SOCIAL SUPPORT FOR SCHIZOPHRENIC PATIENTS

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Abstract

Schizophrenia is a descriptive term for group of psychotic disorders characterized by gross distortions of reality, withdrawal from social interactions and disorganization and fragmentation of perception, thought and emotion. Various forms of psychotherapy have been used to help schizophrenic patients to reestablish bonds of human relatedness, eliminate specific symptom, correct distorted attitudes and develop interpersonal and other competences for caring with stresses in life. The Researcher used Descriptive design as the study focused on the institutionalization and rehabilitation of the patient. For the present study patients accompanying the caretakers for follow-up to Neuro centre, Trichy; Saranya hospital, Trichy; Sowmanasaya hospital, Trichy were taken as the universe. The Major findings was 70% of patients were identified in age group 30 years and above. A significant majority of patients 65% were males and 50% were married. 55% of the patients were married on belief cure after marriage.

INTRODUCTION

Schizophrenia is a descriptive term for group of psychotic disorders characterized by gross distortions of reality, withdrawal from social interactions and disorganization and fragmentation of perception, thought and emotion.

Support through psychotherapy

Various forms of psychotherapy have been used to help schizophrenic patients to reestablish bonds of human relatedness, eliminate specific symptom, correct distorted attitudes and develop interpersonal and other competences for caring with stresses in life.

Support through Educational Groups

Patient discusses the ways of managing their psychotic experiences and the leader takes an active role in structuring the group and imparting information. Cohesion is established through sharing a common problem.

Support through problem solving groups

These groups take the patient through a series steps in dealing with problems especially those in interpersonal realm, with the help of group members, they clarify their problem then devise and evaluate a set of alternative solutions.

Support through Milieu Therapy

Milieu therapy and Therapeutic community are used to refer aspects of society and culture of the ward in hospital which may be influential in reducing behavioural disturbances of the patient.

Rehabilitation

Rehabilitation is a process that must be continuously applied within the hospital and sustained into the community. The rehabilitation requirements of a particular schizophrenic patient can be conceptualized by his position as a two dimensional grid that expresses the degree of needs both domestic and occupational rehabilitation.
REVIEW OF LITERATURE

A study was conducted by Jayabharathi in 2001 on “Superstitious beliefs in mental illness in Odugampatti Darga” and it was found that 96.7% have awareness about psychiatric hospital where as only 33% of the respondents were taking their patients to psychiatric hospital.

A study was conducted on the “Religious treatment for mentally ill in Trichy district” by Nandhini in 2001 and it was found that 66% were schizophrenics and 34% were diagnosed as manic depressive psychoses. Regarding the remedy to treat mental illness 68% opined that the temple treatment will cure mental illness and 52% said that sprinkling of holy water will improve the condition of the patient and 46% had an idea that marriage can cure mental illness.

AIMS AND OBJECTIVES
1. To know the type of treatment sought and number of relapses among the schizophrenic patients.
2. To assess the level of support extended to the schizophrenic patients by the care takers.
3. To find out the type of rehabilitation adopted for the patients care takers.
4. To assess the social relationship of schizophrenic patients.
5. To find out the job placement after treatment.

HYPOTHESES
1. There is a significant association between marital status and development of paranoid schizophrenia.
2. There is an association between emotional support and family pathology.
3. There is an association between gender difference and level of support.
4. There is an association between Relapse and Level of support.

RESEARCH DESIGN

The Researcher used Descriptive design as the study focused on the institutionalization and rehabilitation of the patient. The study also describes the care and attention given by family members and their interest towards the treatment of the patient.

Universe

The exact number of treated schizophrenic patient was indefinite. For the present study patients accompanying the caretakers for follow-up to Neuro centre, Trichy; Saranya Hospital, Trichy; Sowmanasya Hospital, Trichy.

Sampling

The Researcher adopted Non – Probability Sampling Method to select the sample size of 30 as the universe is indefinite.

Tools of Data collection

The researcher administered self-prepared questionnaire as a primary tool for data collection.
Table indicates Chi-Square test for marital status and development of paranoid schizophrenia

<table>
<thead>
<tr>
<th>S.no</th>
<th>Type of illness</th>
<th>Married</th>
<th>Unmarried</th>
<th>Statistical inferences</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Paranoid</td>
<td>16</td>
<td>6</td>
<td>Chi-square = 8.019</td>
</tr>
<tr>
<td>2</td>
<td>Other types</td>
<td>5</td>
<td>13</td>
<td>Df=1=3.84</td>
</tr>
</tbody>
</table>

The calculated value of chi-square is more than the table value. Hence hypothesis holds false. There is association between marital status and development of paranoid schizophrenia.

MAJOR FINDINGS
- 70% of patients were identified in age group of 30 years and above.
- A significant majority of patients 65% were males and 50% were married.
- 55% of the patients were married on belief that illness will be cure after marriage.
- 20% of the patients were graduates
- Paranoid schizophrenia was predominant among 57.5% of the patients
- 27.5% of the patients availed residential rehabilitation.
- Nearly 50% of the patients resorted to religious treatment and 7.5% of the patients adopted Allopathy in the beginning stage itself
- More than half of the patients 54% had relapse only once and 45% of the patients did not have relapse due to regular treatment and family support
- A significant percent of respondents 65% extended high level of support to the patients.
- A High majority of the patients 91% adopted Residential Rehabilitation.

- 40% of the patients were regular in going for job.

SUGGESTIONS
- Like alcoholic anonymous an anonymous group for schizophrenic patients should be formed in every psychiatric hospital.
- Residential Rehabilitation should be availed by every patient in order to avoid relapse.
- The Family members should be motivated to leave the patient in half way homes, day care centers, and partial hospitalization to avoid relapse.
- In spite of advancement of science and technology, religious treatment still persists in the society. The psychiatrist and social workers should emphasize the need and importance of specialized psychiatric treatment.

BIBLIOGRAPHY