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## “EFFECTIVENESS OF RECREATIONAL ACTIVITY ON SOCIAL SKILLS AMONG PATIENTS WITH SCHIZOPHRENIA AT SELECTED PSYCHIATRIC HOSPITAL IN CHENNAI”.

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**Abstract : Introduction:** Schizophrenia is a complex, chronic mental health disorder characterized by an array of symptoms, including delusions, hallucinations, disorganized speech or behavior, and impaired cognitive ability<sup>1</sup>. The increasing number of Patients with Schizophrenia have self care and social deficit (such as Communication skills, Self care activities and Inter personal relationship) in mainstream health professionals require to know how to identify their needs, being capable to adapt their social skills. Therefore Recreational activities were one of the method or therapy to divert and help to focus on improving the level of Social skills. Research results carried out on this topic suggest that Patients with Schizophrenia have poor social skills. The aim of the study was to assess the effectiveness of Recreational Activity on Social Skills among Patients with Schizophrenia at Selected Hospital, Chennai.

**Methods:** A Pre Experimental One Group Pretest Posttest Design was used to assess the Effectiveness of Recreational Activity on Social Skills among Patients with Schizophrenia at Selected Hospital, Chennai. After taking a written consent, 50 Men and women with Schizophrenia were selected using Non probability Total Enumerative Sampling Technique. The Level of Social Skills among Patients with Schizophrenia was assessed by Modified Scale for Assessment of Social Skills. The data was analyzed by using frequency, percentage, mean and Standard Deviation. Comparison between pre-test and post-test Level of Social Skills was analyzed by using paired ‘t’ test. The association between the demographic variables and post-test level of Social Skills was analyzed by using chi-square.

**Result:** The results show the overall level of social skills among 50 Patients with Schizophrenia in pre & post test. 45(90%) of them had inadequate level of social skills and five (10%) of them had moderately adequate level of social skills in the pre test and in post test 22(44%) of them had inadequate level of social skills, 27 (54%) of them had moderately adequate level of social skills and only one (2%) had adequate level of social skills. Mean of posttest Level of Social Skills (54.02) among Patients with Schizophrenia was higher than the pretest Level of Social Skills (40.54), t value is 13.764, which was statistically significant at the level of  $p < 0.001$  There was no statistically significant association between the post-test Level of Social Skills with the selected demographic variables at the significance level of  $p > 0.05$ .

**Conclusion:** The current findings suggest that the recreational activity is an effective method and it can be easily administered to the Patients with Schizophrenia which in turn will improve the social skills and it helps to promote and improve the components such as Communication skills, Self care activities and Inter personal relationship. The study participants get benefited by participating in recreational activity.

**Index terms:** Effectiveness, Social Skills, Recreational Activity, Patients with Schizophrenia, Chennai.

## I. INTRODUCTION

Schizophrenia is a serious mental illness often accompanied by impairments in functioning that can result from deficits in neurocognition and social cognition as well as negative symptoms (e.g., lack of motivation). It is a clinical syndrome of profoundly disruptive psychopathology that results in responses that severely impair the lives of an individual, their families and the community. Social skills training (SST) is a systematic approach to teaching interpersonal skills that is effective for improving functioning and negative symptoms among persons with schizophrenia<sup>2</sup>.

Social skills training consists of learning activities utilizing behavioral techniques that enable persons with schizophrenia and other disabling mental disorders to acquire interpersonal disease management and independent living skills for improved functioning in their communities. A large and growing body of research supports the efficacy and effectiveness of social skills training for schizophrenia. Social Skills training can be done with individuals, families, and groups. There are advantages of each of these modalities; eg, the training process and acquisition of skills by individuals is more rapid<sup>3</sup>.

Negative symptoms of schizophrenia account for much of the poor functional outcome in schizophrenia and are a significant unmet treatment need in a large proportion of patients<sup>4</sup>. Reduction in negative symptoms could result in improved engagement in vocational, independent living, social and recreational activities<sup>5</sup>.

