

Resilience of Caregivers in Caring for Families with Schizophrenia: A Case Study in Bogor

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Abstract:

This study aims to describe resilience in caregivers of families with members suffering from schizophrenia. Schizophrenia is a severe mental disorder that affects thought processes and behavior, requiring intensive support from families as caregivers. However, families often face significant burdens, including emotional, social, and economic challenges, which demand strategies and strength to overcome emerging crises. This research employed a qualitative method with a case study approach, involving three caregivers living with family members diagnosed with schizophrenia in Bogor. Data were collected through in-depth interviews and observations, then analyzed using thematic analysis.

The results reveal that caregivers exhibit strong resilience in addressing various challenges. Strategies include religious approaches, such as drawing closer to God, receiving support from extended family, and adopting behavioral changes to enhance the quality of care. Additionally, they demonstrated optimism, effectively analyzed the root causes of issues, and leveraged social support as a resource for overcoming difficulties. The study concludes that resilience is a crucial factor in supporting the care process for individuals with schizophrenia and helps caregivers manage challenges more effectively. The implications of this research suggest the need for strengthening resilience factors through psychosocial interventions, community support, and family-based mental health services.

Keywords: caregiver, schizophrenia, resilience



1. Introduction

Mental disorders significantly affect individuals' lives. According to the Indonesian Ministry of Health (2018), Individuals with Mental Disorders (ODGJ) refer to individuals experiencing disturbances in thought, behavior, and emotions, which hinder their ability to carry out daily activities. Schizophrenia, a severe mental disorder, falls under this category and can cause difficulties in social interaction and routine activities (Rahayu & Dinni, 2021). Although schizophrenia is often associated with severe mental illness, ODGJ includes various other disorders, such as organic mental disorders and mood disorders (Maslim, 1998).

Riskesdas data from 2018 shows an increasing prevalence of mental disorders in Indonesia from 2013 to 2018, with West Java having a severe mental disorder prevalence of 1.6 per thousand (Riskesdas, 2018). Schizophrenia affects the psychosocial and economic well-being of patients, placing a heavy burden on families as caregivers. For instance, families often face social stigma and difficulties integrating into society (Isaac et al., 2022). The high recurrence rate of schizophrenia, reaching 100% within five years after treatment, adds to the challenges families face in caring for affected members (Videbeck, 2018).

One of the crucial factors in accelerating recovery for individuals with schizophrenia is positive family support, which includes attention, affection, and adherence to treatment (Edelman et al., 2010). Although caring for individuals with schizophrenia is not easy, caregivers play a crucial role in the recovery process. They often experience negative emotional impacts, such as frustration, shame, and anger (Makmuroch, 2014). Additionally, they face mental, social, and economic burdens related to long-term care (Patricia, 2019).

Resilience is a key factor in maintaining caregivers' well-being amidst these pressures. According to Zauszniewski et al. (2010) and Rojas (2015), resilience refers to an individual's ability to adapt and recover from difficulties. Research by Given et al. (2012) shows that resilience plays an essential role in reducing caregiver burden and improving their ability to care for individuals with schizophrenia. Resilience not only helps families endure but also provides the strength to cope with the stress and challenges of caring for someone with schizophrenia (Gitasari & Savira, 2015).

Although previous studies have examined the role of resilience in caregivers of individuals with schizophrenia, there is limited research exploring resilience among caregivers in Indonesia, particularly in the Bogor area. Therefore, this study aims to delve deeper into the resilience of caregivers of family members with schizophrenia in Bogor. This research is expected to contribute to enriching the literature on the role of resilience in supporting the care and recovery process of individuals with schizophrenia.

This study employs a qualitative case study approach to understand caregivers' experiences and perceptions of resilience through in-depth interviews and observations. Through this research, families can gain a better understanding of the importance of resilience in facing challenges while caring for family members with schizophrenia and raising awareness about the need for support in the recovery process.



2. Methodology

This study uses a qualitative approach with a case study research design. A qualitative approach is chosen to explore and understand phenomena in-depth within a natural context. A case study was selected as this research aims to understand resilience in caregivers of families with members suffering from schizophrenia, requiring a comprehensive analysis of individual experiences. The study population consists of families with members diagnosed with schizophrenia residing in the Bogor area. The sampling technique used was non-probability sampling with a purposive sampling approach. Participants were selected based on the following criteria: The caregiver is a direct family member (parent, child, sibling, or relative) of an individual with schizophrenia. The family has a member diagnosed with schizophrenia who is either allowed to return home or is still receiving treatment in a mental hospital. If the family has more than one caregiver, the primary caregiver is chosen.

