranquility, and support healing from both physical and emotional ailments.

The belief in the power of sanctified water is central to this practice, reflecting reverence for water as a source of life (Pertiwi et al., 2020). Furthermore, the tradition of *Melukat* has evolved into a complementary health approach, particularly in aiding individuals to manage stress and restore emotional

balance.

## **Culture and Mental Health in Indonesia**

Culture significantly influences perceptions and practices related to mental health through various mechanisms, such as beliefs, stigma, and social factors. Cultural beliefs shape how individuals understand mental disorders, leading to variations in symptoms, diagnosis, and treatment approaches across societies (Adebayo et al., 2024). For instance, collectivist cultures often hold more negative views on mental health, especially among individuals with limited exposure to mental health issues. In contrast, individualist cultures tend to exhibit more positive attitudes (Mohankumar, 2022). Sociocultural practices, such as the use of traditional medicine and the presence of social support networks, also play a crucial role in influencing mental health outcomes. Cultural values impact daily habits, including dietary patterns, physical activity, and perceptions of illness (Ratnasari, 2023). Moreover, social factors such as gender norms and vulnerabilities arising from intersectionality exacerbate mental health challenges, particularly for marginalized communities (Patel, 2024). Thus, integrating cultural insights into mental health services is essential to ensure accurate and effective diagnosis and treatment (Silva et al., 2024).

## **Psychological Perspectives on Traditional Practices**

Psychology plays a crucial role in interpreting culture-based rituals as a form of mental care by elucidating the psychological mechanisms underlying these practices. Rituals function as regulatory tools across three main dimensions: managing emotions, strengthening social connections, and fostering conditions conducive to goal attainment, all of which are critical for mental health (Hobson et al., 2017). Research integrating psychological theories with ritual studies has shown that rituals can alleviate anxiety and emotional distress, serving as a buffer against negative experiences (Hobson et al., 2017). Moreover, incorporating ritual elements into psychotherapy offers innovative approaches for addressing issues such as grief, anxiety, and identity crises, highlighting the potential of rituals as therapeutic tools in clinical settings (Goodwyn, 2016). By understanding the relationship between cultural narratives and individual psychological processes, practitioners can employ rituals to support healing and enhance resilience (Kirmayer, 1999).

## **Cultural Integration in Psychological Therapy**

Integrating culture into psychological therapy is a crucial step to enhance treatment effectiveness, particularly in diverse societies. The Southampton

Adaptation Framework emphasizes the need to tailor cognitive-behavioral therapy (CBT) to align with the values and norms of the client's culture. This approach has been shown to significantly impact the success of culturally informed interventions (Naeem et al., 2024). Additionally, the Context-Responsive Psychotherapy Integration Framework highlights the importance of therapists' multicultural competence (MCC), which is dynamic and must be adapted to each client's unique cultural identity, requiring flexibility in practice (Goodwin et al., 2018).

Contextual assessment frameworks, such as the DSM-5 Outline for Cultural Formulation, provide guidelines for therapists to recognize and integrate cultural factors into their practice (Fung & Lo, 2017). In India, efforts to indigenize therapy emphasize the significance of community-oriented approaches in psychological practice (Thomas et al., 2018). Finally, real-world applications of cultural adaptations highlight the need for practical strategies to effectively implement these frameworks in clinical settings (Koslofsky & Domenech Rodríguez, 2017).

## Previous Studies on Healthcare Workers' Attitudes

Research has shown that healthcare workers' attitudes towards culture-based ritual therapeutic approaches are heavily influenced by their understanding of cultural beliefs and practices. Goodwyn emphasizes the importance of integrating ritual studies into psychotherapy, stating that rituals can enhance therapeutic outcomes by addressing issues such as identity and grief, which are often neglected in Western practices (Goodwyn, 2016). Havenaar revealed that shared beliefs between therapists and patients can influence up to 60% of therapy effectiveness, highlighting the importance of cultural context in treatment (Havenaar, 1990). Lotz et al. (2023) underscore the need for rituals in addressing post-traumatic grief and advocate for a flexible therapeutic framework to meet cultural needs. Al-Krenawi also noted that cultural background affects symptom presentation and treatment approaches, making cultural awareness among healthcare workers essential for improving diagnosis and care (Al-Krenawi, 2019). Finally, Thomas et al. encourage culture-based practices in India, stressing the need for training that integrates healing traditions (Thomas et al., 2018). Overall, these studies emphasize the significance of cultural sensitivity in enhancing therapeutic effectiveness.

## Method

This study employs a qualitative approach, aimed at exploring the perspectives, experiences, and attitudes of healthcare professionals in

psychology towards *Melukat* as a form of culture-based psychological therapy. This approach was chosen due to the exploratory nature of the research, which focuses on interpreting the meanings attributed by the research subjects to a specific phenomenon within their cultural context.

