Lifestyle characteristics correlated with daily life functions of patients with mental disorders

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Objectives

It is important for patients with mental disorders to have stable daily life functions. In order to achieve this, institutions, such as psychiatric daycares and small-scale working places for patients with mental disorders, provide daily life support to ambulatory patients. Ambulatory patients receive training for cooking and cleaning in these institutions.
However, despite having received such training, ambulatory patients sometimes face difficulties in their actual daily life. The lifestyle characteristics of ambulatory patients are one of the factors that influence their daily life functions. Thus, this study aims at investigating the lifestyle characteristics of ambulatory patients that correlate with such functions.
Method:
The subjects were 2,190 individuals with schizophrenia who regularly visited day-care centers or workshops in Japan. We administered a self-assessment questionnaire survey sent via mail. The contents of the questionnaire included background information such as age,
and purposes for making regular visits (multiple answers allowed), and the Rating Scale for Functioning in Individuals with Mental Disorders (from 0 to 126 points). The study was conducted between September and November 2008. We analyzed their answers statistically using a t-test and multiple regression analysis.
Ethical considerations:

We conducted the study according to the ethical guidelines for clinical studies by the Ministry of Health, Labor and Welfare. We notified the subjects in writing of information such as the purpose and method of the study, privacy protection, and that participation was voluntary; we deemed their consent given if we received their answer to the questionnaire. In addition, we obtained approval from the ethical review board of the institution the researchers belonged to.
Results and Discussion:

There were 78.9 ± 16.2 points of life functions of ambulatory patients. A total of 681 patients (69.4%) had a housemate, 588 patients (59.9%) did their own washing, 341 patients (56.4%) did their own cleaning, and 352 patients (35.9%) cooked for themselves. Moreover, 294 patients (30.0%) did their own housework (including washing, cleaning, and cooking).
It was understood that the patients had very few opportunities to do their own washing, cleaning, and cooking in their actual daily lives. The reason for such is that schizophrenic patients find it difficult to grasp the overall situation, and their unpredictable behavioral characteristics also affect their lifestyle.
Patients who self-performed washing, cleaning, and cooking had higher daily life functions compared with those who did not self-perform the housework ($t = 2.11–2.40$, $p = 0.018–0.035$). There was no significant statistical difference in daily life functions based on the presence or absence of a housemate. Significant correlation of life function points with washing, cleaning, and cooking was only found in “cleaning on their own” ($\beta = .15$, $p = .001$).
From the above, it has been recognized that patients who self-perform washing, cleaning, and cooking have a high daily life functions, and that doing self-cleaning can improve such functions. Furthermore, life functions can be improved by increasing practice opportunities not only during training in the institution but also in their daily life.