

Analysis of the Clinical Efficacy of Comprehensive Nursing Intervention in Schizophrenia Patients During the Rehabilitation Phase

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Abstract: Objective: To analyze the clinical efficacy of comprehensive nursing intervention in schizophrenia patients during the rehabilitation phase. Methods: A total of 100 schizophrenia patients in the rehabilitation phase admitted to our hospital from October 2023 to October 2024 were selected as study subjects. They were divided into a control group and an observation group using a random number table, with 50 patients in each group. The resilience scores (assessed using the Connor-Davidson Resilience Scale, CD-RISC) and social functioning (scored using the Social Skills Performance Assessment Scale for Psychiatric Inpatients, SSPI) before and after nursing were compared between the two groups. Results: Before nursing, there were no significant differences in CD-RISC scores and SSPI scores between the two groups (P > 0.05). After nursing, the CD-RISC scores for self-strengthening, optimism, and tenacity in the observation group were significantly higher than those in the control group (P < 0.05). Additionally, after nursing, the SSPI scores for daily living abilities and social skills in the observation group were higher than those in the control group (P < 0.05). Conclusion: Comprehensive nursing for schizophrenia patients during the rehabilitation phase can effectively improve their resilience and social functioning. *Keywords*: Comprehensive nursing; Rehabilitation phase schizophrenia; Resilience; Social functioning

1. Introduction

Due to the complexity of schizophrenia, in addition to pharmacological treatment, patients also require nursing interventions, and routine nursing care has limited effectiveness[1]. For patients with complex conditions such as schizophrenia, comprehensive nursing interventions are necessary. Comprehensive nursing measures not only focus on the patient's physical health but also prioritize improvements in their psychological state and social adaptability, making them more comprehensive than routine nursing measures. Based on this, this study selected 100 schizophrenia patients in the rehabilitation phase admitted to our hospital from October 2023 to October 2024 as study subjects to explore the clinical efficacy of comprehensive nursing interventions in these patients. The results are now reported as follows:

2. Materials and Methods

2.1 General Information

A total of 100 schizophrenic patients in the rehabilitation stage admitted to our hospital between October 2023 and October 2024 were selected as the research subjects and divided into a control group and an observation group using the random number table method, with 50 patients in each group. In the control group, there were 26 males and 24 females, aged 45-78 years old, with a mean age of (54.30 ± 10.56) years. Their disease duration ranged from 6 to 13 years, averaging (5.60 ± 1.23) years. In the observation group, there were 25 males and 25 females, aged 46-79 years old, with a mean age of (55.60 ± 10.75) years. Their disease duration ranged from 6.50 to 12 years, averaging (5.85 ± 1.13) years. There were no statistically significant differences in general information between the two groups (P>0.05), indicating comparability.

2.2 Inclusion and Exclusion Criteria

Inclusion Criteria:(1) Patients meeting the diagnostic criteria for schizophrenia[2];(2) Patients with stable conditions and not requiring compulsory treatment;(3) Patients who are aware of the purpose of this study and have signed the informed consent form.

Exclusion Criteria:(1) Patients with severe physical illnesses;(2) Patients with immune diseases;(3) Patients with a history of abuse of psychoactive substances;(4) Patients with other significant renal diseases.

2.3 Methods

2.3.1 Control Group

Routine nursing interventions were provided: Patients were instructed to take medication as prescribed, and their mental state was closely monitored. Health education was conducted to explain the causes and symptoms of mental illness, enhancing patients' understanding of schizophrenia. Psychological interventions were implemented, including listening to patients' concerns, providing psychological counseling, support, and encouragement, to help patients establish a good sense of self-confidence in their recovery.

2.3.2 Observation Group

Comprehensive nursing interventions were provided: (1) Patients were educated on the causes, treatment process, and potential adverse reactions of schizophrenia. Communication was established with the patients' families, urging them to interact more with the patients, show understanding, and provide care. (2) Psychological assessments were conducted to evaluate the patients' mental state and attitudes towards life. Targeted psychological counseling was provided to help patients maintain an optimistic outlook on life and face treatment with confidence, health, and optimism. (3) Daily activity training was implemented, including basic life skills such as diet, sleep, personal hygiene, dressing, and medication administration. Targeted rehabilitation training for social functions was provided to correct social withdrawal and behaviors that did not conform to social norms. Patients were educated on social skills, and social situations were simulated for them to observe. Art, calligraphy, and other activities were organized to encourage patient participation, and positive feedback and encouragement were given.

2.4 Observation Indicators

(1) Comparison of Psychological Resilience Scores Before and After Nursing Between the Two Groups [Assessed Using the Connor-Davidson Resilience Scale (CD-RISC)]: This includes three dimensions — self-efficacy (with a maximum score of 32), optimism (with a maximum score of 16), and tenacity (with a maximum score of 48). A higher score indicates better psychological resilience.

