SOCIAL SUPPORT OF SINGLE PARENTS FOR PEOPLE WITH SCHIZOPHRENIA AT CIGONDEWAH RAHAYU VILLAGE OF BANDUNG KULON DISTRICT BANDUNG CITY

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Abstract

Social support consists of emotional, appreciation, instrumental, and informative support given by people around individuals to overcome problems and crises in life. One source of social support are families. Social support can affect a person's mental and physical health, so people with schizophrenia (ODS) really need it. The purpose of this study is to see how single parents in Cigondewah Rahayu Village, Kecamatan Bandung Kulon District, Bandung City still provide social support to People With Schizophrenia (ODS) with existing limitations. This study used a descriptive qualitative method with four informants consisting of two single fathers and single mothers. The results showed that single parents provide social support to people with schizophrenia which provides emotional, rewarding, instrumental and informative support. However, the aspect of instrumental support, particularly health, is still lacking and informative support is low. In providing social support, single mothers provide greater support than the figure of single fathers who have to work so there are other figures who help single fathers such as grandmothers, or other family members.

Keywords:
Social Support, People with Schizophrenia, Single Parents
INTRODUCTION

Pierce in Kail and Cavanaugh, (2000) describe social support as a source of emotional, information, or assistance provided by people around individuals to deal with any problems and crises that happen in daily life. Sarafino (2011) mentions that social support can come from many sources, such as spouses, family, friends, doctors, or community organizations.

“Social support refers to four broad classes of assisting behavior or act; emotional support (affect, appreciation, concern) appraisal support (feedback, affirmation), informational support (suggestion, advice, information) and instrumental support (aid in labor, money, time”). (Perri, J. Bomar, 2004)

In general, research findings continue to show that social support can affect mental and physical health through its influence on emotions (Krause, Ellizon, & Marcum, 2002, et al., 2001).

On October 10, 2018, in commemoration of world mental health day, the theme was a healthy soul comes from a healthy family. This is an important point that the family has a big role in one's mental health.

Sudiharto, (2007) explains that one form of family is the nuclear family, which is a family formed from a planned marriage bond consisting of husband, wife, and children, either due to birth (natural) or adoption.

Nuclear families consist of father, mother, and child, however, due to some reasons, the family is not complete anymore. Sager in Perlmutter and Hall (1985) states that there are several reasons why individuals become single parents. The reasons are the death of a husband or wife, divorce or separation, having children without marriage, adoption of children by single women or men. The cause of the termination of the marriage bond occurs due to two things, namely divorce (divorce) or the death of the spouse (divorced death).

Single parents generally undertake the entire responsibility for housework and child care while, often working full time. Richard and Schmige find that aside from financial concerns, task overload is the highest problem identified by single parents. The ability to balance work, child care, and household responsibilities is a common difficulty for both single mothers or single fathers. Single parents rarely live with other adults who can offer supplemental support when competing demands are encountered. (Wright, 1989)

Based on the results of previous research Family Social Support to Person with Schizophrenia in Metal Hospital West Java Province by Erfika Mahardini in 2019 from Bandung Polytechnic of Social Welfare with qualitative method and asked 49 respondent showed the social support from the family was in the medium level especially for reward and instrumental support.

The research of the first field study from Bandung Polytechnic of Social Welfare (2019) at Cigondewah Rahayu Village, Bandung Kulon District, Bandung City, there are 17 people suffering from schizophrenia where four of them are cared for by single parents.

Schizophrenia as a neurological disease that affects the client's perception, way of thinking, language, emotions, and social behavior (Lieberman, et al., 2012)

Ballerini (2002) states that disorders of social functioning experienced by schizophrenia patients result in changes in social abilities. This reality is characterized by behavior that is not reality-oriented, the existence of rigid and non-adaptive thoughts / ideas and inability to socialize.

Based on the background of the problems that have been mentioned, the
research problem is that people with schizophrenia cannot carry out their social functions properly. Furthermore, families with single parents will find many difficulties to carry out their responsibilities so that social support is hard to give by single parents for people with schizophrenia.

The purpose of this study was to see how single parents in Cigondewah Rahayu Village, Bandung Kulon District, Bandung City still provide social support to People With Schizophrenia (ODS) with existing limitations as single parents.