The research subjects were selected using purposive sampling technique. The criteria for selecting subjects included psychologists who are from Bali or reside in Bali, possess knowledge about *Melukat*, have a minimum of 3-5 years of experience in the field of psychology, and are willing to be interviewed regarding their views on culture-based therapies such as *Melukat*.

Data for this study were collected through in-depth interviews as the primary method to explore the perspectives, experiences, and attitudes of healthcare professionals in psychology towards *Melukat* as a culture-based therapy. The interview process was recorded with the subjects' consent to ensure data accuracy and facilitate interpretation during analysis.

The interview guide for this study was developed based on key themes relevant to the research focus, such as healthcare professionals' attitudes in psychology, their experiences in dealing with patients from traditional cultural backgrounds, views on *Melukat* as a therapy, and the influence of culture in psychological practice. This guide was systematically designed to ensure that each question supports the research objectives while still allowing subjects the freedom to express their views openly and in depth.

The data analysis process in this study follows the systematic steps of thematic analysis. The first step involves transcribing the interview results, where all conversations are carefully recorded to ensure no information is missed. Next, the transcripts are read repeatedly to understand the context of the data and identify key points relevant to the research focus.

The following step is coding the data, which involves labeling sections of the data that share commonalities or specific relevance, such as positive, negative, or neutral attitudes towards *Melukat*. Once coding is completed, the main themes are identified and grouped based on attitude patterns found among the subjects. These themes are then analyzed further to uncover their deeper meanings and relevance in the context of Balinese culture and attitude theory.

The final interpretation links the findings to relevant literature and theories to provide a comprehensive explanation of healthcare professionals' attitudes in psychology towards *Melukat*. This thematic analysis method is chosen for its flexibility in processing complex qualitative data and its ability to generate rich

and meaningful insights regarding cultural issues in the context of mental health.

## Result

### Overview of Subjects

The subjects in this study are professional individuals in the field of psychology, with diverse educational backgrounds and experiences, providing rich perspectives on the topic of *Melukat* as a cultural-based therapy.

The thematic results from the interviews are presented in the table below.

**Table 1**  
*Thematic Analysis*

Theme	Subject 1	Subject 2	Subject 3
View on <i>Melukat</i>	" <i>Melukat</i> is a process of self-purification, cleansing the mind, behavior, and words, and strengthening the relationship with God. It is done on auspicious days."	" <i>Melukat</i> is understood as self-purification, by using water from sacred springs to cleanse oneself from negative thoughts and energies."	" <i>Melukat</i> is a purification ritual before certain ceremonies. I have practiced this since childhood for reflection and self-renewal."
Perspective (Positive, Negative, Neutral)	Positive with caution: " <i>Melukat</i> can be used as a coping strategy, but it should not be considered the main psychological therapy due to its complexity."	Positive with caution: " <i>Melukat</i> can help individuals who believe in this practice, but it cannot be imposed on everyone."	"Positive with caution: ' <i>Melukat</i> may be beneficial for relaxation, but its effectiveness is subjective and depends on the individual's beliefs.'"
Role of <i>Melukat</i> in Psychological Therapy	" <i>Melukat</i> is only a coping strategy to calm the mind. It cannot be considered psychological therapy because therapy requires a structured and repetitive process."	" <i>Melukat</i> can help release mental burdens, like reflection or meditation, but is less effective for severe trauma."	" <i>Melukat</i> has the potential to be part of culturally-based therapy, especially if combined with modern techniques like mindfulness."

Theme	Subject 1	Subject 2	Subject 3
Effectiveness of <i>Melukat</i>	" <i>Melukat</i> is effective for stress management but less effective for handling trauma or complex psychological issues."	" <i>Melukat</i> helps to calm the mind, but it does not heal deep-rooted issues. Its effectiveness depends on the individual and the severity of the issue."	" <i>Melukat</i> provides temporary calm, but it does not address the root causes of problems. Additional interventions are needed for a more thorough outcome."
Integration of <i>Melukat</i> in Modern Psychology	" <i>Melukat</i> can be integrated as a complement to modern therapy with further research to validate its effectiveness."	" <i>Melukat</i> can be combined with modern techniques like meditation and breathing to enhance its benefits."	" <i>Melukat</i> is very likely to become part of modern therapy if packaged with a more universal approach and scientific data."
Challenges and Recommendations	"The main challenge is the assumption that <i>Melukat</i> can replace professional therapy. It is important to provide proper education to the public."	"Cultural sensitivity is an obstacle because not everyone believes in <i>Melukat</i> . Further research is needed to measure its effectiveness."	"The biggest challenge is religious and cultural sensitivity. It is important to strengthen scientific validity to make it universally accepted."

