



Family Support and Its Impact on the Motivation of Schizophrenia Clients

Helena Patricia¹, Veolina Irman², Emira Apriyeni^{3*}, Dwi Christina Rahayuningrum⁴

Syedza Saintika University, Indonesia¹

Syedza Saintika University, Indonesia²

Syedza Saintika University, Indonesia³

Syedza Saintika University, Indonesia⁴

Corresponding Email: emira.apriyeni@gmail.com*

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Abstract

Family support plays a significant role in influencing the recovery motivation of schizophrenia clients in West Sumatra, which ranks as the fourth province with the highest prevalence of mental disorders in Indonesia, with 10,816 individuals affected. This study aims to examine the relationship between family support and the motivation of schizophrenia clients at the Yayasan Pelita Jiwa Insani. This quantitative research, with a cross-sectional approach, was conducted from March to April 2024. The population consisted of 102 schizophrenia clients, with a purposive sample size of 81 respondents. Data collection used questionnaires and interviews, and analysis was conducted using univariate and bivariate methods with the chi-square test. Results showed that 56.8% of clients had low family support and low motivation. A significant relationship was found between family support and motivation ($p = 0.048$). These findings are expected to help enhance the motivation of clients undergoing rehabilitation at the foundation and contribute to nursing knowledge as a reference for further research.

Keywords: Family Support, Motivation, Skizofrenia

Introduction

Mental health is a vital component of well-being, defined as a state where individuals can develop physically, mentally, spiritually, and socially (Susanti et al., 2024). It allows them to manage stress, work productively, and contribute to their community. Mental health issues have gained global attention, becoming one of the top four global health concerns. In Indonesia, 1 in 10 people have a mental disorder (Kemenkes BKKP, 2023). Schizophrenia is one of the most common mental disorders. The World Health Organization (WHO) reported in 2022 that 24 million people worldwide suffer from mental disorders (WHO, 2022). In Indonesia, the prevalence of households with a family member who has a mental disorder is 4 per mill in 2023, indicating a significant decrease. The prevalence of schizophrenia among people aged

15 and older also increased from 2% in 2023 (Kemenkes BKPK, 2023). In Sumatra Barat, the prevalence of severe mental illness reached 4,8 per mil in 2023. Padang, the provincial capital, has the highest number of schizophrenia cases, with 2.121 individuals affected (Dinas Kesehatan Kota Padang, 2024). Despite significant medical advancements, many individuals with schizophrenia struggle to reintegrate into society due to stigma, lack of productivity, and poor medication adherence, increasing the risk of relapse (Mislianti et al., 2021).

A comprehensive approach to mental health care, including promotion, prevention, treatment, and rehabilitation. Curative efforts focus on treating mental disorders, but patients often face challenges after receiving treatment, such as poor social reintegration and a high risk of relapse. The recovery process for individuals with schizophrenia depends on motivation (Nufus & Reza, 2024)(Nufus & Reza, 2024). It refers to the internal drive that prompts individuals to work toward a goal, such as recovering from illness. Motivated patients are more likely to adhere to treatment and participate in rehabilitation programs. Internal factors, such as resilience and self-efficacy, and external factors, like family support, influence motivation (Rønne et al., 2023). Studies show that family support plays a significant role in fostering motivation for recovery in individuals with mental disorders (Dewi & Nurchayati, 2021).

Families provide emotional and practical support, helping patients cope with the challenges of mental illness. Family support can reduce the recurrence rate and improve the prognosis of schizophrenia and faster recovery (Wang et al., 2020). In the rehabilitation process, family support is vital in helping patients reintegrate into society and reduce the stigma they may feel. The support provided has been associated with declining stress levels strengthening individual and collective mental health (Widiyawati et al., 2020). Research by Suhermansyah et al. (2023) found that patients with strong family support are less likely to relapse, while those without support experience higher relapse rates.

The Pelita Jiwa Insani Foundation in West Sumatra is the only rehabilitation center for individuals with severe mental disorders (ODGJ) in the province. Its rehabilitation programs, including individual and family counselling, aim to enhance patients' motivation to recover and reintegrate into society. Short interviews with patients revealed that they had low supportive families and made their motivation and engagement in rehabilitation programs, so many patients relapse.

