

A study to assess the knowledge and attitude of family members of clients with schizophrenia regarding schizophrenia, who attends selected mental health institutions in Faridabad.

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Abstract

This study investigates the attitudes and knowledge of family members of individuals diagnosed with schizophrenia, focusing on their understanding of the illness and its implications. Conducted at a selected mental health institution in Faridabad, the research employed a descriptive survey method, utilizing structured interviews with 50 family members. The findings reveal that while a significant portion of family members possesses some knowledge about schizophrenia, their overall understanding remains inadequate. Specifically, only 50.4% of participants demonstrated sufficient knowledge, and 48.64% exhibited a favorable attitude towards managing the condition. The study underscores the necessity for structured teaching programs (STPs) to enhance knowledge and improve attitudes among family members, thereby fostering better coping mechanisms and reducing the stigma associated with mental illness.

Introduction

Schizophrenia is a chronic and severe mental disorder that affects approximately 1% of the global population. Characterized by disruptions in thought processes, perceptions, emotional responsiveness, and social interactions, schizophrenia poses significant challenges not only for those diagnosed but also for their families. Families often experience confusion, fear, and stigma associated with the illness, which can hinder effective support for affected individuals. This study aims to assess the knowledge and attitudes of family members regarding schizophrenia to identify gaps in understanding that may affect care and support.

Problem Statement

A study to assess the knowledge and attitude of family members of clients with schizophrenia regarding schizophrenia, who attends selected mental health institutions in Faridabad.

Objectives

1. To assess the knowledge levels of family members regarding schizophrenia.
2. To evaluate the attitudes of family members towards individuals diagnosed with schizophrenia.
3. To identify demographic factors influencing knowledge and attitudes among family members.
4. To recommend structured teaching programs (STPs) aimed at improving knowledge and attitudes.

Operational Definition

- Knowledge: The understanding or awareness that family members possess regarding schizophrenia, including its sign and symptoms, causes, management strategies, and impact on patients.
- Attitude: The feelings or beliefs held by family members towards schizophrenia and those affected by it.
- Structured Teaching Program (STP): A planned educational intervention designed to enhance knowledge and improve attitudes among family members regarding schizophrenia.

Review of Literature

The literature highlights various aspects of caregiver burden and family dynamics in managing chronic mental illnesses like schizophrenia.

Research indicates that family members often experience a high degree of stress and burden when caring for individuals with schizophrenia. A study by Grad and Sainsbury (1963) found that family caregivers reported feelings of helplessness, anxiety, and depression due to the unpredictable nature of the illness. This caregiver burden is compounded by societal stigma associated with mental illness, which can lead to social isolation and further exacerbate emotional distress among family members.

Gupta M, Prashant C (2010) reported the community attitudes toward mental illness, the influence of contact and demographic variables. Residents of three large rural cities were surveyed to investigate the influence of psychiatric

exposure, and demographic variables on community attitudes toward mental illness. Samples drawn from the three communities which differed according to the availability of mental health services, were administered the opinions about mental illness scale, with questionnaire items that elicited measures of the standard demographic data. Multiple regression analysis showed that demographic but not 'exposure' variables had a significant influence on community attitudes. Contrary to previous findings, the order, less-educated members of the public were more positive in their opinions.

Chand Sharma (2012) Studied community attitudes towards people with mental health problems. This paper addresses some methodological issues related to the generation of knowledge for mental health practices. It is suggested that a knowledge and understanding of attitudes towards the mentally ill has the potential to inform policy and practice regarding the establishment of community mental health facilities in order to encourage their acceptance by the public. Traditional approaches to attitude research are outlined followed by the proposal of all alternative approach, discourse analysis.

Research by Andreasen (1984) emphasizes that understanding the biological underpinnings of schizophrenia can help demystify the disorder for families. By recognizing that schizophrenia is a complex interplay of genetic, environmental, and neurobiological factors, families may develop more compassionate attitudes towards affected individuals.

Educational initiatives targeting family members are essential for improving knowledge and attitudes regarding schizophrenia. Studies suggest that when families are provided with accurate information about the disorder, they are more likely to adopt supportive behaviors and reduce stigma. For example, Walsh (1994) noted that educational programs focusing on communication strategies could enhance familial relationships and facilitate better management of symptoms. Additionally, addressing stigma is crucial for fostering an environment where families feel comfortable discussing mental health issues openly. Research indicates that stigma not only affects how families view their loved ones but also impacts their willingness to seek help or access resources (Corrigan et al., 2012).

Methodology

A descriptive survey design was employed for this study. Data were collected from 50 family members of individuals diagnosed with schizophrenia at a selected mental health institution in Faridabad using structured interview schedules based on purposive sampling techniques. The survey assessed demographic information as well as knowledge and attitude scores related to schizophrenia.

Data Analysis

Statistical analysis was conducted using descriptive statistics to summarize data, along with correlation coefficients to examine relationships between variables.

Ethical Considerations

Informed consent was collected from 50 family members of individuals diagnosed with schizophrenia at a selected mental health institution in Faridabad, with a special mention that the data being collected shall be kept confidential and only be used for research purpose. Additionally, the freedom to drop out from research was also provided. The dropout rate was All the necessary permissions including ethical permissions to conduct the research was obtained from competitive authority of the selected mental health institutions in Faridabad.

Financial Implications and Conflict of Interest

The research was entirely self-funded, without any external financial support. No conflicts of interest were identified or declared by the researcher involved in this study.