Based on the findings, the following table presents the main statements of the subjects and the conclusion of their attitudes based on (Petty, 1986) and Eagly, A. H., & Chaiken, S. (1993).

The first subject is a psychologist with a focus on clinical psychology and human resources (HR), who has practiced in several clinics as an associate and is also active in delivering seminars and counseling sessions. With educational backgrounds in both bachelor's and master's degrees from a university in Surabaya, this subject has a profound understanding of clinical psychology and its therapeutic approaches.

The second subject is a psychologist and a lecturer at Universitas Pendidikan Nasional, specializing in child cases. A graduate of both the

bachelor's degree in psychology from Universitas Udayana and the master's degree in professional psychology from a university in Surabaya, this subject's practice has predominantly focused on child development cases. However, they also possess a deep understanding of Balinese culture and the *Melukat* ritual as part of their religious background.

**Table 2**  
*Summary of Subjects' Main Statements, Keywords, and Attitude Conclusions on Melukat*

Subject	Main Statement	Keywords	Attitude Conclusion Category
Subject 1	" <i>Melukat</i> is just a coping strategy when we face problems, to calm the mind."	Only coping strategy, calming the mind	Neutral
	" <i>Melukat</i> cannot be considered psychological therapy because there is no structured process like modern therapy."	Not psychological therapy, no structured process	Negative
	"If seen as a strategy to deal with problems, <i>Melukat</i> is fine."	Strategy to deal with problems, fine	Positive
Subject 2	"If someone believes in this process, <i>Melukat</i> can be very helpful."	Belief in the process, very helpful	Positive
	" <i>Melukat</i> is more about providing mental calmness so that individuals can be more rational in facing problems."	Mental calmness, more rational	Positive
	"For problems such as trauma or severe disorders, deeper therapy is still required."	Trauma, deeper therapy, still required	Positive
Subject 3	" <i>Melukat</i> has elements of breathing and self-reflection similar to modern psychological techniques such as mindfulness."	Breathing, self-reflection, similar to modern techniques	Positive
	"This practice does not eliminate the root of the problems, it just helps calm temporarily."	Does not eliminate the root cause, only helps calm temporarily	Neutral

Subject	Main Statement	Keywords	Attitude Conclusion Category
	" <i>Melukat</i> can be part of culture-based therapy if combined with modern techniques."	Part of culture-based therapy, combined	Positive

The third subject is a clinical psychologist with experience in student training and psychological practice. Originating from Bali, this subject has been directly involved in the practice of *Melukat* since childhood, making them a rich source of information regarding the relationship between cultural rituals and psychological therapy. With an educational background from a university in Surabaya, they offer a perspective on how *Melukat* can be integrated with modern psychological approaches.

## Research Findings

Based on the interview with the first subject, it was found that *Melukat* is perceived as a form of religious coping strategy that can help individuals calm their minds. The first subject explained that in the context of Balinese culture, *Melukat* is often performed to purify oneself and to improve the spiritual relationship with God.

*"Melukat is performed in lush, green, and tranquil settings, such as temples, with fresh water poured over you. As a result, people feel more at peace afterward."* the subject stated.

However, the subject emphasized that this practice should not be regarded as a comprehensive psychological therapy, as therapy requires a more complex and structured process. Additionally, the first subject highlighted the difference in objectives between *Melukat* as a religious ritual and psychological therapy. They stated,

*"As for psychological therapy, it has its stages—like the first session for assessment, then the following sessions for more in-depth interventions. *Melukat* is more of a coping strategy to soothe the mind."*

In other words, the subject viewed *Melukat* as a supplementary practice in coping with stress, but not as the primary solution for complex psychological issues such as trauma.

The effectiveness of *Melukat*, according to the first subject, is highly dependent on the individual's belief. They explained, *"For those who don't believe,*

*Melukat may have no effect. But for those who do believe, it can help them feel more at ease."*

The first subject also noted that the modern trend of promoting *Melukat* as a paid tourism package may obscure the essence of this ritual, making it important to educate the public to understand its true purpose.

Overall, the first subject provided the perspective that *Melukat* can be integrated as part of culturally-based therapy, especially for individuals with religious coping strategies. However, they cautioned that this practice should only be used as a supplementary component in modern psychological therapy, not as a replacement for structured therapy.

The interview with the second subject revealed that *Melukat* is understood as a religious ritual aimed at purifying oneself, both physically and spiritually. The subject, who is also a Hindu practitioner, explained that *Melukat* has been a part of their life tradition since childhood. *They stated, "Melukat is usually performed using holy water from a source considered sacred, such as a spring, to cleanse oneself of negative thoughts and energies."*

In their view, this ritual provides tranquility and a sense of spiritual cleanliness, which for some individuals can help in addressing daily life issues.

