

Abstract

Facilities available in community care for patients with schizophrenia in Sri Lanka are limited. Majority of the patients with a diagnosis of schizophrenia are living with their family. Considering the severity of the disturbances of thoughts, emotions, perceptions and behavior of patients with schizophrenia as well as their inability to function in the society as others, it is obvious that the care givers face difficulty in coping with the burden associated in management of these patients.

Colombo South Teaching Hospital provides services to a large number of patients with mental illnesses mainly living in Colombo district. Among the patients attending the follow-up clinics, only few are accompanied by their care givers. Most of them attend on their own, when their condition is stable.

Care givers were mainly Sinhalese, Buddhists representing the general distribution of the population in the area and two third of the care givers were females. It was noticed that the majority of the care givers were patients' parents (39%) and 94% of care givers represents parents, family members or the spouse. Only 5% represent paid care givers.

Care givers burden was assessed by using Burden Assessment Schedule which was developed in India, a country with similar socio cultural background to Sri Lanka. It measures the care giver's burden in several important domains.

According to the results of this study 57% of the care givers perceived that there was disruption of family and other relationships due to the presence of a chronically ill patient with them. Furthermore, 47 % of them experienced they were unable to hold or take up a regular job due to severity of the symptoms such as disrupting and unpredictable behaviors of the patients. In this study, 46 % of the care givers have reported feeling distress in the context of feeling exhaustion and depressed in the presence of patients with them. Only one third of the care givers perceived that their good caring practice was not appreciated and not acknowledged by others.

Only 29 % of the sample represented spouses as the care givers. Among them, only 29 % reported that there was a significant impact on their relationship due to chronic illness of their spouses.

Care givers burden that were assessed by using monthly income, time spent with the patient, provision of psychological support by family members as well as the relatives and provision of temporary care by relatives represented the significant impact on care givers burden.

Care givers of patients with schizophrenia received financial support and temporary care facilities mainly from their family members. Overall, care givers received very minimum financial support and only family members have provided a reasonable amount of financial support for them. However they received psychological support from psychiatric clinics, friends and relatives. Practical support was given mainly from the psychiatric clinics.

These results describes that there is minimum support in all aspects from the governmental organizations and nongovernmental organizations. The care givers of patients with schizophrenia, mainly the family members play a major part in managing the patients with schizophrenia and lack of available community based management services and lack of financial resources have significant negative impact on them .