

ORIGINAL ARTICLE

## FACTORS ASSOCIATED WITH PERCEIVED HEALTH AMONG CAREGIVER WHO ARE TAKING CARE OF ELDERLY WITH SCHIZOPHRENIA

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### Abstract

A family caregiver is the most important person who cares for the elderly with schizophrenia. The elderly with schizophrenia had complete problems related to the aging process and also sign and symptoms of schizophrenia. Burden perceived the stress feel of a caregiver who is taking care of elderly schizophrenia influences of caregivers' perceived health. The study aimed to examine factors associated with perceived health among caregivers who are taking care for elderly with schizophrenia. The cross-sectional study design was applied in this study. Eighty-eight samples were recruited using systematic random sampling. Data were analyzed by using correlation and chi-square with a significance level of  $p < 0.05$ . The results showed that age, education level, income, level of self efficacy, and level of knowledge. Healthcare providers need to consider those factors to improve health outcomes and before designing the intervention. In order to improve knowledge and self-efficacy of caregiver, peer support, and health promotion about caring elderly schizophrenia should be emphasized.

**Keywords:** perceived health, caregiver, schizophrenia, elderly

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### Introduction

Schizophrenia is a severe mental disorder that typically begins in late adolescence or early adulthood but continues throughout the life cycle (1). About one in seven schizophrenia patients are older than 65 years, and the number of elderly patients with schizophrenia will double within two decades (2). Still, the care needs of these older individuals are poorly understood. Changes associated with aging (e.g., physical illness, cognitive impairment, social losses) may generate new care needs or modify existing ones (2). This caused a high burden, perceived stress, and perceived the health of caregivers who care for the elderly with schizophrenia (3).

People with schizophrenia often cannot fulfill the expected roles in their families and communities, experience difficulties, and need constant care and support from their families because most schizophrenic patients live with their families who have the responsibility to provide care (4). Schizophrenia dramatically affects not only the patients suffering from it but also their family members (5). High burden and stress that feel of caregiver while providing care of the elderly with schizophrenia have an impact on caregiver's perceived health. That's influences imperfect caregiver's quality of life, poor quality of care that caused a high rate of relapse (6).

However, until now, a study about the impact of caring elderly with schizophrenia has limited, like factors analysis affecting the perceived health of caregivers who care elderly with schizophrenia has never been studied. From the results of this study, it can be concluded about factors associated with perceived health as the best predictor of the caregiver's burden. As necessary information for nurses to choices the proper intervention for a caregiver who is taking care of the elderly with schizophrenia, so this study relevant to conducted.

### **Objectives**

This study aimed to examine factors associated with perceived health among caregivers who are taking care of the elderly with schizophrenia.

### **Methods**

A cross-sectional design approach was applied in this study to examine the factors associated with perceived health among caregivers who are taking care of the elderly with schizophrenia. Eighty-eight samples were recruited by using systematic random sampling.

The inclusion criterias were caregivers who taking care for elderly with schizophrenia, living with patients at same home for more than one year, caregivers' aged at least 18 years old. Family are not willing to participate was excluded in this study.

Demographics questionnaire included age, gender, education level, income status was developed by the researcher to measure the respondents' characteristic. Self-efficacy questionnaire was modified based self-efficacy concepts from Albert Bandura (7). This questionnaire was used to measure the self-efficacy. A modifies knowledge questionnaire from McCubbin & Thompson (8) was used to measure the respondents' knowledge. The preceived health was measured by modifying of perceived health questionnaire from from Jones (9). All questionnaire had been validate and tested for reliability of the instrument. Therefore, questionnaires were reliable. Data were analyzed by using correlation and chi-square with a significance level alpha of  $p < 0.05$ .

The study had been Ethical Approval from Psychiatric Hospital Dr. Radjiman Wediodiningrat Lawang Malang with the certificate number 004/KEPK.RSJRW/II/2019.

## Results

### Table 1. Characteristics respondents

Table 1 showed that the characteristics of respondents based on age; most respondents have periods 26-45 years as many as 58 respondents (65.9%). Features of gender, most of the respondents are female, as many as 53 respondents (60,2%). Characteristics respondents based on education, most of the respondents were senior high school education as many as 37 respondents (42.0%). Income status, most of them had income status >Rp 1.851.083. Self-efficacy, most of them have functional self-efficacy as many as 33 respondents (37,5%), and more than half were good knowledge as many as 46 respondents (52,3%).