Results

The study assessed the knowledge and attitudes of family members of individuals diagnosed with schizophrenia, utilizing a structured interview schedule with a sample size of 50 participants. The results are summarized as follows:

Knowledge Scores

- **Overall Knowledge:** Only **50.4%** of family members demonstrated adequate knowledge about schizophrenia.
- **Specific Knowledge Areas:**
- **Meaning of Schizophrenia:**
 - ☐ Males: **65.5%**
 - Females: **65.5%**
- **Causes of Schizophrenia:**
 - ☐ Males: **55.2%**
 - Females: **43.8%**
- **Signs/Symptoms of Schizophrenia:**
 - ☐ Males: **59.9%**
 - Females: **52.3%**

- **Management of Schizophrenia:**

- Males: **51.6%**

- Females: **44.8%**

- **Attitude Scores**

- **Overall Attitude:** Approximately **48.64%** of family members exhibited a favorable attitude towards managing schizophrenia.

- **Specific Attitude Areas:**

- **Signs/Symptoms Understanding:**

- Both genders showed high scores, with an average of **83.2%**.

- **Management Attitudes:**

- Females: **37.7%**

- Males: **38.5%**

- **Understanding the Meaning of Schizophrenia:**

- Females: **40%**

- Males: **49.7%**

- **Causes Understanding:**

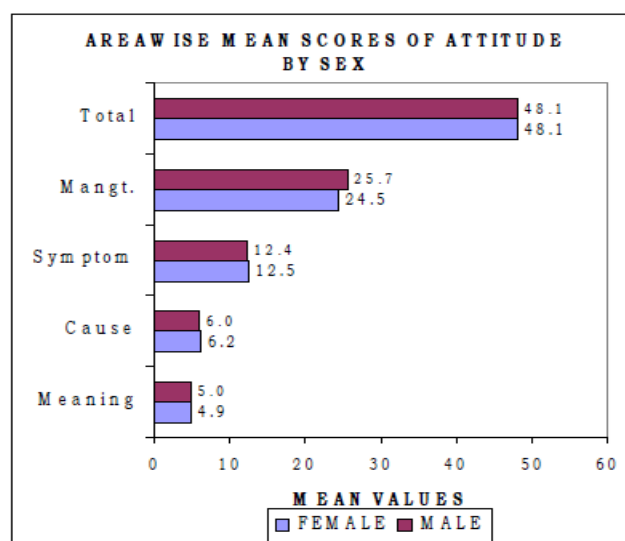
- Females: **62%**

- Males: **60%**

Area wise attitude scores related to schizophrenia:

Sl no	Areas	Sex	N	Ques tion	Min. score	Maxi Score	Mean	% of Mean	SD	t- value	p- value	inference
1	Meaning	F	21	2	3	6	4.9	49	0.77	0.5	<0.05	NS
		M	29	2	2	7	4.97	49.7	1.24			
2	Causes	F	21	2	4	8	6.24	62.4	1.09	0.62	<0.05	NS
		M	29	2	3	10	6	60	1.51			
3	Signs & symptoms	F	21	3	9	15	12.48	83.2	1.5	0.22	<0.05	NS
		M	29	3	9	15	12.48	83.2	1.54			
4	Managem ent	F	21	13	18	31	24.52	37.7	3.67	0.83	<0.05	NS
		M	29	13	17	43	25.07	38.5	5.49			
	Overall	F	21	20	39	55	48.05	48.5	4.22	0.81	<0.05	NS
		M	29	20	35	70	49.07	49.07	6.73			

NS- Non- Significant.



Area wise mean Attitude score with sex.

Correlations and Associations

- There was a statistically significant correlation between knowledge and attitude scores, with $r=0.42$ ($p < 0.01$), indicating that higher knowledge levels are associated with more favorable attitudes.
- Significant associations were found between knowledge scores and demographic variables such as residence, education, and income levels, suggesting that these factors influence family members' understanding of schizophrenia.
- No significant relationship was identified between attitude scores and demographic variables.

The both sexes combined scores of knowledge and attitude

Category	Sex	N	Questions	Min. scores	Maxi scores	Mean	SD	Median
Knowledge	M+F	50	28	15	40	28.76	5.96	30
Attitude	M+F	50	20	35	70	48.64	5.78	49.5
Correlation between knowledge and attitude : $r=0.42$, $p<0.01$								

Interpretation

The findings reveal a concerning level of inadequate knowledge (50.4%) and unfavorable attitudes (48.64%) among family members regarding schizophrenia.

1. **Knowledge Gaps:** The data indicates that while many family members understand the basic meaning and signs/symptoms of schizophrenia, they struggle with comprehending the causes and management strategies effectively. This gap in knowledge can lead to misconceptions and inadequate support for affected individuals.

2. **Attitude Implications:** The relatively low favorable attitude scores regarding management suggest that family members may feel overwhelmed or helpless in supporting their loved ones effectively. This can exacerbate the challenges faced by individuals with schizophrenia, as supportive family environments are crucial for recovery.

3. **Demographic Influences:** The significant associations between knowledge scores and factors such as education and income highlight the need for targeted educational interventions that consider these variables to improve understanding among families.

4. **Correlation Insights:** The moderate positive correlation between knowledge and attitude underscores the potential for educational programs to enhance both understanding and supportive behaviors among family members.

5. **Recommendations for Interventions:** Given these findings, there is a clear need for structured teaching programs (STPs) aimed at educating family members about schizophrenia's complexities, including its management strategies. Such programs could significantly improve their knowledge base and foster more positive attitudes towards caregiving.

Conclusion

This study highlights the urgent need for increased educational efforts directed at family members of individuals with schizophrenia. By addressing gaps in knowledge and fostering more favorable attitudes through structured teaching programs, we can enhance the support systems available for those affected by this challenging condition.

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