



Correlation Family Support on Independence of Patients Schizophrenic Activities Daily Living (ADL)

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Abstract

Family support for schizophrenics has proven to be very effective in supporting patients' healing and independence. And this program has been widely recommended by several minimum service standards published internationally. However, the reality is that the family is not yet fully supported, even though good family support can increase patient independence. Aims to find out the relationship between family support and ADL independence in schizophrenia patients. The research design used in this study was a correlation method that used a cross-sectional approach, with samples in this study were 70 family members with schizophrenia. The variables in this study are family supports (instrumental, informational, appreciation, assessment). Based on the results of statistical tests using the Spearman Rank shows ρ value for instrumental family support (0.020), informational family support (0.031), family support award (0.021), and family support assessment (0.021). Full family support is necessary and given to sufferers, especially schizophrenics. Comprehensive family support can be given if the caregiver is a member of the nuclear family who has a good psychological closeness with the sufferer. The results of this study can explain future approaches to dealing with the family support of schizophrenia patients

Keywords: *ADL Independence, Family Support, Schizophrenia.*

Introduction

Schizophrenia is a neurological disease that can affect the quality of life of patients, in the form of a client's perception, way of thinking, language, emotions, and social behavior [1, 2]. Schizophrenic illness has many domains and associated problems and depression is one important associated problem that most of the patients suffering [3] According to the latest evidence of schizophrenia, attacks involve many factors, namely changes in the physical structure of the brain, brain chemistry, and genetic factors [4].

According to the Indonesian Ministry of Health, the results of the survey showed the prevalence of households with members suffering from schizophrenia/ psychosis of 7/1000 population with 84.9% having received treatment. On the other hand the number of people with mental-emotional disorders among adolescents aged > 15 years by 9.8%. This figure increased compared to 2013 which was 6%.

In East Java itself won the title as the 6th Rank Province nationally, the number of families with family members who suffer or suffer from schizophrenia, amounting to 6 people per mil [5]. With a very high prevalence, it will certainly harm the lives of patients with schizophrenia, such as impaired independence, in the function and role of daily life that is carried out, self-care, compliance with drug consumption, work, school, and other functions [6].

Besides schizophrenia patients often see a setback which is marked by the disappearance of motivation in themselves and responsibilities, not participating in activities, and social relationships, fundamental abilities that are disrupted one of the Activities of Daily Living (ADL) and also showed a decrease in independence in patients with schizophrenia, especially in the independence of aspects of eating, bathing, toileting, and personal hygiene [1].

Therefore it can be concluded that patients with schizophrenia will experience a setback in their level of independence [7]. Therefore, with a high level of dependency, it requires the participation of various parties to support and provide effective care for schizophrenics, one of which must contribute is the family because family support is needed for healing as well as the most important independence for stress patients who usually progress to the symptoms of schizophrenia, families who tend to be parenting wrong and full of burden is thought to worsen the condition of schizophrenic patients [8].

Also, schizophrenia causes negative symptoms such as flat affect, reduced interest in activities in life, can not start or end activity, this can be a reference that schizophrenics will experience interference in their daily activities. The determination of functional independence can identify the capabilities and limitations of the client so that it can facilitate the selection of appropriate interventions. Schizophrenics can experience independence disorders in the function and role of daily life that is carried out, such as self-care, medication consumption compliance, work, school, and other functions, sufferers will greatly need the help of others to live life [9, 10].

The independence of schizophrenic patients is indicated by the return of patients into a community environment and can also be accepted by the community, one aspect for the creation of independence is family support for sufferers [11]. Considering this matter, some families feel psychological pressure related to their overall understanding of one of their family members who have schizophrenia. The results of this study can explain future approaches to dealing with the family support of schizophrenia patients for the methods used.

Methods

The design was used Correlational with a cross-sectional approach was used in this study to determine the association between family support with the independence status of schizophrenic patients., aiming to determine the Relationship of Family Support. Seventy participants were involved in this study by using a random sampling technique. A set of the questionnaire about family support was used to measure family support and the KATZ index utilized to measure the status of schizophrenia patients' independence.

It's already mentioned above. 70 participants were employed in this study. The age of schizophrenics ranged between 31-40 years old. The diagnosis of schizophrenia is based on the Diagnostics and Statistical Manual for Mental Disorders-IV-TR (DSM-IV-TR) criteria for schizophrenia. The diagnosis of schizophrenia is made by a psychiatrist at Mental Hospital and the nearest Public Health Center, Malang Regency. Meanwhile, the severity was assessed after Research subjects were selected using the sampling method in Malang District Health Center Exclusion criteria for parents experience mental retardation or have other chronic illnesses physical or mental illness, and being a single parent. All parents signed consent before participation in this study.

Results

Data were firstly analyzed by normality data with the results of P-Value ≤ 0.05 . The statistical analysis used the Pearson test analysis was utilized in this study to determine the association between family support and the ADL independence of schizophrenic patients. The median value of the respondent's age is 2 (31-40) and a minimum-maximum of 1-3 and a median value of sex 1 (male) and a minimum-maximum of 1-2.

