

**PERCEIVED SOCIAL SUPPORT DIFFERENCES
AMONG SCHIZOPHRENIC AND DEPRESSED PATIENTS IN
REHABILITATION CARE**

BY

YASIRAH GOHAR

A Thesis

Presented to the Bahria University, Islamabad

In partial fulfillment of the requirements

For the degree of

Master of Philosophy

2014

LIBRARY
INSTITUTE OF PROFESSIONAL PSYCHOLOGY
BAHRIA UNIVERSITY KARACHI CAMPUS
KARACHI

BAHRIA UNIVERSITY, ISLAMABAD

APPROVAL SHEET

SUBMISSION OF HIGHER RESEARCH DEGREE THESIS

Candidate's Name: Yasirah Gohar

Discipline: Clinical Psychology

Faculty/Department: Institute of Professional Psychology

I hereby certify that the above candidate's work, including the thesis, has been completed to my satisfaction and that the thesis is in a format of an editorial standard recognized by the faculty/department as appropriate for the examination.

Principal Supervisor: Zainab Z. Zaidi

Date: _____

I undersigned, certifies that:

The candidate presented at a pre-completion seminar, an overview and synthesis of major findings of the thesis, and that the research is of a standard and extent appropriate of major findings of the thesis, and that the research is of a standard and extent appropriate for the submission of a thesis. I have checked the candidate's thesis and its scope, format, editorial standards are recognized by the faculty/department as appropriate.

Signature:

Head of Department: Zainab Z. Zaidi

Date: _____

DECLARATION OF AUTHENTICATION

I certify that the research work presented in this thesis is to the best of my knowledge .All sources used and any help received in the preparation of this dissertation have been knowledge. I hereby declare that I have not submitted this material either in whole or in part, for any other degree at this or any other institution.

Signature: _____

Y. Asviah

ACKNOWLEDGEMENT

“Allah, the most gracious, the most merciful.”

“Read in the name of your Lord, who created you, Created man from a clot of blood. Who taught by the pen. Taught man that which he did not know”. 96:1-5

I am deeply grateful to Almighty Allah for enabling me to stay stronger and be on the right path and helped throughout my life. I am thankful to those who make this possible for me towards my professional growth. I would credit those experiences which come across my life and persuaded me to find my identity. I am thankful to all my great teachers, members of the research committee and supervisor Dr. Zainab F. Zadae for giving me opportunity by believing in me that I can make contribution for mentally ill people in the field of rehabilitation in Pakistan.

I am fortunate to have a very supportive family to whom I always look forward in my difficult time whether its emotional, social, tangible, esteemed. I feel that these types of supports has a right of every human being on earth but especially the one who is suffering from mental illness, deserves the most. My dear husband Gohar Sibtain, two beautiful kids Mahnoor and Muhammad Mujaddid who sacrificed my absences with smiling face to show their everlasting support. My father-in-law Mian Ghulam Sibtain was among those who became the driving force behind me to continue education.

My gratitude extends to my grandmother Mubaraka Gilani, indeed a very brave and strong mother, always there for me as a role model. Her everlasting support, pampering and prayers made this possible for me to pursue for a professional career even after my marriage.

I am thankful to my great mother Ghazala Sheraz, late father Syed Sheraz Abid, and sisters Novara Kashif, Nadia Shah and brother Yahya Sheraz, brother in law Kashif Arshad whose eternal encouragement, invaluable love and support always made me feel special.

I am thankful to all of my family members including my uncle Dr Ijaz Shafi Gilani whose prayers were always there with me.

I am especially thankful to Ghazala Sheraz, Dr Hana Yahya and Dr Sara Gilani for their support during data collection from Islamabad.

I am thankful to Caravan-e-Hayat Karachi, Fountain House Lahore, and Institute of Psychiatry Rawalpindi General Hospital for allowing me to collect data with which it was made possible for me to do this study.

Last but not least I am thankful to people with psychiatric disabilities and psychiatric rehabilitation professionals whose effort to strive for improved quality of life motivated me to be the part of their journey.

DEDICATION

This thesis is dedicated to all my teachers, family members, grandmother, parents, husband, siblings, cousins, nephews, nieces and kids for their steadfast support by being the part of my journey.