Literature Review

1. Schizophrenia

Schizophrenia is a severe psychological disorder characterized by disturbed thought processes. The term schizophrenia comes from the new Latin Schizo, meaning 'split', and Phrenia, meaning 'mind' (Hofmann et al., 2022). This emphasizes that a person's mind is split from reality and that the individual becomes part of a chaotic and frightening world. According to (Hawari, 2018), the symptoms of schizophrenia can be divided into 2 (two) groups, namely positive symptoms and negative symptoms. Positive symptoms are symptoms that are striking, easy to recognize, disturb the family and society, and are one of the family's motivations for

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bringing patients to treatment (Jackson & Bernard, 2022). Positive symptoms shown in schizophrenia patients are Delusions or delusions, hallucinations, chaos of thought, noise, restlessness, unable to be quiet, pacing, aggressive, talking with excessive enthusiasm and excitement, feeling like a 'big man', feeling all capable, all great, thoughts full of fear to the point of secrecy or as if there is a threat to himself and harbouring hostility (Susanti et al., 2024). The negative symptoms of schizophrenia are hidden symptoms and do not bother the family or the community. Therefore, the family is often late in bringing the patient to treatment. Negative symptoms shown in schizophrenic patients are 'dull' and 'flat' affect, social isolation or alienation (withdrawn), daydreaming, difficulty talking, quietness, passive and apathy, and withdrawal from social interaction (Juliet et al., 2022)v. Treatment of schizophrenia patients with pharmacotherapy techniques, Electro Convulsive Therapy (ECT), psychotherapy and rehabilitation, and nurse communication strategies (Maramis, 2018).

2. Motivation

Motivation is a factor that encourages a person to carry out a certain activity. Motivation is often defined as a factor driving a person's behaviour. Many terms refer to motivation, including need, urge, wish, and drive. In this case, the term motivation will be defined as a condition in a person's personality that encourages individual desires to carry out certain activities to achieve goals (Metasari & Elisa, 2024). The motivation that exists in a person is the driving force that will realize a factor that affects motivation: personality, attitude, experience, ideals or expectations, and encouragement from parents, relatives, and the surrounding environment. The aspects of patient motivation to recover are Having a positive attitude, being oriented toward achieving a goal, and the power that drives the individual.

3. Family Support

In essence, the family is expected to be able to function and realize the process of developing mutual love and affection between family members, between relatives, and between generations, which is the basis of a harmonious family(Darma et al., 2024). Family members perceive supportive people as always ready to help and assist if needed (Friedman, 2013). there are 4 aspects of family support, including assessment support, instrument support, informational support, emotional support

Research Method

This type of research is analytic with a cross-sectional method approach. It was conducted in 2024 at Pelita Jiwa Insani Foundation in West Sumatera with 81 respondents and purposive sampling. The inclusion criteria are patients who have been treated for 2 months. The exclusion criteria are uncooperative patients, difficult to communicate with, and have changing health conditions. The data analysis conducted in this study is univariate and bivariate analysis with a chi-square test.

Result

1. Univariate analysis

Table 1. Distribution of Respondent Characteristics

Variable	<i>f</i>	%
Age		
20 - 45	54	66.6
46 - 64	22	27.2
> 65	5	6.2
Gender		
Male	54	66.6
Female	27	33.4
Duration of skizofrenia		
< 5 years	22	27,2
5-10 years	37	45,7
> 10 years	22	27.2
Total	81	100

Based on Table 1, the respondents were aged 20-44 years, namely 54 people (66.6%), most of the respondents were male, namely 54 people (66.6%), and most of the length of disturbance experienced by respondents was 5-10 years (45.7%).

Table 2. Distribution of motivation and family support of Schizophrenia Clients at Pelita Jiwa Insani Foundation

Variable	<i>f</i>	%
Motivation		
Low	46	56.8
High	35	43.2
Family Support		
Low	46	56.8
High	35	43.2
Total	81	100

Based on Table 2, it is known that out of 81 respondents, more than half, namely 56.8% of schizophrenia respondents at the Pelita Jiwa Insani Foundation, have low motivation and get low family support.