Data was collected through in-depth interviews and direct observations. Data analysis was conducted using thematic analysis, beginning with transcribing interview data verbatim, reducing irrelevant information, coding themes, and interpreting findings to understand resilience strategies used by caregivers. The validity of the data was tested using triangulation methods, comparing interview results, observations, and supporting documentation.

3. Results

This study aims to explore caregiver resilience experiences in families with members diagnosed with schizophrenia. Based on data analysis, nine main themes were identified: schizophrenia symptom history, traditional treatment, medical treatment, experienced difficulties, positive actions, drawing closer to God, readiness in caregiving, family closeness, and family assistance. Below are the key findings for each theme, supported by interview excerpts.

Theme 1: Schizophrenia Symptom HistoryEarly schizophrenia symptoms were experienced by family members, such as R displaying unusual behavior after losing his father, and T experiencing relapses due to emotional stress. Subject P associated their sibling's schizophrenia with a childhood filled with parental violence.Example quote: "Yes, I first heard from Mrs. A that R showed strange symptoms, such as refusing to eat and drink, wandering around, and getting angry at people." (Subject A, June 25, 2023)

Theme 2: Traditional TreatmentSome caregivers initially attempted traditional treatments, such as bathing patients with prayer water or consulting religious leaders. However, these methods were often ineffective, leading them to seek medical treatment. Example quote: "They bathed him with special water and prayed over him." (Subject A, June 13, 2023)

Theme 3: Medical TreatmentMost caregivers eventually brought their family members to a psychiatric hospital, a decision supported by extended family after observing worsening conditions. Example quote: "We had a family meeting and decided to take R to the psychiatric hospital." (Subject A, June 13, 2023)



Theme 4: Experienced DifficultiesCaregivers faced various challenges, including financial issues, loss of family members, and emotional pressure. Example quote: "I had no financial support at all." (Subject A, June 20, 2023)

Theme 5: Positive ActionsCaregivers showed increased attention and care to support their family members' recovery.Example quote:"We improved communication and provided extra care for S." (Subject P, July 2, 2023)

Theme 6: Drawing Closer to GodAll subjects turned to prayer and worship to gain strength and patience. Example quote: "I surrendered to God, believing He could help." (Subject A, June 20, 2023)

Theme 7: Readiness in CaregivingInitially unprepared, caregivers adapted over time. Example quote: "We ensure timely medication for him." (Subject D, July 16, 2023)

Theme 8: Family ClosenessSupport from extended family plays a crucial role in assisting caregivers in caring for family members with schizophrenia. Example quote: "My children visit more often, ask about my well-being, and send financial assistance." (Subject A, June 20, 2023)

Theme 9: Family AssistanceCaregivers receive both material and moral support from their extended families, which greatly helps them in facing challenges.Example quote: "My sister, who lives nearby, often provides financial assistance and sometimes even brings food." (Subject D, July 16, 2023)

Cross-Case AnalysisAll three subjects faced similar challenges, such as economic difficulties and emotional pressure. However, through resilience actions such as drawing closer to God, maintaining good family communication, and receiving support from their surroundings, they managed to overcome crises and remain optimistic. These findings support the theories of Santrock (2014) and Wolin & Wolin (1993) on the importance of resilience in coping with adverse situations.

4. Discussion

The results of this study provide an overview of the resilience possessed by the three subjects, all of whom are caregivers for family members with schizophrenia. This study contributes to expanding our understanding of how resilience affects the experiences and adaptation strategies of caregivers, especially in the context of limited resources and local cultural influences. The research findings show that the three subjects are able to face various challange by utilizing their resilience abilities, such as emotional regulation, optimism, empathy, self-efficacy, and reaching out.

A regulation approach, such as worship and belief in god's help, becomes a main source of strength that help them remain optimistic in facing problems. The subjects also demonstrate the ability to seek support through family, community, traditional medicine, and medical treatment. This study is in line with the findings of Given et al. (2012) which state that the ability of caregivers to provide care is highly dependent on their resilience. This also supports the view of Zauszniewski et al. (2010) that resilient families are better able to cope with stress related to caring for patients with schizophrenia.



According to Reivich and Shatte's theory (2002), the subjects demonstrated good emotional regulation, impulse control, optimism, and reaching out abilities that helped them endurce amidst economic limitations and emotional pressure. In the context of this study, religious approaches and social support appeared to be crucial aspects that strengthened the resilience of caregivers.