The second subject assessed that *Melukat* has the potential to function as a culturally-based psychological therapy, but it needs to be adjusted to the needs and characteristics of the individual. They said, "If someone believes in this process, *Melukat* can be very helpful, just like when someone goes to a psychologist with the belief that they will be helped."

They emphasized that belief is a key factor in determining the effectiveness of *Melukat*. Nevertheless, they also cautioned that *Melukat* is more suitable for aiding relaxation or self-reflection than for addressing complex psychological problems.

When asked about the effectiveness of *Melukat*, the second subject provided an opinion consistent with their observations. They stated,

*"Melukat is more about providing peace of mind so that an individual can be more rational in facing problems. However, for issues such as trauma or severe disorders, more in-depth therapy is still necessary."*

The second subject believed that this ritual cannot replace professional psychological therapy but can serve as a relevant support for individuals with strong beliefs in this cultural practice.

The second subject also highlighted the importance of cultural sensitivity when integrating *Melukat* into modern psychological therapy.

*"When it comes to Melukat, we must understand that not everyone believes in this process, especially those who are not from a Balinese cultural background." they explained.*

The greatest challenge, according to the subject, is ensuring that this practice remains neutral and does not become trapped in the perception that *Melukat* is exclusive to a particular religion. Overall, the second subject believes that *Melukat* has therapeutic value that can be combined with modern psychological approaches such as meditation or relaxation techniques. However, they emphasized the need for further research to support the scientific validity of *Melukat* as part of culturally-based psychological therapy.

The interview with the third subject revealed a profound view of *Melukat* as part of religious tradition and its potential in the context of modern psychology. As a Hindu practitioner, the third subject explained that *Melukat* is a ritual that has been part of their life since childhood. They stated,

*"Every major ceremony in Bali typically begins with Melukat as a form of self-purification. This ritual helps me feel more prepared to face the next activities or stages of life."*

The third subject added that *Melukat* creates a sense of rebirth, where one feels they have cleansed their mind and heart from negative burdens. In the context of psychological therapy, the third subject assessed that *Melukat* can be part of a culturally-based healing process but cannot stand alone as a solution to all psychological issues.

*"Its effectiveness is highly dependent on the individual's beliefs. If someone believes that Melukat can help, then it is very likely that this ritual will bring a sense of calm and relief." they said.*

They also noted that for more complex psychological issues, such as trauma or severe depression, additional, more structured interventions are required. The third subject saw the potential of integrating *Melukat* with modern psychological approaches, such as meditation, mindfulness, or relaxation therapy.

*"Melukat incorporates breathing exercises and self-reflection elements similar to modern psychological techniques. For example, mindful bathing or deep breathing. These are elements that have long existed in traditional practice, only now presented in a more modern format." they explained.*

They also observed that this re-packaging could help expand public acceptance of culturally-based therapy.

The biggest challenge in this integration, according to the third subject, is the perception that *Melukat* is still closely associated with a particular religion.

*"Melukat is closely tied to Hinduism, so sometimes people from other faiths feel uncomfortable or reject this therapy. There needs to be education emphasizing that this is a culturally neutral practice that can be used universally."* they said.

Additionally, they pointed out that the lack of scientific research on *Melukat* also presents a barrier to introducing this practice into professional psychology.

The third subject recommended further research on *Melukat* as a culturally-based therapy. They said,

*"Further research is greatly needed to measure its effectiveness and to identify which psychological conditions are suitable for this therapy. If backed by strong data, Melukat could become a unique, culturally based therapeutic innovation."*

They also emphasized the importance of collaboration between psychologists, academics, and cultural practitioners to ensure that this practice can be applied professionally while respecting traditional values.

## Discussion

The interviews with the three subjects were analyzed based on six main themes relevant to This study analyzed the perspectives of three psychological health professionals regarding *Melukat* as a cultural approach to psychological therapy, using the attitude theory framework by [Petty \(1986\)](#) and [Eagly & Chaiken \(1993\)](#). Their attitudes were examined across cognitive, affective, and behavioral dimensions to understand how and why these professionals accepted, rejected, or conditionally supported the integration of *Melukat* into modern therapeutic contexts.

### Subject 1 – Neutral Attitude with Skepticism

The first subject exhibited a neutral attitude, shaped through high elaboration as per Petty's Elaboration Likelihood Model (1986). This indicates that the subject actively engaged in cognitive processing, critically weighing the pros and cons of *Melukat*. The cognitive component is clear in the evaluative judgment: "*Melukat* is merely a coping strategy...", suggesting that the ritual may help with stress relief but lacks therapeutic depth.