TABLE OF CONTENTS

Copyright.....	ii
Approval sheet.....	iii
Authentication.....	iv
Acknowledgement.....	v
Dedication.....	vi
Table of content.....	vii
List of tables.....	ix
List of graphs.....	ix
Abstract.....	x

1. INTRODUCTION

1.1 The Intellectual Context of the Study.....	1
1.2 Background of the study.....	2
1.3 Problem Statement.....	4
1.4 Objectives of the Study.....	5
1.5 Research Questions.....	5
1.6 Significance of the Study.....	5
1.7 Structure of the Thesis.....	6
1.8 Definition of Key Terms.....	7
1.9 Summary.....	8

2. REVIEW OF THE LITERATURE

2.1 Social.....	9
2.2 Theories of Social Support.....	9
2.3 Types of Social Support.....	11
2.4 Types of Mental illness.....	15
2.4.1 Schizophrenia.....	15
2.4.2 Important of perceived social support in schizophrenia	16
2.4.3 Depression.....	22
2.4.4 Importance of perceived social support in Depression.....	23
2.4.5 Importance Of Social And Family Support In Depression.....	23

2.5 Theoretical Frame work.....	31
2.6 Hypotheses.....	34
2.7 Summary.....	34

3 METHODOLOGY

3.1 Research Design.....	35
3.2 Sample.....	36
3.3 Procedure.....	36
3.4 Measures.....	37
3.5 Statistical Analysis.....	38
3.6 Operational Definitions.....	38
3.7 Ethical Consideration.....	39
3.8 Reason for the Research Design.....	39
3.9 Summary.....	40

4 RESULTS

4.1 Hypothesis 1.....	45
4.2 Hypothesis 2.....	50
4.3 Summary.....	51

5 DISCUSSION

5.1 Conclusion.....	55
5.2 Implication of the Study.....	55
5.3 Theoretical implications.....	56
5.4 Practical implications.....	56
5.5 Limitation of the study.....	58
5.6 Recommendation for the future Research.....	60

REFERENCES.....	65
-----------------	----

APPENDIXES

A. Demographic Information.....	75
B. Perceived Social Support Scale.....	77
C. Consent form.....	86
D Turnitin Originality Report.....	88

LIST OF TABLES

Table 1a-b	Descriptive of demographics variables	42
Table 2	Descriptive of types of illnesses and perceived social support.....	44
Table 3	t- test of perceived social support and schizophrenia and depression patients..	45
Table 4	Facets of perceived social support.....	46
Table 5	Correlation of facets of social support.....	47
Table 6	Mean and standard deviation of social support facets in schizophrenia.....	48
Table 7	Mean and standard deviation of social support facets in depression.....	49
Table 8	Correlation between perceived social support and relapse of schizophrenia and Depression.....	50

LIST OF FIGURES

Figure 1	Theoretical model based on perceived social support and mental illness.....	33
----------	---	----

ABSTRACT

The present study aimed at analyzing the difference in the level of perceived social support among the psychiatric patients of schizophrenia and depression in rehabilitation care. The research hypothesized that there would be significant difference in the levels of social support among the patients of schizophrenia, and depression and that perceived social support plays major role among other treatments in the relapse. The patients of schizophrenia and depression were selected from Karachi, Islamabad and Lahore rehabilitation care units through purposive sampling to provide geographical diversity to the study to understand the difference in perceived social support by the cultural environment of the region. The targeted population were those patients who were either admitted for the treatment or who were coming for day program treatment or consultation. The data was collected through a structured and standardized questionnaire of perceived social support PSSS (Malik & Ismail 2005). The aim was to identify difference in the level of social support among the patients of schizophrenia, and depression and to prove that perceived social support plays major role among other treatment in the relapse and prevention of psychiatric illnesses. Quantitative research approach was applied using the method of t-test. The social support scale was administered on a sample of 100 participants.

The 100 participants were divided into two categories comprising of 50 schizophrenic patients and 50 depressed patients in the age range of 19-27.

The sample was selected from three major cities of Pakistan including Karachi,

Islamabad and Lahore through purposive sampling technique. The implication of this research was to investigate the difference in perceived social support and then its utilization for the benefit of these patients. The significance of perception about their families and support system was measured through the scores on the PSSS scale. The results were obtained and discussed with figures and tables generated through t-test computed to find out the relationship of the two variables using the statistical package of (SPSS 20.0 version).

Findings of the study indicates that perceived social support is higher in the patients of depression(89.66) then schizophrenia (70.19), $t = -4.054, p < 0.005$) and that higher/lower perceived social support(.491, $p < 0.005$) does not predict less relapse for the patients of depression and schizophrenia in the rehabilitation care.

The study findings have enlightened importance of perceived social support in the patients of depression and schizophrenia and opened the avenue for the future local and cross cultural researches in this field.