The meta-analysis by Turner and colleagues in this issue reconfirms the efficacy of social skills training (SST) and recreational activities for improving social skills and reducing negative symptoms in people with schizophrenia. Numerous clinical trials have shown that SST has large effects on improving social skills and medium effects on reducing negative symptoms and improving functioning in people with schizophrenia<sup>6</sup>.

Schizophrenic patients need support in terms of informational & emotional needs, as inadequacy of knowledge on schizophrenia and poor understanding in progress level, capabilities and inabilities may lead to difficulty in adherence to the effective management of their treatment plan which leads to relapse of symptoms.

Schizophrenic patients need support in terms of informational & emotional needs, as inadequacy of knowledge on schizophrenia and poor understanding in progress level, capabilities and inabilities may lead to difficulty in adherence to the effective management of their treatment plan which leads to relapse of symptoms<sup>7</sup>.

This study was investigating the Effectiveness of Recreational Activities in schizophrenics' social skills. The researcher involved 45 schizophrenic patients in recreational activities and hobbies, which helps to promote activity of daily livings and social skills. They live, participate and work for 10 days together. Results showed increased mean score from 116.87 to 135.49, The paired 't' test value shows statistically significant at the level of  $p < 0.01$ <sup>8</sup>. Recreational interventions can promote social skills in patients with schizophrenia.

## II. STATEMENT OF THE PROBLEM

A study to assess the Effectiveness of Recreational Activity on Social Skills among Patients with Schizophrenia at Selected Hospital, Chennai.

## III. AIM

The aim of the study was to assess the effectiveness of recreational activity on social skills among patients with Schizophrenia at Selected Hospital in Anna Nagar, Chennai.

## IV. OBJECTIVES

1. To assess the Pre and Post Level of Social Skills among Patients with Schizophrenia.
2. To determine the Effectiveness of Recreational activity on the Level of Social Skills among Patients with Schizophrenia.
3. To associate the selected demographic variables with the Post Level of Social Skills after Recreational Activity among Patients with Schizophrenia.

## V. RESEARCH HYPOTHESES

**H<sub>1</sub>**-There will be a significant difference in Pre and Post test Level of Social Skills among Patients with Schizophrenia before and after Recreational Activity.

**H<sub>2</sub>**-There will be a significant association between Post test Level of Social Skills after Recreational Activity among Patients with Schizophrenia with the selected demographic variables.

## VI. RESEARCH METHODOLOGY

### 6.1. RESEARCH APPROACH

Quantitative Experimental Approach was adopted for conduction of the study.

### 6.2. RESEARCH DESIGN

In this study Pre Experimental One Group Pretest Posttest Design was used.

### 6.3. SETTING OF THE STUDY

The research setting is that the location where the researcher will collect the information from the study participants. This study was conducted in Selected Hospital in Anna Nagar, Chennai.

#### 6.4. SAMPLING

The sample of the present study was both male and female Patients who have been diagnosed as Schizophrenia according to ICD-10 Classification from selected Hospital, Chennai.

#### 6.5. Sample size

The sample size consists of 50 samples who have been diagnosed as schizophrenia in the age group of 21-50 years.

#### 6.6. SAMPLING TECHNIQUE

In this study Non probability Total Enumerative Sampling Technique was used. 50 Men and women with Schizophrenia were selected for the present study.

#### 6.7. DATA COLLECTION TOOL

- Demographic variables of Patient with Schizophrenia such as Age, Gender, Education, Occupation, Marital Status, Income, Type of Family, Religion, Number of Hospital Stay and Family history of mental illness.
- Modified Scale for Assessment of Social Skills: It was developed by investigator to assess the level of social skill which consists of 35 questions. It focuses on the components such as Communication, Self care activities and Inter personal relationship. Each question has assessed using 4 point rating scale The Scoring are 0 – Never, 1 – Sometimes, 2 – Rarely, 3 – Always.

#### 6.8. Data Collection Process:

After obtaining Formal permission from Ethical committee of Saveetha University, The Principal, Saveetha College of Nursing, and The Director, Selected Hospital, Chennai. The period of data collection was four weeks. The nature and purpose of the study was explained to 50 schizophrenic patients and from care taker. The Patient with Schizophrenia who fulfilled the inclusion criteria was selected. Patients are divided into two groups.

