

“EFFECT OF PSYCHO EDUCATION ON DRUG COMPLIANCE”



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Abstract

Schizophrenia is the heartland of psychiatry and the core of its clinical practice. It represents a major burden for caregivers, health services and society as a whole. Psycho education of patients and relatives appear to be one of the successful intervention strategies for improving compliance. Therefore, a pre-experimental approach with one group pre-test and post-test design was adopted to identify the non-compliant patients with Schizophrenia and to assess the effectiveness of psycho education on the knowledge regarding compliance to psychotropic medications among their caregivers. The Psycho education was completed in 8 sessions with sample size of 10 non-compliant patients with schizophrenia and their 10 caregivers. Results indicated that the mean Pre-test score was 13.1 and at post test level, it raised to 21.90. Median at pre test score was 13.50, and at post test score it came to 22.00 and the standard deviation at pre test was 2.80, which came to 1.10 at post test. The Z value, which is 2.809 and the level of significance (2tailed), was significant at $p \leq .05$ confidence level, which revealed the effectiveness of psycho education on the knowledge level of the caregivers of patients with schizophrenia. Z value which was -.359 level of significance (2 tailed) was non-significant at $P > 0.05$ confidence level, revealed the non-effectiveness of psycho education in changing the Drug Attitude Inventory (DAI-10) score of the schizophrenic patients regarding their psychotropic medication compliance.

Key words: Psycho education, Non-Compliance, compliance, Knowledge, Attitude, Care Giver, Patients with Schizophrenia, Psychotropic Medications, Drug Attitude Inventory (DAI-10)

Background

Schizophrenia is a common condition, which often cripples people in adolescence or early adult life, without greatly reducing their life expectancy; it has been described as the worst affliction of mankind. It probably causes more suffering, distress and blights more lives than any cancer. It certainly represents a major burden for caregivers, health services and society as a whole.

Jhonstone Eve, Cunningham Owens. (2004)¹ A study conducted in All India Institute of Medical Science reported that total annual cost of care of schizophrenia was 274 US dollars; INR (13687.38) which was not significantly different from Diabetes Mellitus. The main brunt of financial burden was borne by family. **Grover S, Avasthi A, (2005)**.² Mental disorders are truly universal. An analysis done by **WHO** global burden of disease, 2000 showed about 450 million people were estimated to be suffering from neuropsychiatric illnesses, Schizophrenia being the major killer. **Park K, (2009)**.³ It suggested a

morbidity rate of not less than 18-20 per thousand per year, same as in other parts of the world. The lack of compliance was associated with an increased risk of relapse & hospitalization.

There is high prevalence of psychiatric disorder among general population approximating about 20 per 1000, with lack of resources. There are only 47 hospitals with total number of 10329 beds only in a country of more than 1 billion. The number of outdoor mental disorder cases were 896425 in 2004, and number of cases treated in child guidance clinics were 22361. **Park K. (2009)**.³

In India because of a limited number of mental health professionals and lack of scientific information about the nature and causes of mental illness, a large number of patients do not receive mental health services.

Need of the Study

Non-compliance is more extensive in Psychiatry as psychiatric illnesses have a significant effect on judgments, insight, stability and chronicity. **Park K. (2009)**.³

Providing care for a member of the family with mental illness is an exhaustive task for care givers and their role

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