CARE GIVER BURDEN IN SCHIZOPHRENIA: EFFICACY OF AN EMPOWERMENT BASED CASE WORK APPROACH

S. Vajeeha Bhanu Zonal Coordinator, WOW Project, Tirupati. A.P.

Dr. Anuradha. K Professor, Department of Social Work, Sri Padmavati Mahila Visvavidyalayam, (Women's University) Tirupati. A.P.

ABSTRACT

Schizophrenia is a baffling disorder which creates an enormous pressure on the caregivers as a result of which they face intense physical and emotional stress. Though families in India often display strong resilience, caring for a mentally ill relative can indeed be an emotionally draining experience. Burden in families of mentally ill has been a subject of many studies that have also highlighted the need for psychosocial interventions to alleviate caregiver burden in schizophrenia. In this context, this study aimed at gauging the efficacy of adopting an empowerment based approach while working with three caregivers of individuals suffering from schizophrenia. Using a three stage approach which involves pre assessment of the caregiver burden, involving the caregivers in an empowerment based intervention sessions, and post assessment of the caregiver burden, findings reveal a significant difference in the perceived burden before and after casework intervention.

Introduction

Schizophrenia is a chronic mental illness characterized by a group of disorders where in the patients experience delusions, hallucinations, have trouble with thinking and concentration, and lack motivation. While causes and symptoms vary considerably between individuals the symptoms can be very disabling. According to World Health Organisation (2016) Schizophrenia affects more than 21 million people worldwide but is not as common as many other mental disorders. It is more common among males (12 million), than females (9 million). Schizophrenia also commonly starts earlier among men.

Schizophrenia often results in a loss of social functioning in the affected individuals and family remains the major source of care for the patient. Family members who are the primary care givers are significantly distressed as a result of having family members with Schizophrenia and they face lots of burden including care burden, fear and embarrassment about illness signs and symptoms, uncertainty about the course of the disease, lack of social support, and stigma. Burden refers to the negative impact of the individual’s mental illness on the entire family. Many studies (Bansal et al 2017; Disha et al 2015; Farshid et al 2015; Aditya et al 2014; Swaroop et al 2013) have highlighted the experience of burden in families and psychological stress of the care givers of psychiatric patients. The care givers spend more time as they live with the patients; handle their psychotic symptoms and behavior problems and also the care giving demands of the patients.

Farshid et al 2015 noted that Mental health professionals need to develop more innovative programs for families of schizophrenic patients. Furthermore, as a replacement for supporting the families and easing their burdens, it may be more effective to include them in the health care team by assigning specific tasks and providing the required resources to them to perform such tasks. Wolthaus et al (2002) suggest that psycho educational programs should address the severity of disorganization symptoms to reduce caregiver burden in the early phase of schizophrenia. Caregivers of Schizophrenia patients are a ‘high risk group’ and they need comprehensive interventions to reduce their burden related issues (Victor and Olatunde 2013) Kannappan (2009) observed that psycho social intervention was effective in bringing about symptomatic and functional recovery and about change in their distress, work, and burden of the carers.

Pamela et al (2008) highlighted the need for relevant interventions where the needs of the family are addressed. Shivani et al (2017) opined that there is need for psychological assistance and social support for the vulnerable caregivers to help them reduce caregiver burden and employ positive coping strategies. Awad and Oruganti (2008) opined that though there has been considerable improvement in research activities there is need for evaluating the effectiveness of intervention with family members of schizophrenia.

In light of the above this paper dwells on the efficacy of adopting an empowerment based approach in alleviating caregiver burden in schizophrenia.

METHODOLOGY

Aim: To study the efficacy of an Empowerment based case work approach in alleviating caregiver burden in schizophrenia.

Objectives:

• To elicit the socio-demographic information of the respondents.
• To assess and understand the level of caregivers-perceived burden before conducting case work.
• To conduct social case work sessions adapting an empowerment based approach.
• To reassess the caregivers perceived burden after the completion of the case work.

Sample:

Caregivers of three male patients suffering from schizophrenia who were undergoing treatment in the local mental health institution were selected for the study. They were referred by the chief of the clinical team as they were experiencing strain in relation to the care giving activities.

Research Design:

This study is based on “Quasi experimental research Design “since the basic objective is to assess the effectiveness of case work intervention in alleviating caregiver burden.

Tools for data collection:

• Socio demographic and psychosocial history schedule.
• Burden assessment schedule (R. Thara, R. Padmavati, Shuba Kumar and Latha Srinivasan 1998)

This study was conducted in three stages

Stage 1. (baseline assessment)

Adequate rapport was established with the caregiver(s) where in purpose of the study was explained and consent was obtained to involve them in the process. Background details and details about the caregivers perceived burden were obtained from all the three respondents.