2. Bivariate Analysis

Table 3. Relationship between Family Support and Motivation of Skizofrenia Clients

Family Support	Motivation		Total	%	P Value
	Low	High			
Low	31	15	46	56.8	0.048
High	15	20	35	43.2	
Total	46	35	81	100	

Based on Table 3 above, it can be seen that respondents who have low motivation occur more in respondents with low family support, as many as 67.4% of respondents, compared to those with high family support, as many as 32.6% of schizophrenia respondents at the Pelita Jiwa Insani Foundation. The results of further analysis obtained a P value of 0.048, so it was concluded that there was a significant relationship between family support and the motivation of schizophrenia clients at the Pelita Jiwa Insani Foundation.

Discussion

Motivation and Family Support

Based on the results, it can be seen that more than half of the clients (56.8%) of schizophrenia rehabilitated at Yayasan Pelita Jiwa Insani have low motivation. These results contradict those of Miniharianti et al. (2023), who state that most (90,1%) patients have high motivation. Motivation is the strength of a person with mental disorders as a driving force behind a person's behaviour to direct the action of healing or to recover and be free from the disease they suffer. Characteristic respondents and areas of research may cause different results. Based on the questionnaire analysis, the motivation of schizophrenia clients is low because most respondents (60.5%) do not have any plans for the future, and 56.8% do not believe that they will recover. In addition, most respondents (45.7%) had experienced 5 to 10 years of disorder, so 56.8% of respondents did not feel healing within themselves.

The other research showed that most (56.8%) respondents received low family support. These results are in line with Siagian et al. (2022) that 59% of respondents with mental disorders get low-income family support. According to Friedman (2013), family support is a form of support system provided by the family in dealing with the problems of their family members. The family is the closest person and the most comfortable place for patients with mental disorders. Family support is essential for people with mental disorders to motivate them during care and treatment (S & Jama, 2019). Questionnaire analysis also shows that clients have low family support because 34.6% of respondents said the family rarely or never sent food.

Family Support on Motivation of Skizofrenia Clients

The results of the research that have been conducted by respondents who have low motivation are more common in respondents with low family support, as many as 69.6% of respondents, compared to high family support, as many as 30.4% of schizophrenia respondents at the Pelita Jiwa Insani Foundation. Based on the results of the study, it is known that the p -value = 0.048, which means that there is a significant relationship between family support and the motivation of schizophrenia clients at the Pelita Jiwa Insani Foundation. These results are in line with (Panggih, 2017) that there is a relationship between family support and motivation to recover schizophrenia patients at Grhasia Mental Hospital Yogyakarta.

One of the factors supporting motivation is family support because the family can create equal relationships, pamper each other, serve each other, make each other happy, and create synchronization with fellow family members (Hendrawati et al., 2023). Family support functions as an affective function, where the internal function of the family is for psychosocial fulfilment, caring for each other, and providing love and mutual acceptance and support. High family support is important in increasing motivation to recover in the disease recovery process (Damayanti, 2020). Family support is a social support that plays an important role in the client's life, so they struggle to recover (Sedjati, 2013). The easiest way for family members to support family members exposed to mental illness is to accept gracefully and seek community support, including finding the most appropriate treatment for ODGJ.

Based on interviews conducted with officers at the foundation, ODGJ is sometimes deliberately abandoned by the family, even if the family does not want to admit that the client is their family. Officers have made various efforts to get clients the same rights to be rehabilitated and accepted by their families. This is what causes the low family support received by schizophrenia clients at the Pelita Jiwa Insani Foundation. The results of this study also show respondents with high motivation but low family support, namely 19 people. This can happen because family support is not the only factor that can affect the motivation of clients who are being rehabilitated. Clients also get support while undergoing rehabilitation, such as support from nurses and officers.

Conclusion

This research showed that 56.8% of clients had low family support and low motivation. A significant relationship was found between family support and motivation ($p = 0.048$). These findings are expected to help enhance the motivation of clients undergoing rehabilitation at the foundation and contribute to nursing knowledge as a reference for further research.

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