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Family Functioning And Caregiver Burden Among Patients With Schizophrenia At Home

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Abstract : Schizophrenia is a chronic mental disorder that requires long-term care, particularly for outpatients who are primarily cared for by their families. This condition may lead to emotional, social, and financial burdens for family caregivers. This study aimed to examine the relationship between family functioning and caregiver burden among patients with schizophrenia at Prof. Dr. M. Ildrem Mental Hospital Medan in 2025. This study employed a quantitative cross-sectional design. The population consisted of families accompanying schizophrenia patients for outpatient visits, with a total sample of 96 respondents selected using total sampling. Family functioning was measured using the Family Assessment Device (FAD), and caregiver burden was assessed using the Zarit Burden Interview (ZBI). Data were analyzed using univariate and bivariate analyses with Spearman rho test at a significance level of $p < 0.01$. The results showed that 100% of respondents had good family functioning and 99% experienced mild caregiver burden. There was a significant negative correlation between family functioning and caregiver burden ($r = -0.519$; $p < 0.01$). Better family functioning was associated with lower caregiver burden. The strength of the correlation was moderate.

1. INTRODUCTION

Approximately 90% of individuals with mental disorders treated in psychiatric hospitals are diagnosed with schizophrenia, a chronic and severe mental disorder characterized by disturbances in communication, impaired reality testing, inappropriate or blunted affect, and cognitive dysfunction that may lead to violent behavior (Siallagan et al., 2025). Schizophrenia is a long-term mental disorder that can affect an individual's patterns of thinking, emotions, and behavior. It is often characterized by symptoms such as delusions, changes in social behavior, behavioral disturbances, depression, and hallucinations (Zulaikha, A., & Bines, 2023).

Well-functioning families support their members in problem-solving and coping skills, as well as in communication, emotional stability, and behavioral management (Behera, Bhowmick and Kumar, 2024). Individuals living with schizophrenia often experience poor family functioning, inadequate family support, and limited flexibility in communication, with emotional expression among family members frequently being extreme (Wang et al., 2020). Family members of patients with

schizophrenia who experience higher levels of caregiver burden are more likely to suffer from depression, anxiety, and poorer quality of life. Caregiver burden can also be predicted by anxiety levels and environmental quality of life. Social isolation may occur, leading to increased stress and making caregivers more vulnerable to depression and anxiety (Suaryana et al., 2020).

According to the World Health Organization (WHO, 2022), approximately 24 million people worldwide are living with schizophrenia, representing 1 in 300 individuals (0.32%). Among adults, the prevalence is estimated at 1 in 222 individuals (0.45%). The regions with the highest number of individuals with schizophrenia are South Asia and East Asia, with approximately 7.2 million and 4 million cases, respectively, while Southeast Asia ranks third with nearly 2 million affected individuals (Faiza, N., Pratama, U., & Amna, 2024). Based on data from the Indonesian Ministry of Health compiled through the Mental Health and Substance Abuse Information System, a total of 311,457 cases of schizophrenia were recorded between January 2024 and April 2025 (CNN, 2025). In North Sumatra, the prevalence of schizophrenia in 2022 ranked 21st nationally, with an incidence rate of 6.3%. In Medan

City, the incidence of schizophrenia was reported at 1.1 per 1,000 population (Pakpahan, R. E., & Amelia, 2023).

Several approaches can be implemented to improve family functioning and reduce caregiver burden. These include specialized interventions such as psychoeducation, multiple family therapy (MFT), complementary mindfulness-based interventions, and supportive therapy (Novianty, L., & Arisandria, 2021).

2. RESEARCH METHODS

This study employed a quantitative research design with an observational analytic approach using a cross-sectional method. The study aimed to analyze the relationship between family functioning and caregiver burden among patients with schizophrenia. The research was conducted at the Outpatient Clinic of Prof. Dr. M. Ildrem Mental Hospital, Medan, in 2025. The study population consisted of all families accompanying patients with schizophrenia during outpatient visits. A total sampling technique was applied, resulting in a sample size of 96 respondents. The independent variable in this study was family functioning, while the dependent variable was caregiver burden among families of patients with schizophrenia. Data were collected using standardized questionnaires, namely the Family Assessment Device (FAD) to measure family functioning and the Zarit Burden Interview (ZBI) to assess caregiver burden. Both instruments have been widely used and demonstrated good validity and reliability. Data analysis included univariate analysis to describe respondent characteristics and variable distributions, as well as bivariate analysis using the Spearman rho test to examine the relationship between family functioning and caregiver burden. Statistical significance was set at $p < 0.01$. This study obtained approval from the relevant institutions and was conducted in accordance with ethical principles, including confidentiality of respondents' identities, fairness, and participants' right to refuse or withdraw from the study at any time.