This study's findings have several important implications. First, strengthening resilience factors such as optimism, reaching out, and emotional regulation can become the primary focus of psychosocial interventions for caregivers. Second, the importance of family and comunity support indicates that social networks should be an integral part of mental health services. Third, religious-based approaches can be integrated as relevant coping strategies in interventions. Lastly, these findings emphasize the importance of mental health policies that increase access to for families with members suffering from schizophrenia. Thus, this study provides new insights into the importance of resilience in caring for family members with schizophrenia and serves as a reference for further research.

5. Conclusion

This study highlights the significance of resilience in caregivers of family members with schizophrenia. The findings emphasize that religious coping, social support, and optimism are vital components in enhancing caregivers' ability to manage their responsibilities effectively. These insights provide valuable input for psychosocial interventions and mental health policies aimed at supporting caregivers of individuals with schizophrenia. Future research should explore broader samples and diverse cultural contexts to deepen understanding of resilience in caregiving roles.

References

- Edelman, E. M. (2010). Patients' perception of family involvement and its relationship to medication adherence for persons with schizophrenia and schizoaffective disorders. Rutgers The State University of New Jersey, School of Graduate Studies. https://rucore.libraries.rutgers.edu/rutgers-lib/27445/
- Gitasari, N., & Savira, S. I. (2015). Pengalaman family caregiver orang dengan skizofrenia. Novia Gitasari Siti Ina Savira Abstrak. Character, 3(2), 1-8. https://doi.org/10.26740/cjpp.v3i3.10956
- Given, B. A., Given, C. W., & Sherwood, P. R. (2012). Family and caregiver needs over the course of the cancer trajectory. The journal of supportive oncology, 10(2), 57-64. https://doi.org/10.1016/j.suponc.2011.10.003
- Isaac, T. C., Ninnoni, J. P. K., & Evelyn, A. A. (2022). Coping with personal care and stigma: experiences persons living schizophrenia. BMC. https://doi.org/10.1186/s12912-022-00891-5

Kementerian Kesehatan RI. (2018). Riset kesehatan dasar. Jakarta: Badan Penelitian dan



Pengembangan Kesehatan Kementerian Kesehatan RI. https://layanandata.kemkes.go.id/katalog-data/riskesdas/ketersediaan-data/riskesdas-2018

- Makmuroch. (2014). Keefektifan Pelatihan Keterampilan Regulasi Emosi terhadap Penurunan Tingkat Ekspresi Emosi pada Caregiver Pasien Skizofrenia di Rumah Sakit Jiwa Daerah Surakarta. Wacana Jurnal Psikologi. 6(11),13-34. Program Studi Psikologi Fakultas Kedokteran Universitas Sebelas Maret. https://doi.org/10.29313/jrp.v1i2.557
- Maslim. R. (1998).Buku Saku Diagnosis Gangguan Jiwa. Jakarta. https://opac.fk.uinjkt.ac.id/index.php?id=365&keywords=&p=show_detail
- Patricia, H., Rahayuningrum, D. C., & Nofia, V. R. (2019). Hubungan Beban Keluarga Dengan Kemampuan Caregiver Dalam Merawat Klien Skizofrenia. Jurnal Kesehatan Medika Saintika, 10(2), 45-52. http://dx.doi.org/10.30633/jkms.v10i2.449
- Rahayu, R., & Dinni, S. M. (2021). Program Desa Peduli Skizofrenia: Menuju ODGJ Berobat dan Taat Obat. Psyche 165 Journal, 310-316. https://doi.org/10.35134/jpsy165.v14i3.116
- Rojas F., L. F. (2015). Factors affecting academic resilience in middle school students: A case Gist: Education and Learning Research Journal, (11),https://dialnet.unirioja.es/servlet/articulo?codigo=5278992
- Santrock, J. W. (2014). Adolescence Fifteenth Edition (Fifteenth). McGraw Hill. https://www.mheducation.com/highered/product/Adolescence-Santrock
- Videbeck, S. L. (2018). Psychiatric-mental health nursing (Seventh ed). Wolter Kluwer. https://shop.lww.com/psychiatric-mental-health-nursing/p/9781975184773
- Wolin, S., & Wolin, S. (1993). The resilient self: How survivors of troubled families rise above adversity. Villard. https://archive.org/details/resilientselfhow0000woli
- Zauszniewski, J. A., Bekhet, A. K., & Suresky, M. J. (2010). Resilience in family members of persons with serious mental illness. Nursing Clinics, 45(4), 613-626. https://doi.org/10.1016/j.cnur.2010.06.007