

RELATIONSHIP OF FAMILY CAREGIVER BURDEN WITH QUALITY OF CARE AND PSYCHOPATHOLOGY IN A SAMPLE OF ARAB SUBJECTS WITH SCHIZOPHRENIA

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Introduction: Although the family burden remains one of the most important consequences of schizophrenia, no reports have addressed this important issue in the Arab world.

Objectives: Determine relationship of family burden with the caregiver's/patient's socio-demographics, clinical features and the indices of quality of care.

Method: Consecutive family caregivers of outpatients with schizophrenia were interviewed with the Involvement Evaluation Questionnaire (IEQ-EU). Patients were interviewed with measures of needs for care, service satisfaction, quality of life and psychopathology.

Results: Amongst the 121 caregivers, the higher burden scores were associated with caregiver lower level of education, patient's female gender and younger age; patient's lower subjective QOL and needs for hospital care; and not involving the patient in outdoor activities. Disruptive behavior was the greatest determinant of global ratings of burden.

Conclusion: Despite generous national social welfare provisions, results underscore the need for the community-based programs and continued intervention with the families in order to improve the quality of care.