METHOD

This research uses a qualitative method. According to Bogdan and Taylor in Lexy. J. Moleong (2014) qualitative research methods is "A research procedure that produces descriptive data in the form of written or spoken words from people and observable behavior. This approach is directed at the setting and the individual holistically (intact).

Researchers used qualitative methods because researchers intended to obtain a complete, in-depth and meaningful picture of single parent social support for people with schizophrenia in Cigondewah Rahayu Village, Bandung Kulon District, Bandung City.

As stated by Lofland and Lofland in Moleong (2014) in qualitative research, the main data sources are words and actions, the rest is additional data such as documents and others. Sources of data used in this research are primary data sources and secondary data sources.

The primary data sources in this research were informants who were single parents who provided social support to people with schizophrenia (ODS), two single mothers are informants EM and AI then two single fathers are informants DN and DD, with a total four single parents in Cigondewah Rahayu Village. Sources of secondary data in this research are complementary primary data, in the form of photos, documentation, and other information related to social support from single parents for people with schizophrenia (ODS) at Cigondewah Rahayu Village.

The data collection technique uses in-depth interviews using an interview guide consisting of four points (emotional support, appreciation support, instrumental support, and informative support) and 11 sub-points. The next technique is an observation which is observed informants in carrying out activities or activities that can show or strengthen answers to informant questions in providing social support to people with schizophrenia, and documentation studies carried out by researchers are collecting data in the form of health logbooks, diaries of people with schizophrenia, photos of people with schizophrenia, health diagnoses, and other related documents to the object of research.

Data analysis used quantitative measurements, with the following stages: 1) scoring the results of the baseline condition assessment 1, 2) scoring the results of the intervention condition assessment, 3) making an assessment table for the scores that have been obtained in the baseline and intervention conditions, 4) comparing the results scores on baseline and intervention conditions, 5) making data analysis in the form of line graphs, so that the differences can be seen, 6) making conclusions on the results of data analysis.

RESULT

Emotional Support

Emotional support in this research is emotional support in the form of attention and care given by single parents, either mother or father, to people with schizophrenia (ODS).

a. Attention. The four informants gave attention through actions but with different
goals. EM informants protect from harm, DN informants help ADL (Activity of Daily Living), AI informants provide needs (money), and DD informants are responsible when their children make mistakes.

Two informants who are single mothers, EM and AI, give attention with more intensity than the single father (single father) DN and DD because they spend more time at home.

b. Care. Four informants showed their concern through their actions, two informants EM and DD invited ODS to participate in the community or leave the house, informants DD was responsible for ODS’s actions, and informants AI made an identity card so that ODS could seek treatment.

Appreciation Support
Appreciation support in this research is positive appreciation and positive encouragement given by single parents, both mothers and fathers, to people with schizophrenia (ODS).

a. Positive Appreciation. The four informants have given positive appreciation but in different ways. One informant, namely EM gave a positive appreciation by giving encouragement, DN informant asked a person with schizophrenia to go outside, AI informant let the ODS do what he liked, and DD informant gave advice and thanks.

b. Positive Encouragement. The four informants gave different encouragement to their business. Giving forward encouragement is done by providing opportunities and encouragement to people with schizophrenia. According to three informants, namely EM, DN and AI, the psychological condition of ODS was better, while according to informant DD said that ODS was easier to obey orders.

Instrumental Support
Instrumental social support in this research is divided into material support (clothing, food, shelter, and health) and services.

a. Clothing. The four informants have fulfilled the clothing needs of people with schizophrenia with less economic conditions, this is done as a form of responsibility as parents to children.

b. Food. The four informants have provided food needs for people with schizophrenia even though they have not fulfilled sufficient nutritional needs. Two single fathers, informants DN and DD provide support with the help of others to cook such as grandmothers or other children, while for single mothers, EM and AI cooked their own food without the help of others.

c. Shelter. The four informants already have a place to live for people with schizophrenia, although it is not feasible because it is still made of wood and very narrow. This house was obtained from their family inheritance.

d. Health. Of the four informants, only EM informants still gave medicine regularly to people with schizophrenia, while the other three informants had stopped long ago. This is due to economic factors and also lack of accessibility to government assistance to access this health assistance for free.

e. Services. Support in the form of services is carried out with action / non-verbal activities. Four informants helped the Activity of Daily Living (ADL) of people with schizophrenia. As a single father, informants DN and DD only provide support during work holidays, while single mothers, EM, and AI do it every day.