On the first day, the pre test was conducted for 25 patients by using Modified Scale for Assessment of Social Skills to assess the Level of Social Skill. The investigator got prior written consent from the participants. Explanation of the procedure and its rationale was given to the study group. From day two, patients are encouraged to join in Recreational Activities for 45 minutes; the post test was done on 14<sup>th</sup> day by using the same tool. The procedure has been followed for another group of 25 patients for two weeks, followed by post test. Data were collected and compiled for data analysis. Confidentiality was assured to all study participants.

## VII. ANALYSIS

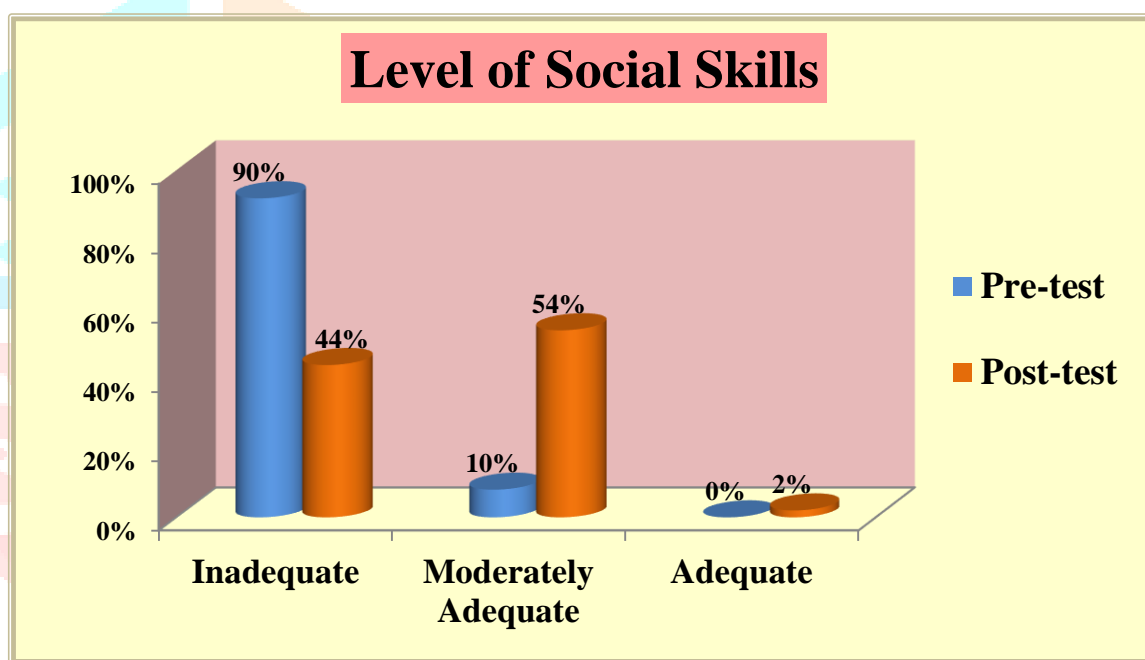
### SECTION A: DISTRIBUTION OF DEMOGRAPHIC VARIABLES AMONG PATIENTS WITH SCHIZOPHRENIA.

**Table: 1** Frequency and Percentage Distribution of demographic variables among Patients with Schizophrenia (n=50)

S.No.	Demographic Variables	Frequency n	Percentage %
1	<b>Age</b>		
	a)21-30 yrs	23	46
	b)31-40 yrs	14	28
	c)41-50 yrs	13	26
2	<b>Gender</b>		
	a)Male	27	54
	b)Female	23	46
3	<b>Education</b>		
	a) Non literate	15	30
	b)Schooling	24	48
	c)Graduate	11	22
4	<b>Occupation</b>		
	a)Unemployed	20	40
	b)Coolie	12	24
	c)Farmer	11	22
	d)Government/Private Employee	7	14
5	<b>Income per month</b>		
	a)1000-2500 Rs	28	56
	b)2500-5000 Rs	18	36
	c)5000-10000 Rs	4	8
	d)Above 10000	0	0