Why is the affective response limited? This can be explained through Eagly

& Chaiken's (1993) proposition that affective reactions are often muted when the individual holds a predominantly cognitive orientation toward a topic. The subject does not emotionally connect with *Melukat* as a healing process, suggesting their professional identity prioritizes structured, evidence-based therapy.

The behavioral component is aligned with a pragmatic stance—supporting *Melukat* only as an adjunct tool. This aligns with Eagly & Chaiken's view that behavior follows from the evaluative integration of cognition and affect. Here, a skeptical cognition combined with weak affect results in conditional behavior: use it, but only peripherally. The subject's skepticism stems from a belief that *Melukat* lacks the structural and methodological rigor required for therapeutic effectiveness.

## **Subject 2 – Conditional Positive Attitude**

The second subject held a moderately positive attitude, shaped through moderate elaboration (Petty, 1986). Their engagement with the topic is less analytical than the first subject, yet still thoughtful. The affective component is more visible, “*Melukat* can be very helpful.”, indicating emotional acknowledgment of its potential benefits for those who believe in it.

This affective alignment is likely influenced by the value-congruent beliefs held by the subject, as posited by Eagly & Chaiken (1993). When an individual perceives a practice as aligning with client values, their emotional orientation toward it becomes more favorable. However, this does not extend to full endorsement.

Cognitively, the subject emphasized *Melukat*'s subjective effectiveness, pointing to the variability in individual responses. According to Eagly & Chaiken, such an attitude reflects a balance between contextual appropriateness and professional judgment. Behaviorally, this manifests in a recommendation to integrate *Melukat* with professional therapy, a position that reflects openness but also boundaries—a clear “yes, but” stance.

## **Subject 3 – Positive and Integrative Attitude**

The third subject expressed a highly positive and integrative attitude, also formed through high elaboration. In Petty's model, this suggests that the subject actively processed and personalized their evaluation of *Melukat*, likely due to its perceived overlap with established therapeutic techniques like mindfulness and breathing.

The strong affective orientation “*Melukat* can become part of culturally-based therapy.”, demonstrates emotional investment. According to Eagly & Chaiken, this high affect is often linked with perceived identity congruence. The subject likely sees cultural integration not as a concession but as a professional enrichment.

Cognitively, the subject recognizes *Melukat* as a preparatory technique, useful in regulating emotions and promoting client openness before structured therapy begins. This cognitive evaluation reflects an instrumental view of cultural practices: they are valid insofar as they support therapeutic goals.

The behavioral component is the most proactive among the three. The subject supports the development and adaptation of *Melukat* through scientific inquiry, reflecting Eagly & Chaiken’s idea that attitudes predict behavior especially when both affect and cognition are strong. Challenges, such as the need for empirical validation and respect for religious contexts, are acknowledged not as barriers but as areas for further integration.

The present study investigated the attitudes of three Balinese-based psychological health professionals toward *Melukat* as a culturally grounded therapeutic practice. Our findings extend previous work on cultural competence in mental health. Smith et al. (2023) by moving beyond patient satisfaction and adherence to examine how practitioners themselves negotiate the boundaries between traditional ritual and evidence-based therapy. Whereas Smith et al. (2023) demonstrated that culturally competent interventions improve treatment outcomes, our data reveal the specific cognitive–affective–behavioral processes through which clinicians determine when and how to integrate *Melukat* into their practice.

Consistent with Hobson et al. (2018) process-based framework, all subjects recognized *Melukat*’s capacity to regulate emotion and strengthen social connection (i.e., the affective dimension), but differed markedly in their cognitive elaboration and behavioral intentions. Subject 1’s neutral–skeptical stance echoes Goodwyn (2016) caution that rituals may enhance therapeutic rapport but lack structured mechanisms for addressing complex pathology. In contrast, Subject 3’s integrative approach aligns with Kirmayer (1999) view that indigenous rituals can be “instrumental” when repackaged with psychotherapeutic techniques, such as mindfulness and breathing, thereby fostering client engagement ahead of formal intervention.

By applying Petty and Cacioppo's (2018) Elaboration Likelihood Model

(1986) and Eagly & Chaiken (1993) tripartite attitude framework, this study is among the first to articulate how professional identity and prior cultural exposure shape clinicians' thresholds for adopting ritual-based methods (Suarja et al., 2023; Muthmainah et al., 2023). Unlike prior surveys that treat cultural rituals as a monolithic category, our thematic analysis uncovers three distinct attitude profiles—neutral-skeptical, conditional-positive, and fully integrative, each with different implications for training, policy, and research. This granularity offers a clear roadmap for developing targeted guidelines: for example, enhancing empirical validation to move neutral-skeptical practitioners toward conditional acceptance, or providing cultural-sensitivity education to broaden patient access.