(2) Comparison of Social Functioning Scores Before and After Nursing Between the Two Groups [Assessed Using the Social Skills Performance Assessment Instrument (SSPI) for Psychiatric Patients]: This includes two dimensions—daily living abilities (with a maximum score of 12) and social activity skills (with a maximum score of 16). A higher score indicates better social functioning.

2.5 Statistical Methods

Statistical analysis of the data was conducted using SPSS version 24.0 software. The measurement data were expressed as mean \pm standard deviation (\pm S). The T-test was employed for comparison, and a P-value less than 0.05 was considered statistically significant, indicating a difference with practical significance.

3. Results

3.1 Comparison of CD-RISC Scores Between Groups

Before nursing, there was no significant difference in CD-RISC scores between the two groups (P > 0.05). After nursing, the CD-RISC scores in the observation group, including self-efficacy, optimism, and tenacity, were significantly higher than those in the control group (P < 0.05). See Table 1 for details.

Table 1. Comparison of CD-Rist Scores between Groups (±5, Scores)							
Grouping	Number of Cases (n)	Self-Efficacy		Optimism		Tenacity	
		Before Nursing	After Nursing	Before Nursing	After Nursing	Before Nursing	After Nursing
Control Group	50	15.60±4.20	20.02±6.36	5.63±1.25	8.69±1.36	20.36±5.12	25.30±6.36
Observation Group	50	15.58 ± 3.68	26.33±5.42	$5.46{\pm}1.35$	12.63 ± 2.63	$20.45{\pm}15.42$	32.20±6.42
t	-	0.025	5.339	0.653	9.409	0.039	5.399
Р	-	0.979	< 0.001	0.515	< 0.001	0.968	< 0.001

•	Table 1.	Comparis	on of Cl	D-RISC	Scores	Between	Groups (±S, Sco	res)

3.2 Comparison of SSPI Scores Between Groups

Before nursing, there was no significant difference in SSPI scores between the two groups (P > 0.05). After nursing, the scores for daily living abilities and social activity skills in the observation group were higher than those in the control group

(P < 0.05). See Table 2 for details.

Grouping	Number of Course (v)	Daily Livin	g Abilities	Social Activity Skills		
	Number of Cases (n) –	Before Nursing	After Nursing	Before Nursing	After Nursing	
Control Group	50	5.42±1.12	7.58±2.13	6.36±1.63	9.85±2.45	
Experimental Group	50	5.36±1.42	11.36±2.42	6.25±1.64	12.36±2.36	
t	-	0.234	8.290	0.336	5.217	
Р	-	0.815	< 0.001	0.737	< 0.001	

Table 2. Comparison of SSPI Scores Between Groups (±S, Scores)

4. Discussion

Schizophrenia is a chronic and disabling brain disorder primarily characterized by severe disturbances in thinking, emotion, and behavior. Patients often experience symptoms such as hallucinations, delusions, disorganized thinking, flattened affect, and diminished volition, which significantly impair their normal lives[3]. The etiology of schizophrenia is complex and not fully understood, but it may be related to genetic factors and the patient's personality. Clinical interventions for schizophrenic patients include nursing care, but traditional nursing measures are often monotonous and yield poor results. Comprehensive nursing, however, provides targeted and comprehensive nursing interventions tailored to individual patients, achieving better outcomes.

The results of this study indicate that there were no significant differences in CD-RISC scores and SSPI scores between the two groups before nursing (P > 0.05). After nursing, the CD-RISC scores for self-strengthening, optimism, and resilience in the observation group were significantly higher than those in the control group (P < 0.05). Additionally, after nursing, the SSPI scores for daily living abilities and social skills in the observation group were higher than those in the control group (P < 0.05). Routine nursing has been widely applied in clinical practice; however, as it is a basic form of clinical care, the content of nursing is relatively simple and can meet the nursing needs of most patients[4]. Nonetheless, due to the lack of unified and professional nursing training for nursing staff, their nursing skills are not comprehensive enough[5]. When providing nursing services to patients, primarily simple physiological nursing, such as reminding patients to take medication on time and basic health education content, is used, thus limiting the nursing effectiveness[6]. Due to the complexity of the disease, patients with schizophrenia require more comprehensive nursing interventions. Comprehensive nursing emphasizes the establishment of rehabilitation self-confidence in schizophrenic patients during the rehabilitation phase. It provides targeted psychological counseling based on the patients' psychological states, offers a more comprehensive and personalized treatment plan, strengthens training in patients' daily living skills, organizes art and calligraphy activities, and encourages active participation[7]. This approach helps patients better integrate into society, improves their social functions, and enhances their quality of life[8].

In conclusion, comprehensive nursing for schizophrenic patients during the rehabilitation phase can effectively improve their psychological resilience and social functioning.

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