Informative Support
Informative support in this research is divided into two, namely providing advice and
knowledge/understanding to people with schizophrenia

a. Advice. In providing single mother advice, EM and AI informants do it every day, but often feel sad when doing it because there is no change in people with schizophrenia, whereas single fathers, informants DN and DD rarely give advice and often feel bored when giving advice, however still do it as a form of parental responsibility for people with schizophrenia.

b. Knowledge/Understanding. The four informants have provided knowledge or understanding through words and deeds (verbal and non-verbal) simultaneously, although not routinely. The form of knowledge and understanding given is related to ADL (Activity of Daily Living) such as toileting, eating, and cooking. Single mothers, EM, and AI provide knowledge/understanding to ODS themselves, while single fathers, DN, and DD get help from other people such as grandmothers, sisters, or other relatives.

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<th>Table 1 Result</th>
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<td><strong>Aspects of Social Support</strong></td>
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**DISCUSSION**

This research was conducted by dividing social support into several aspects, namely emotional social support consisting of attention and care, social support for rewards consisting of positive rewards and positive encouragement, informative social support consisting of material (clothing, food, shelter, and health and non-material namely services), and instrumental social support consisting of providing advice and knowledge / understanding.

The results of research on social emotional support in this research are divided into two sub aspects, namely giving attention and caring. Giving attention and care has been done well but not maximally. Informants who are single fathers are still not maximal in providing emotional social support because they have to work so that the intensity of giving attention and care to people with schizophrenia (ODS) is still lacking, while for other
informants who are (single mothers) it is very good because carried out every day.

The second aspect is the social support of appreciation. In this research, social support for rewards is divided into two sub-aspects, namely positive rewards and forward encouragement. Not much different from the results of emotional social support, in providing social support, appreciation has been given to people with schizophrenia but not maximally, this happens because single fathers can only provide during work holidays, so they must be assisted by other family members such as grandmother and sister from ODS. Meanwhile, single mothers are able to provide rewarding social support every day.

The third Social Support is instrumental support. In this research, instrumental social support is divided into two, namely material (clothing, food, shelter, and health) and non-material (services). Based on the results of the research, all informants have provided instrumental needs in the form of clothing, food, and shelter, although this is not optimal because of the lack of economic problems. Meanwhile, health support for people with schizophrenia (ODS) was still lacking, because only one informant still provided health support for ODS while the other three informants did not take medication anymore. As for support in the form of services, the four informants have provided it, but the single father can only provide it during work holidays and cannot be done every day.

The last social support is informative social support. In this research, informative social support is divided into two, namely giving advice and knowledge / understanding. In giving advice, the four informants have given people with schizophrenia (ODS) even though single fathers only do a certain time, which is on work holidays. In the sub-aspect of knowledge, the four informants are still lacking because they rarely provide this knowledge / understanding to people with schizophrenia (ODS).

CONCLUSION

Social support examined in this study is emotional, rewarding, instrumental and informative social support provided by single parents to people with schizophrenia (ODS).

The results showed that from these four aspects was different. The previous research Erfika Mahardini mentioned that social support that given by family was in the medium level. This research showed the provision of instrumental support in health and also informative support is still lacking when compared to the other two aspects, namely emotional and appreciation. The difference between the provision of social support provided by single mothers and single fathers is also the result of this study.

Single mothers provide higher social support than single fathers because single fathers spend their time working outside, while single mothers work from home so that they have more time to provide support to people with schizophrenia.

In providing social support, single fathers get help from other families such as brothers, grandmothers, or younger siblings because they do not have much time to provide support for people with schizophrenia.

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Dukungan Sosial Keluarga terhadap Orang dengan Gangguan Jiwa Di Rumah Sakit Jiwa Provinsi Jawa Barat oleh Erfika Mahardini dari Sekolah Tinggi Kesejahteraan Sosial Bandung pada tahun 2019