While Grantika et al. (2020) documented *Melukat*'s psycho-spiritual benefits in trauma recovery, our study situates these benefits within professional workflows, highlighting obstacles such as religious exclusivity and lack of standardized protocols. This dialogue clarifies the novelty of our contribution: we do not simply confirm *Melukat*'s therapeutic potential but specify how it can be calibrated via collaborative research with traditional leaders (Artana, 2019; Pertiwi et al., 2020) and controlled trials—to meet clinical efficacy standards. Moreover, by comparing our findings against the Southampton Adaptation Framework (Naeem et al., 2024), we demonstrate that culturally tailored cognitive-behavioral techniques can be synergistically combined with *Melukat* to respect clients' worldviews while preserving therapeutic rigor.

To consolidate *Melukat*'s place within modern psychotherapy, future quantitative studies should measure effect sizes across different clinical populations and levels of religiosity, thereby anchoring ritual practices in a robust evidence base. Additionally, interdisciplinary collaboration uniting psychologists, cultural practitioners, and ritual scholars will be essential to develop accreditation standards that ensure fidelity to both traditional meaning and scientific integrity. Finally, public education campaigns should clarify that *Melukat* is a complementary strategy rather than a standalone treatment, thus preventing misconceptions and optimizing client choice.

In sum, this study advances our understanding of how healthcare professionals negotiate the integration of traditional rituals into evidence-based care, delineating clear pathways for research, training, and policy that can foster genuinely culturally responsive mental health services in Bali and beyond.

## Conclusion

Based on the findings, this study successfully identified the attitudes of healthcare professionals in psychology toward *Melukat* as a culturally-based therapy. Overall, the subjects expressed positive acceptance of *Melukat*, albeit with varying levels of support. The first subject demonstrated a neutral-positive attitude, emphasizing that *Melukat* can serve as a coping strategy to calm the mind but cannot be regarded as a primary psychological therapy due to its lack of structure and depth. The second subject expressed a positive attitude, stating that *Melukat* is highly beneficial for individuals who believe in the practice, although assessment is necessary to ensure its suitability for specific psychological conditions. Meanwhile, the third subject exhibited a cautiously positive attitude, supporting the potential integration of *Melukat* with modern psychological approaches while highlighting the need for further research and the challenges posed by cultural and religious sensitivities in its implementation.

These findings suggest that while psychological healthcare professionals generally support *Melukat* as part of a culturally-based approach, they also recognize its limitations as a standalone therapy. Their understanding underscores the importance of combining traditional practices with modern psychological techniques to develop a comprehensive, evidence-based, and contextual approach. This attitude reflects a professional openness to cultural diversity while maintaining caution to ensure that the practice aligns with effective psychological therapy standards.

This study provides preliminary insights into the attitudes of psychological healthcare professionals toward *Melukat* as a culturally-based therapy. Based on the findings, further research is recommended to examine the effectiveness of *Melukat* in a psychological context using more structured approaches, such as quantitative studies with a broader sample. Additionally, collaboration among psychologists, cultural leaders, and traditional experts is necessary to develop comprehensive guidelines for integrating *Melukat* into modern psychological therapy. Public education is also crucial to enhance literacy on the role of *Melukat* as a complementary, not a substitute, for professional therapy, ensuring its wise and proportional use.

## References

Adebayo, Y. O., Raphael Ekundayo Adesiyan, Chibuzor Stella Amadi, Oluwaseun Ipede, Lucy Oluebubechi Karakitie, & Kaosara Temitope Adebayo. (2024). Cross-cultural perspectives on mental health:

Understanding variations and promoting cultural competence. *World Journal of Advanced Research and Reviews*, 23(1), 432–439.  
<https://doi.org/10.30574/wjarr.2024.23.1.2040>

Adiputra, S., & Mujiyati, M. (2018). Multicultural counseling in cultural perspective indonesia. *1st International Conference on Educational Sciences*, 544–549. <https://doi.org/10.5220/0007044205440549>

Al-Krenawi, A. (2019). The Impact of cultural beliefs on mental health diagnosis and treatment. In *Culture, Diversity and Mental Health - Enhancing Clinical Practice* (pp. 149–165). Springer. [https://doi.org/10.1007/978-3-030-26437-6\\_9](https://doi.org/10.1007/978-3-030-26437-6_9)

Ampuni, S. (2005). Developing culturally-relevant counseling In Indonesia. *Buletin Psikologi*, 13(2), 91–103.