Table 1. Respondent's Characteristics (n=88)

Respondent's characteristics		n	%
Age	Teenager (18-25 years)	8	9,1
	Adult (26-45 years)	58	65,9
	Older adult (46-65 years)	22	25
	Total	88	100
Gender	Male	35	39,8
	Female	53	60,2
	Total	88	100
Education Level	Elementary School	31	35,2
	Senior High School	37	42,0
	Academic	20	22,7
	Total	88	100,0
Income Status	<Rp 1.851.083	53	60,2
	>Rp 1.851.083	35	39,8
	Total	88	100
Self Efficacy	Good	33	37,5
	Average	32	36,4
	Bad	23	26,1
	Total	88	100
Knowledge	Good	46	52,3
	Average	22	25
	Bad	20	22,7
	Total	88	100

### Table 2. Relationship between age, gender, education level, income with perceived health

Table 2 showed the relationship between age, gender, education level, and income with perceived health among caregivers who are taking care for elderly with schizophrenia. The results found that three variables such as age, education level, and income have positive correlation with perceived health with p-value <0.05. detailed explanation are summarized in table 2

Tabel 2. The Relationship of Age with Perceived Health

Variables	Perceived Health			Total	P-value
	Good (%)	Moderate (%)	Bad (%)		
Aged					0.035
Teenager (18-25 years )	50	25	25	100	
Adult (26-45 years)	53	19.4	27.6	100	
Older adult (46-65 years)	90,9	4.5	4.5	100	
Gender					0.631
Male	57.1	20	22.9	100	
Female	64.2	13.2	22.6	100	
Education level					0.000
Elementary School	35.5	16.1	48.4	100	
Senior High School	67.6	18.9	13.5	100	
Academic	95	5	20	100	
Income					0.005
<1.851.083 IDR	49.1	22.6	28.3	100	
>Rp 1.851.083 IDR	82.9	5.7	11.4	100	

**Table 3. Relationship between level of self efficacy, level of knowledge with perceived health**

Table 2 showed the relationship between level of self efficacy, and level of knowledge with perceived health among caregivers who are taking care for elderly with schizophrenia. The results found that two variables such as en level of self efficacy, level of knowledge were significantly correlation with perceived health with p-value <0.05. detaild explanation are summarized in table 3

Variables	Perceived Health			Total	p-value
	Good (%)	Moderate (%)	Bad (%)		
Level of self-efficacy					0.034
Good	81.3	6.2	12.5	100	
Moderate	60.6	18.2	21.2	100	
Bad	39.1	21.7	27.3	100	
Level of knowledge					0.003
Good	80.4	8.7	10.9	100	
Moderate	50	27.3	22.7	100	
Bad	35	20	45	100	

## Discussion

The findings of this study showed positive correlation several variables with perceived health except gender. In this study age has positive relationship with perceived health. In contrary with some studies reported older caregiver older impact on their perception unoptimal in taking care of their illness in future. The more former caregiver also cannot provide care well to the sick member. Even, younger age of caregivers, which has to offer to care for an ill member, result in an increasing sense of life is worth living (10). Different in this study who become patient was elderly with the complete problem about the aging process and clinical symptom about mental disorder. Caregivers are required to be more patient and wise in dealing with issues while caring for elderly schizophrenia. Disability in daily life that consequence more than time for caring, the caregiver must be had a responsibility, care, and respect while caring for elderly

schizophrenia (11). Adult and older adult caregivers more had wise to solve the problem while taking care of the elderly with schizophrenia.

Education and knowledge showed positive correlation with perceived health among caregivers who are taking care of elderly with schizophrenia. The results confirmed that high level of education higher and appropriate knowledge impacted on high level of perceived health. Notoatmojo mentioned that education was strong factor to improve more understanding due to high level of education was easier to receive information. Education affects the learning process, the higher a person's education, the easier the person is to receive information (12). Therefore, knowledge becomes a strong factor related to perceived health among caregivers.

A caregiver who caring schizophrenic patients need information about the definition, signs, and symptoms of the disease, the impact, and stages of treatment that must believe (13). The results of the study show that some caregiver has a level of proper knowledge and had level education senior high school and academic. Greeff et al., the opinion states that the level of education caregiver who was caring for patients with psychological problems has a direct relationship with the ability of the caregiver to the adaptation to stressful situations (14). Adaptation ability is the beginning of caregiver empowerment to be able to cope with stressful situations during care for elderly schizophrenia that influences with perceived health of the caregiver.

Based on results study income status had a significant correlation with the perceived health among caregivers. High income salary would decrease financial problems related to providing care(15). A study conducted in Sweden to examine the relationship between income, subjective health, and caregivers' burden among people with dementia showed that low income was associated with a higher degree of responsibility on the caregivers. Lower-income was a stressor to influence stress for caregivers (16).

Level of self-efficacy also was considered as a factor associated with perceived health among caregiver. People with high level of self-efficacy could increase self-confidence to carry tasks or handle problems(7). Self-efficacy is individual's skills on self-regulation to perform a task, achieve a goal, and produce something (7,17,18).

## Conclusion

Several factors were noted as influencing factors on perceived health among caregivers who were taking care elderly including age, education level, income, level of self efficacy, and level of knowledge. Healthcare providers need to consider those factors to improve health outcomes and before designing the intervention

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