3. RESULTS

Table 1. The frequency distribution of respondents' demographic characteristics, including gender, religion, highest level of education, respondents' age, patients' age, occupation, relationship with the patient, patients' gender,

duration of caregiving, and treatment adherence (n = 96).			
NO	Characteristic	Frequency (f)	Percentage (%)
1	Gender		
	Male	42	43.8
	Female	54	56.3
	Total	96	100.0
2	Religion		
	Islam	47	49.0
	Christian	35	36.5
	Catholic	12	12.5
	Other	2	2.1
	Total	96	100.0
3	Last Education		
	SMP	10	10.4
	SMA	58	60.4
	College	28	29.2
	Total	96	100.0
4	Respondents' Age		
	10-18 Years	4	4.2
	19-59 Years	72	75.0
	>60 Years	20	20.8
	Total	96	100.0
5	Patient's Age		
	10-18 Years	8	8.3
	19-59 Years	71	74.0
	>60 Years	17	17.7
	Total	96	100.0
6	Occupation		
	Unemployed	9	9.4
	Private	9	9.4
	Employee	38	39.6
	Entrepreneur	13	13.5
	Civil Servant	27	28.1
	Total	96	100.0
7	Relationship With Patient		
	Father	11	11.5
	Mother	34	35.4
	Child	8	8.3
	Husband	11	11.5
	Wife	20	20.8
	Sibling	1	1.0
	Total	96	100.0
8	Patient's Gender		
	Male	48	50.0
	Female	48	50.0
	Total	96	100.0
9	Duration Of Caregiver		
	1-10 Years	82	85.4
	11-13 Years	7	7.3

	18-20 Years	3	3.1
	23 Years	1	1.0
	25 Years	2	2.1
	30 Years	1	1.0
	Total	96	100.0
10	Treatment Adherence		
		81	84.4
	Routine	15	15.6
	Not Routine		
	Total	96	100.0

Based on Table 1, the majority of respondents were female, totaling 54 individuals (59.3%). Most respondents were Muslim, accounting for 47 individuals (49.0%). The highest level of education among respondents was senior high school/vocational high school (SMA/SMK), with 58 individuals (60.4%). Most respondents were aged 19–59 years, comprising 72 individuals (75.0%), while the majority of patients were also aged 19–59 years, totaling 71 individuals (74.0%). The most common occupation among respondents was self-employed, with 38 individuals (39.6%). The most frequent relationship between respondents and patients was children, accounting for 34 individuals (35.4%). The distribution of patients by gender showed equal proportions, with 48 males (50.0%) and 48 females (50.0%). Most respondents had been caring for patients for 1–10 years, totaling 82 individuals (85.4%), and the majority of patients had regular treatment adherence, with 81 individuals (84.4%).

Table 2. Frequency distribution of respondents based on family functioning in caring for patients with schizophrenia at home (n = 96).

Family Functioning	Frequency (f)	Precentage (%)
Good	96	100.0
Poor	0	0
Total	96	100.0

Based on Table 2, it can be seen that family functioning in caring for patients with schizophrenia at home among 96 respondents was predominantly in the good category, with all 96 respondents (100%) classified as having good family functioning.

Table 3. Frequency distribution of respondents based on caregiving burden in caring for patients with schizophrenia at home (n = 96).

Family Burden	Frequency (f)	Precentage (%)
Burden	95	99.0
Heavy Burden	1	1.0
Light		
Total	96	100.0

Based on Table 3, it is known that the caregiving burden in caring for patients with schizophrenia at home among 96 respondents was predominantly in the light burden category, with 95 respondents (99.0%).

4. DISCUSSION

Family Functioning in Caring for Patients with Schizophrenia at Home

Based on the results of the study conducted among families accompanying patients with schizophrenia for outpatient control at Prof. Dr. M. Ildrem Mental Hospital in 2025, all respondents were classified in the good family functioning category, totaling 96 respondents (100%).

