SUMMARY

Two hundred caregivers who were relatives of 200 consecutive outpatients with diagnosis of Schizophrenia and undergoing treatment at the Psychiatric Hospital, Uselu, Benin, between August and November 2008, were studied. The degree of burden experienced by the caregivers and their mental health status were assessed using the Burden Questionnaire and General Health Questionnaire (30-item version) respectively. The patient’s symptomatology was assessed using the Positive and Negative Syndrome Scale.

The mean age of the caregivers was 52.28±15.20 years, and the sex distribution was almost equal. Fifty eight percent were married and 6.5% were unemployed. The mean age of the patients was 38.02±12.5 years. Fifty six percent of the patients were male and 67% of them were single. Forty nine percent of them had had a secondary school education, and 55% were unemployed.

About 4 in 5 caregivers reported high subjective burden, in contrast to high objective burden which was experienced by 1 in 2 of the caregivers. Financial burden was greater than the burden of disruption of family routine, social stigma or subjective distress. Mean financial score \( (F=4.113, \ p=0.018) \) and social stigma burden score \( (F=5.445, \ p=0.005) \) were significantly higher when the patient was less than 45 years. The disruption of family routines and interactions was also greater in caregivers who were 65 years or more \( (F=6.934, \ p=0.001) \). Seventy percent (70%) of caregivers had mental distress when screened with the GHQ-30. The mean GHQ-30 score was 4.45±6.77. Caregivers with mental distress as measured on the GHQ-30 were significantly more likely to have higher levels of financial burden \( (t=4.30, \ p<0.001) \) and disruption of family routines/interaction \( (t=6.55, \ p<0.001) \). Caregivers with mental distress also experienced more...
subjective burden (t=4.77, p<0.001) and social stigma (t=6.35, p<0.001) than those without mental distress. The lowest level of mental distress was observed among the caregivers of patients whose schizophrenic symptoms were neither predominantly positive nor negative ($\chi^2=12.34, p=0.002$).

The details of the study are presented and discussed in relation to previous reports. The need for a social security scheme and involvement of health care professionals to assist caregivers and patients to adjust to changed expectations imposed by the illness is proposed as a way of relieving some of the burden which caregivers experience.