Artana, I. W. (2019). Ideologi Melukat dalam praxis kesehatan. *Widya Duta: Jurnal Ilmiah Ilmu Agama Dan Ilmu Sosial Budaya*, 13(2), 70.  
<https://doi.org/10.25078/wd.v13i2.679>

Balqist, J., Muhamad Ramdan, A., & Nurmala, R. (2023). Dampak tekanan pekerjaan dan lingkungan kerja toxic terhadap kinerja karyawan. *PERFORMANCE: Jurnal Bisnis & Akuntansi*, 13(2), 50–61.  
<https://doi.org/10.24929/feb.v13i2.2608>

Eagly, A. H., & Chaiken, S. (1993). *The psychology of attitudes*. Harcourt Brace Jovanovich College Publishers.

Fadila, A. (2020). Pendidikan dan budaya: Pembentukan konsep diri peserta didik minoritas melalui konseling lintas budaya. *Counsenesia Indonesian Journal Of Guidance and Counseling*, 1(02), 72–78.  
<https://doi.org/10.36728/cijgc.v1i02.1185>

Franjić, S. (2022). Mental health is an integral part of the general health. *MedPress Psychiatry and Behavioral Sciences*, 1(1).  
<https://doi.org/10.33582/mppbs.2022.202209002>

Fung, K., & Lo, T. (2017). An integrative clinical approach to cultural competent psychotherapy. *Journal of Contemporary Psychotherapy*, 47(2), 65–73.  
<https://doi.org/10.1007/s10879-016-9341-8>

Goodwin, B. J., Coyne, A. E., & Constantino, M. J. (2018). Extending the context-responsive psychotherapy integration framework to cultural processes in psychotherapy. *Psychotherapy*, 55(1), 3–8. <https://doi.org/10.1037/pst0000143>

Goodwyn, E. D. (2016). Healing symbols in psychotherapy: A ritual approach.

In *Healing Symbols in Psychotherapy: A Ritual Approach* (pp. 1–232). Taylor and Francis. <https://doi.org/10.4324/9781315651811>

Grantika, P. A., IGA Indah Ardani, & IGA Endah Ardjana. (2020). Healing methods of mental disorders with Malukat: the perspective of Balinese culture. *Open Access Indonesia Journal of Social Sciences*, 3(2), 77–80. <https://doi.org/10.37275/oaijss.v3i2.31>

Havenaar, J. M. (1990). Psychotherapy: Healing by culture. *Psychotherapy and Psychosomatics*, 53(1–4), 8–13. <https://doi.org/10.1159/000288333>

Hill, R. J., Fishbein, M., & Ajzen, I. (1977). Belief, attitude, intention and behavior: an introduction to theory and research. In *Contemporary Sociology* (Vol. 6, Issue 2). Addison-Wesley. <https://doi.org/10.2307/2065853>

Hobson, N. M., Schroeder, J., Risen, J. L., Xygalatas, D., & Inzlicht, M. (2018). The psychology of rituals: An Integrative review and process-based framework. *Personality and Social Psychology Review*, 22(3), 260–284. <https://doi.org/10.1177/1088868317734944>

Ketut Suarja, I., Sudiarta, M., Luh Eka Armoni, N., Gusti Putu Sutarma, I., & Wayan Jendra, I. (2023). Spiritual Tourism: Self-healing through Melukat Ritual in Bali. *International Journal of Multicultural and Multireligious Understanding*, 10(03), 47–55. <http://dx.doi.org/10.18415/ijmmu.v10i3.4548>

Kirmayer, L. J. (1999). Myth and ritual in psychotherapy. *Transcultural Psychiatry*, 36(4), 451–460. <https://doi.org/10.1177/136346159903600404>

Koslofsky, S., & Domenech Rodríguez, M. M. (2017). Cultural adaptations to psychotherapy: Real-world applications. *Clinical Case Studies*, 16(1), 3–8. <https://doi.org/10.1177/1534650116668273>

Lotz, V., Marichez, H., & Baubet, T. (2023). Post-traumatic grief and the need for ritual in therapy. *Soins*, 68(872), 47–50. <https://doi.org/10.1016/j.soin.2023.01.012>

Mohankumar, R. (2022). The Influence of cultural stigma on perceptions of mental illness [Master's Theses]. In ୟ୍ୟୟ (Issue 8.5.2017). <https://doi.org/10.31979/etd.hsvn-s9jy>

Muryani, N. M. S., Winarni, I., & Setyoadi. (2018). Balinese traditional treatment (Balian) in patients with mental disorders. *Belitung Nursing Journal*, 4(4), 397–402. <https://doi.org/10.33546/BNJ.425>

Muthmainah, F., Ardiningrum, A. A. F., & Oktarina, L. Z. (2023). The Tradition

of Melukat in trauma healing. *KnE Social Sciences*, 8(19), 207–219–207–219. <https://doi.org/10.18502/kss.v8i19.14365>

Naeem, F., Phiri, P., & Husain, N. (2024). Southampton adaptation framework to culturally adapt cognitive behavior therapy: An update. *Psychiatric Clinics of North America*, 47(2), 325–341. <https://doi.org/10.1016/j.psc.2024.02.009>