<b>6</b>	<b>Marital status</b>		
	a)Married	20	40
	b)Unmarried	22	44
	c)Divorced/ Separated	5	10
<b>7</b>	<b>Religion</b>		
	a)Hindu	29	58
	b)Christian	14	28
	c)Muslim	5	10
<b>8</b>	<b>Type of Family</b>		
	a)Nuclear	40	80
	b)Joint	8	16
	c)Expanded	2	4
<b>9</b>	<b>Number of Hospital stay</b>		
	a)One time	34	68
	b)Two time	13	26
	c)Above two times	3	6
<b>10</b>	<b>Family history of mental illness</b>		
	a)Yes	4	8
	b)No	46	92

**SECTION B: PRE-TEST AND POST-TEST LEVEL OF SOCIAL SKILLS AMONG PATIENTS WITH SCHIZOPHRENIA (n=50)**



**Fig 1:** Distribution of Pre-test and Post-test Level of Social Skills among Patients with Schizophrenia

**SECTION C: Comparison of Pre-test and Post-test Mean level of Social Skills among Patients with Schizophrenia**

**Table 2: Effectiveness of Recreational Activity on the level of Social Skills among Patients with Schizophrenia. (n=50)**

Level of social skills	Mean	S.D	Paired 't' Test value	p value
Pre test	40.54	7.665	13.764	0.000* S
Post test	54.020	8.462		

\*Significant at the level of  $p < 0.001$

Table 2 shows the Pre and Post-test Mean, Standard deviation and the p value of Level of social skills among Patients with Schizophrenia. In pre-test, the mean score were 41.68 with SD (7.865) and the post test mean score were 54.020 with SD 8.462. The paired 't' test value were 13.764 which is statistically significant at the level of  $p < 0.001$ .

#### SECTION D: Association of Post-test Level of Social Skills after Recreational Activity with selected Demographic variables.

Table 3: Association of post-test level of Social Skills after Recreational Activity with selected demographic variables. (n=50)

S.No.	Selected Demographic Variables	Inadequate		Moderately Adequate		Adequate		Chi-square p Value
		n	%	n	%	n	%	
1	<b>Age</b>							p= 0.703 NS
	a)21-30 yrs	11	22.0	12	24.0	0	0	
	b)31-40 yrs	6	12.0	7	14.0	1	2.0	
	c)41-50 yrs	5	10.0	8	16.0	0	0	
2	<b>Gender</b>							p=0.420 NS
	a)Male	10	20.0	16	32.0	1	2.0	
	b)Female	12	24.0	11	22.0	0	0	
3	<b>Education</b>							p=0.237 NS
	a)Non literate	10	20.0	4	8.0	1	2.0	
	b)Schooling	8	16.0	16	32.0	0	0	
	c)Graduate	4	8.0	7	14.0	0	0	
4	<b>Occupation</b>							p=0.679 NS
	a)Unemployed	6	12.0	14	28.0	0	0	
	b)Coolie	6	12.0	6	12.0	0	0	
	c)Farmer	7	14.0	4	8.0	0	0	
	d)Government/Private Employee	3	6.0	3	6.0	1	2.0	
5	<b>Income per month</b>							p=0.815 NS
	a)1000-2500 Rs	15	30.0	12	24.0	1	2.0	
	b)2500-5000 Rs	5	10.0	13	26.0	0	0	
	c)5000-10000 Rs	2	4.0	2	4.0	0	0	
	d)Above 10000	0	0.0	0	0	0	0	
6	<b>Marital status</b>							p= 0.728 NS
	a)Married	10	20.0	9	18.0	1	2.0	
	b)Unmarried	8	16.0	14	28.0	0	0	
	c)Divorced/ Separated	2	4.0	3	6.0	0	0	
	d)Widower/ Widowed	2	4.0	1	2.0	0	0	
7	<b>Religion</b>							p=0.115 NS
	a)Hindu	12	24.0	17	34.0	0	0	
	b)Christian	5	10.0	9	18.0	0	0	
	c)Muslim	3	6.0	1	2.0	1	2.0	
	d)Others	2	4.0	0	0	0	0	
8	<b>Type of Family</b>							p=0.553 NS
	a)Nuclear	16	32.0	23	46.0	1	2.0	
	b)Joint	5	10.0	3	6.0	0	0	
	c)Expanded	1	2.0	1	2.0	0	0	
9	<b>Number of Hospital stay</b>							p=0.839 NS
	a)One time	13	26.0	20	40.0	1	2.0	
	b)Two time	8	16.0	5	10.0	0	0	
	c)Above two times	1	2.0	2	4.0	0	0	
10	<b>Family history of mental illness</b>							p=0.773 NS
	a)Yes	1	2.0	2	4.0	1	2.0	
	b)No	21	42.0	25	50.0	0	0	