Stage 2. (Intervention)

After collection of the information respondents were involved in 6 sessions of an empowerment based approach (Krogsrud Miley et al. 1995) which involved need assessment, Psycho education, Basic intervention with the family, management of problems faced by the caregivers of affected member, Intervention with the caregiver in handling difficult problems and Termination. An empowering approach moves the problem from the central focus of the social case work process and its helps replace it with an emphasis on...
client’s strengths, the resources of the environment and a vision of the anticipated solution. The key facets of the empowerment approach are –

Sl. No. Phase Activity Tasks
1. Dialogue Sharing 1. Establishes collaborative relationship
2. Clarifies existing knowledge (Already apparent)
   - Client’s perception (Challenges and strengths)
   - Social workers perceptions (Role in respect to the client system)
3. Deals with what you know you have
5. Leads to contract for relationship
6. Leads to agreement to assess.

2. Discovery Searching 1. Ascertaining what you have that was not readily apparent.
2. Connecting thoughts back to experiences for additional information and facts.
3. Assessing/identifying/expressing feelings.
4. Collecting interpersonal information
   - From client system
   - From others
5. Exploring resource system.
6. Determining what else the client system neds (Goal setting).
7. Developing a plan which identifies steps leading to solutions.
8. Leads to contract for change.

2. Accessing resources that exist that the client was not using
   - Personal
   - Interpersonal
   - Organizational
   - Community/societal
3. Creating new resources and opportunities
4. Leads to contract for conclusion.

Stage 3 (Post Intervention):
After the intervention process, researcher again administered the Burden assessment schedule (R. Thara, R. Padmavati, Shuba Kumar and Latha Srinivasan 1998) to study the impact of the care work case in alleviating the burden of care givers of Schizophrenic patients.

Analysis of Data:
Following the data collection all the items of the scales were coded and the data was computed and entered on to a master chart and the pre and post intervention scores obtained on the scale were compared.

Results and Discussion
Profile of caregivers of Schizophrenia
Case work was conducted with three caregivers whose age ranged from 50 to 70years. Out of the three, two were females and the remaining was a male caregiver. They are all married and are from lower income with primary school education.

Table 1. Scores obtained by the respondents on the Burden Assessment inventory before and after the case work intervention

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Factors / dimensions</th>
<th>Pre scores</th>
<th>Post scores</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>CG-1</td>
<td>CG-2</td>
<td>CG-3</td>
</tr>
<tr>
<td>1</td>
<td>Spouse related (pre)</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Physical and Mental Health</td>
<td>14</td>
<td>18</td>
</tr>
<tr>
<td>3</td>
<td>External support</td>
<td>11</td>
<td>13</td>
</tr>
<tr>
<td>4</td>
<td>Caregivers routing</td>
<td>7</td>
<td>12</td>
</tr>
<tr>
<td>5</td>
<td>Support of Patient</td>
<td>6</td>
<td>9</td>
</tr>
</tbody>
</table>

Table 2: Difference between the scores before and after Empowerment based Case work

<table>
<thead>
<tr>
<th>No.</th>
<th>Caregiver</th>
<th>Mean</th>
<th>S.D</th>
<th>t</th>
<th>df</th>
<th>Level of significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>CG-1</td>
<td>2.77778</td>
<td>2.2361</td>
<td>3.748</td>
<td>8</td>
<td>.006</td>
</tr>
<tr>
<td>2</td>
<td>CG-2</td>
<td>1.88889</td>
<td>2.6930</td>
<td>4.464</td>
<td>8</td>
<td>.002</td>
</tr>
<tr>
<td>3</td>
<td>CG-3</td>
<td>3.77778</td>
<td>9.7183</td>
<td>-2.401</td>
<td>8</td>
<td>.043</td>
</tr>
</tbody>
</table>

The above table 1 & 2 provide the scores obtained on the Burden Assessment Scale before and after the case work. It can be observed from the total scores in table 1 that there has been an overall decrease in the perceived burden scores by the caregivers. There has been considerable improvement in the dimensions such as physical and mental health, external support caregivers’ routine, taking responsibility of the patient and also patient’s behavior. Further, table 2 shows that there has been significant difference in the burden scores which indicates that there has been considerable improvement after the case work intervention.

To conclude, Social workers have an important role in the mental health team. Social work values of inherent worth and dignity of human beings and principles such as acceptance and individualization coupled with an empathetic stance go a long way in promoting the wellbeing of the caregivers of mentally ill individuals.

References

www.worldwidejournals.com