

The Effect of Family Psychoeducational Therapy and Social Skills Training

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The purpose of this investigation was to examine the effect of Family Psychoeducational Therapy and Social Skills Training on burden, coping skills and social support of caregivers of patients diagnosed with schizophrenia and/or schizoaffective disorder at the National Alliance for the Mentally Ill (NAMI) in the Greater Houston Area, Texas. Family Psychoeducational Therapy is described as an educational program for families and patients that also provides families with a variety of ways to handle difficult behaviors at home. The Social Skills Training is a comprehensive service for persons with schizophrenia that target their social skills deficits. The theoretical framework for the treatment program is based on Social Learning Theory (Bandura, 1977) and the Index of Expressed Emotion (Leff & Vaughn, 1985) that is relevant to the study of caregivers of patients diagnosed with schizophrenia and/or schizoaffective disorder. The research design is pretest-posttest one group, cross-sectional and exploratory. The data was collected through self-administered inventories using a purposive sampling of 66 caregivers at NAMI in the Greater Houston Area, Texas. The caregivers completed the following instruments: the Measurement of Objective and Subjective Burden to assess burden, the Family Coping Questionnaire to assess caregiver's coping skills, and the Social Network Questionnaire to assess social support.

Descriptive statistics yielded the following: caregivers at NAMI are mostly Caucasians, married, females, and highly educated. Most caregivers have a parental relationship with their ill relative. The mean age of caregivers is fifty-eight. Most of the ill relatives are males and they live with their caregivers. The findings of this study indicated that the treatment program minimally decreased the level of objective and subjective burden from pretest to posttest. That is, the difference of the mean score of pretest compared to the mean score of posttest was not statistically significant. The findings of this study indicated that the treatment program did not increase the level of coping skills and social support of caregivers from pretest to posttest.

There are three significant contributions that this study accomplished. First, it provided additional information on schizophrenia and schizoaffective diagnosis to caregivers. Second, the proposed study recognized the importance of including the family in the treatment and rehabilitation of the patients diagnosed with schizophrenia and/or schizoaffective disorder. Third, this study recognized the importance of decreasing caregiver burden, increasing their coping skills and social support as a way to promote a better quality of life for patients diagnosed with schizophrenia and/or schizoaffective disorder and their families in the community. Caregivers at NAMI are exposed to systematic educational information about an array of mental health diagnoses. However, this study could have important implications with a large sample and among those who have not had previous experience with support organizations. It should be noted such important implications could be as follows: acquire/expand their knowledge about mental illness; ability to handle difficult behaviors of patients more effectively; ability to identify prodromal symptoms; and integrate an array of coping skills to manage patients at home.

References

- Bandura, A. (1977). *A social learning theory*. Englewood Cliffs, NJ: Prentice-Hall.
- Leff, J., & Vaughn, C. (1985). *Expressed emotions in families*. New York: The Guilford Press.