NS- Non Significant

Table 3 reveals the association between the selected Demographic variables with the Level of Social Skills among Patients with Schizophrenia in post test. By using chi- square, it was found that there was no statistically significant association between the post test level of social skills among Patients with Schizophrenia with the demographic variables (like age, gender, Education, occupation, Income, marital status, religion, type of family, number of hospital stay and family history of mental illness) at the level of p value  $> 0.05$ .

## VII. DISCUSSION:

### 7.1. Major Findings of the Study:

- **Findings related to demographic variables of Patient with Schizophrenia.**

In this study Majority of them 23 (46.0%) comes under 21-30 years of age group, 27 (54.0%) were male, Based on education 24 (48.0%) of them are finished schooling, With respect to the occupation 20 (40.0%) of them are unemployed, Concern with the income 28(56%) of them earning Rs.1000-2500 per month, Most of them 22 (44.0%) were unmarried, According to religion 29 (58.0%) of them are belongs to Hindu, Looking to type of family 40 (80.0%) of the subjects are from Nuclear family, With regards to the number of hospital stay 34(68.0%) of them are stayed one time and Most of them 46 (92.0%) of their family members have no family history of mental illness.

- **Findings related to effect of Recreational Activity on Social Skills among Patient with Schizophrenia.**

- In this study it reveals the frequency and percentage distribution of pre and post-test Level of Social Skills among Patients with Schizophrenia. Among 50 samples 45(90%) of them had inadequate level of social skills and five (10%) of them had moderately adequate level of social skills in the pre test. 22(44%) of them had inadequate level of social skills, 27 (54%) of them had moderately adequate level of social skills and only one (2%) had adequate level of social skills in the post test.
- In this study it shows the effect of Recreational Activity on Social Skills among Patients with Schizophrenia. Pre and Post-test Mean, Standard deviation and the p value of Level of Social Skills among Patients with Schizophrenia. In pre-test, the mean score were 40.54 with SD (7.665) and the post test mean score were 54.020 with SD 8.462. The paired 't' test value were 13.764 which is statistically significant at the level of  $p < 0.001$ .

- **Findings related to Association of post-test level of Social Skills after Recreational Activity with the selected demographic variables.**

In this study it reveals the association between the selected Demographic variables with the Level of Social Skills among Patients with Schizophrenia in post test. It was found that there was no statistically significant association between the post test level of social skills among Patients with Schizophrenia with the demographic variables (like age, gender, Education, occupation, Income, marital status, religion, type of family, number of hospital stay and family history of mental illness) at the level of p value  $> 0.05$  by using chi- square.

### 7.2. RECOMMENTATIONS:

On the basis of the study findings, the following recommendations were made for further research.

- Similar study can be replicated on a large sample to generalize the study findings.
- The same study can be conducted in different settings i.e. in the community settings.
- A qualitative study can be done to assess the impact of Schizophrenia on the social life of the patients.
- The same study can be conducted with a True experimental research design.

## VIII. CONCLUSION:

The findings are discussed in relation to the objectives of the study. The primary aim of the study was to assess the effectiveness of Recreational Activity on Social Skills among Patients with Schizophrenia and to found out that there was no statistical association between the posttest level of Social Skills among Patients with Schizophrenia with selected demographic variables. The current findings suggest that the Recreational Activity is an effective method and it can be easily administered to the Patients with Schizophrenia which in turn will improve the social skills and it helps to promote and improve the components such as Communication skills, Self care activities and Inter personal relationship. The study participants get benefited by participating in recreational activity

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