According to the researchers' analysis, good family functioning in caring for patients with schizophrenia at home is likely due to the family's ability to make decisions in problem-solving processes. This condition may also be influenced by factors such as the family's educational level, occupation, and core relationship with the patient. In addition, good family functioning can be supported by effective communication, affective involvement (care and concern), and the ability to control patient behavior appropriately.

These findings are consistent with a study conducted by (Suhardiningsih et al., 2023), which reported that educational level, occupation, and family relationships with the patient significantly influence family functioning. Families with good functioning are better able to demonstrate appropriate roles, effective communication, and behavioral control. Good family functioning in patients with schizophrenia is essential to support treatment adherence, prevent relapse, and facilitate patient recovery.

Family Caregiver Burden in Caring for Patients with Schizophrenia at Home

Based on the results of the study conducted among families accompanying patients with schizophrenia for outpatient control at Prof. Dr. M. Ildrem Mental Hospital in 2025, the majority of respondents experienced a light level of caregiver burden, totaling 95 respondents (99.0%).

According to the researchers' analysis, light caregiver burden in caring for patients with schizophrenia at home is mainly influenced by emotional components. Patients often require excessive assistance from family members, families frequently worry about the patient's future, patients may become dependent on their families, and family

members often feel that they need to do more for the patient. Families also experience certain burdens, particularly related to transportation costs, the need for nutritious food, daily personal care needs of the patient, and loss of income due to reduced working hours.

These findings are in line with a study conducted by (Yanti et al., 2025), which reported that negative stigma from society toward patients with schizophrenia and their families may lead to social exclusion. Family burden among families with members who have schizophrenia is associated with caregiving responsibilities, including treatment costs and the responsibility to monitor the patient's mental condition. This burden includes both physical and psychological aspects. The presence of a family member with schizophrenia can significantly affect the family's financial capacity, leading to increased financial burden.

Relationship Between Family Functioning and Caregiver Burden in Caring for Patients with Schizophrenia at Home

Based on the results of the Spearman rho statistical test examining the relationship between family functioning and caregiver burden, a correlation coefficient of $\rho = -0.519$ was obtained, with a significance value of $p \leq 0.005$. This indicates a significant relationship between family functioning and caregiver burden among families caring for patients with schizophrenia at Prof. Dr. M. Ildrem Mental Hospital, Medan. The relationship is negative with a moderate strength, meaning that better family functioning is associated with lower levels of caregiver burden experienced by families.

The researchers' analysis indicates that the relationship between family functioning and caregiver burden represents a challenge faced by families when caring for members with schizophrenia. However, when caregiver burden is well managed, the stress experienced by families can be minimized, and balanced family functioning can be maintained. Supportive and motivational factors available to families such as support from spouses, friends, the surrounding community, and mental health care teams can contribute to coping with the stress that arises during caregiving. This support may enhance acceptance of the situation and ultimately help sustain family functioning in caring for patients with schizophrenia.

According to (Sustrami et al., 2020), family functioning refers to the interactions that occur among family members and is considered central to mental health. Poorly functioning family processes

may trigger psychological problems. The burden experienced by families is related to physical, social, psychological, and financial aspects. Family burden is an event associated with patient's behavioral symptoms, sociodemographic characteristics, and family functioning. Effective family functioning can reduce caregiver burden and serve as a form of supportive therapy.

5. CONCLUSION

Based on the results of the study, it can be concluded that family functioning among families of patients with schizophrenia at Prof. Dr. M. Ildrem Mental Hospital, Medan, in 2025 was predominantly classified as good, with all 96 respondents (100%) demonstrating good family functioning in caring for family members with schizophrenia. Caregiver burden in caring for patients with schizophrenia at Prof. Dr. M. Ildrem Mental Hospital, Medan, in 2025 was predominantly categorized as light, with 95 respondents (99%) experiencing a light level of caregiver burden. The results of the Spearman rho test examining the relationship between family functioning and caregiver burden showed a correlation coefficient of $r = -0.519$, indicating a significant negative relationship with moderate strength. This finding suggests that better family functioning is associated with lower caregiver burden among families caring for patients with schizophrenia at Prof. Dr. M. Ildrem Mental Hospital, Medan, in 2025.

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