Ostrom, T. M. (1969). The relationship between the affective, behavioral, and cognitive components of attitude. *Journal of Experimental Social Psychology*, 5(1), 12–30. [https://doi.org/10.1016/0022-1031\(69\)90003-1](https://doi.org/10.1016/0022-1031(69)90003-1)

Parmiti, D. P., & Simamora, A. (2021). Development of e-content using segmentation principles with e-assessment in the development of teaching materials course. *Proceedings of the 2nd International Conference on Technology and Educational Science (ICTES 2020)*, 540(Ictes 2020), 83–90. <https://doi.org/10.2991/assehr.k.210407.218>

Patel, M. X. (2004). Attitudes to psychosis: Health professionals. *Epidemiologia e Psichiatria Sociale*, 13(4), 213–218. <https://doi.org/10.1017/S1121189X00001718>

Patel, V. (2024). Social and Cultural Determinants of Mental Health. *Mental Health Care Resource Book*, 55–70, 55–70. [https://doi.org/10.1007/978-981-97-1203-8\\_3](https://doi.org/10.1007/978-981-97-1203-8_3)

Pertiwi, N., Darmana, I. K., & Kaler, I. K. (2020). Tradisi makawas pada kehidupan sosiokultural masyarakat Bali Mula. *Humanis*, 24(4), 448. <https://doi.org/10.24843/jh.2020.v24.i04.p14>

Petty, R. E., & Cacioppo, J. T. (2018). Attitudes and persuasion: Classic and contemporary approaches. In *Attitudes and Persuasion: Classic and Contemporary Approaches* (1st ed.). Routledge. <https://doi.org/10.4324/9780429502156>

Ranimpi, Y. Y., Hyde, M., & Oprescu, F. (2023). An indigenous psychology perspective for appropriate mental health services and research in Indonesia. *Buletin Psikologi*, 31(2), 231. <https://doi.org/10.22146/buletinpsikologi.77298>

Ratnasari, D. (2023). The influence of sociocultural practices of society on health. *International Journal of Health, Medicine, and Sports*, 1(4), 12–15. <https://doi.org/10.46336/ijhms.v1i4.17>

Sharan, P., & Krishnan, V. (2025). Principles: Mental health resources and

services. In *International Encyclopedia of Public Health*. International Encyclopedia of Public Health. <https://doi.org/10.1016/b978-0-323-99967-0.00187-3>

Siedler, A., & Idczak-Paceś, E. (2021). Difficulties in employment perceived by individuals with ASD in Poland. *Advances in Autism*, 7(1), 49–59. <https://doi.org/10.1108/AIA-11-2019-0042>

Silva, F. B., Silva, T. R. C. C., Silva, R. B., Melo, E. K. M. de, Mello, P. R. R. O., Sousa, K. S. de O., Melo, M. H. F. de, Soares, P. G., & Matos, D. C. de. (2024). Intersections between culture and health: how the concepts of culture shape the perception of mental disorders. *Contribuciones a Las Ciencias Sociales*, 17(6), e7595. <https://doi.org/10.55905/revconv.17n.6-199>

Smith, L. T., Jones, A. R., & Williams, K. M. (2023). Cultural competence in mental health care: A systematic review. *International Journal of Mental Health*, 52(1), 15–30.

Soto, A., Smith, T. B., Griner, D., Rodríguez, M. D., & Bernal, G. (2019). Cultural adaptations and multicultural competence. In *Psychotherapy Relationships that Work* (pp. 86–132). Oxford University Press. <https://doi.org/10.1093/med-psych/9780190843960.003.0004>

Subu, M. A., Holmes, D., Arumugam, A., Al-Yateem, N., Maria Dias, J., Rahman, S. A., Waluyo, I., Ahmed, F. R., & Abraham, M. S. (2022). Traditional, religious, and cultural perspectives on mental illness: a qualitative study on causal beliefs and treatment use. *International Journal of Qualitative Studies on Health and Well-Being*, 17(1). <https://doi.org/10.1080/17482631.2022.2123090>

Thomas, T. M., Gopal, B., & Sasidharan, T. (2018). Towards a culturally-informed counselling and psychotherapy. *Psychosocial Interventions for Health and Well-Being*, 241–252, 241–252. [https://doi.org/10.1007/978-81-322-3782-2\\_17](https://doi.org/10.1007/978-81-322-3782-2_17)

Vanessa, V., & Nawawi, M. T. (2022). Pengaruh lingkungan kerja, stres kerja, dan motivasi terhadap kepuasan kerja karyawan. *Jurnal Manajerial Dan Kewirausahaan*, 4(2), 497. <https://doi.org/10.24912/jmk.v4i2.18257>