Table 1 Distribution of Frequency of Respondents Based on Family Support in patients with schizophrenia

S.No	Family Support	F	%
1	Well	34	48.6 %
2	Enough	27	38.6 %
3	Less	9	12.9 %
	number	70	100 %

Table 2: Independence Frequency Distribution (Indekz Katz) for schizophrenic patients

No	Independence	F	%
1	independent	55	78.6 %
2	Partial	15	21.4 %
	Jumlah	70	100 %

Table 3: Results of data analysis with Spearman Rank family support for patients with schizophrenia

Independence Of Patients Schizophrenic Activities Daily Living	
Informational family support	r : 0,257 p : 0.031 n: 70
Instrumental family support	r : 0,456 p : 0.020 n: 70
Family support assessment	r : 0,265 p : 0.021 n: 70
Family support award	r : 0,265 p : 0.021 n: 70

Discussion

This study has analyzed the association between family support and the ADL independence in schizophrenics. Based on the result, the majority of the participants (n=34;48.6%) have good family support as can be seen in table 1 [12]. This is because schizophrenics are members of core families making it possible to have a more intense psychological bond [6].

Although it is stated that there is no guarantee that closeness is decisive in carrying out the function of the whole family. Family support is one type of support to achieve optimal health levels. Good family support is a capital to help patients with schizophrenia remain stable and able to perform daily activities independently, prevent recurrence and stabilize the patient's condition will be maintained. Good family support can provide benefits for individuals obtained from others, so this individual aware and know other people give attention, appreciation, and love [13].

Family support can be in the form of Instrumental support, the family acts as a definite and practical aid provider acts as a protector for the most conducive place to rest, and helps control emotions [14]. Schizophrenics need support from their families because this will make clients feel valued and family members are ready to provide support to provide assistance and life goals that individuals want to achieve [15].

The family must give patients comfort, feel loved even when experiencing a problem, help in the form of enthusiasm, empathy, trust, attention so that the client who receives feels valuable. The family must also provide information by suggesting a good place, doctor and therapy for the client, and providing adequate facilities and funds for the client's treatment process. Furthermore, the family needs to provide encouragement and motivation given by the family to the client, giving positive appreciation to the ideas or feelings of patients to be able to build client self-esteem [16, 4].

Based on research data and research facts obtained, the conclusion can be drawn that patients with schizophrenia have, on average, good or sufficient family support. Family support is a valuable asset for patients to develop independently because the main support of patients is the family itself [7].

So hopefully this good family support can remain consistently maintained. At present, there are no specific written or written interventions or policies regarding family support for sufferers [17]. Independence of schizophrenic patients focuses on the independence aspects of the ability of Daily Living Activities characterized by the ability to care for themselves, including bathing, eating, dressing, going to the toilet) as well as moving activities.

Out of 70 families included in this study, 55(78.6%) reported that the family member who suffered from schizophrenia can demonstrate full independence in practicing activity daily living with the highest. This means they can do their daily activities (ADL) independently such as bathing, dressing, moving, going to the toilet, urinating control, defecating and eating [11].

Full independence that can be done by patients can not be separated from the extraordinary family support factor, where the family is willing to love, pay attention, understand the situation, play an active role in every treatment, care for patients, and finance patient treatment. In practice, the immediate family with biological statuses such as father, mother, and child are the person who usually plays the role and takes responsibility as caregivers at home[18].

Another factor is the compliance of patients for control and taking medication, the majority of patients have at least more than 2 months of treatment, while the compliance aspect of taking medication cannot be separated from the role of caregiver at home who is willing to remind patients to control and take medication regularly [19]. Based on the results of the study, it can be seen that the majority of schizophrenic clients can carry out their daily activities independently, belonging to the independent category. Independence is the need for individual self-perception in response to environmental demands or other parties.

The definition of independence illustrates the existence of freedom for each individual who is independent to determine the actions he wants to show, displaying his life steps, life goals, and values to be adhered to and believed in [20]. With this definition, it appears that an independent person still has the freedom responsible for functioning as a member of the group.

Independence in fulfilling the daily activities of the sufferer can be influenced by other factors, in the form of age, development status, cognitive functioning, psychosocial functioning, stress levels, and mental status [21]. Daily Living Activities ability is characterized by the ability to care for oneself, both bathing, eating, dressing, going

to the toilet as well as moving activities [22]. Family support provided by caregivers at home who is the closest person such as father, mother, and child in the form of attention, announcing care, and financing is the highest aspect of giving. This support factor makes the majority of patients independent in the full category [23].

Other aspects of family support provided such as assistance, attention, time, facilities, efforts to find deficiencies, explanation of the results of the examination, control alarms and taking the medication regularly and alarm reminders of bad behaviors for patients also play a major role in the independence of schizophrenia patients because this aspect support is in the sufficient category [24].

The results of the study show that family support is high, Other studies explain the importance of families to support people with schizophrenia. so social functioning in post-treatment Schizophrenia patients is also high wherein social functioning there are ADL aspects in it.

Conclusion

Full family support is necessary and given to sufferers, especially schizophrenics. Comprehensive family support can be provided if the role of the caregiver is a nuclear family member who has a good psychological closeness with the sufferer. This family support must be able to be one of the promotive and preventive programs for preventing mental disorders to provide better mental health services at all levels.

Recommendations

The authors recommend that there must explain future approaches to dealing with the family support of schizophrenia patients

Conflict of Interest

The authors declare that there is no conflict of interest regarding the publication of this article.

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