Chapter 9

Stamped Life: Stigmatization Stories of Women Who Care for Patients With Schizophrenia

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ABSTRACT

This research was conducted with a view to ascertaining the perceptions, feelings, and thoughts of the women who care for patients with schizophrenia regarding the challenges they face and stigma. This research was conducted by using qualitative research method. To this end, in-depth interviews were made with 10 women who care for schizophrenia patients. As a result of the research, it was found out that the women who care for patients often care of the patient on their own, and thus, they have some psychosocial challenges. The disease negatively affects family relationships, but some families, on the contrary, have positive changes in their relationships. The parents accuse themselves as they are the cause of the disease and they are accused by the social circles. The women who care for patients are exposed to stigma during almost the all processes of the disease and some women internalize being stigmatized and they mostly tend to hide the disease in order to cope with the stigma.

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INTRODUCTION

Mental diseases affect not only the patient but also the family of the patient and the systems they are affiliated to. Particularly the patient’s family and the individuals who care for the patient are physically, economically, psychologically and socially affected by the process. Negative attitude and behaviours of the society towards mental illnesses make this process harder. Lack of adequate information and awareness of the society about the mental diseases cause the individuals who are mentally ill and their family to be marginalised. Fear of being marginalised and stigmatised prevents the patient who is going through a tough disease and his/her family from taking social benefit and, as a result, cause the family members to isolate themselves from the society. This may either strengthen the family relationships or cause deterioration in in-family relations. Bartol et al. (1994) stated that having a family member being diagnosed with schizophrenia in the family might change family life.

Stigma may increase the families’ burden which is caused by the disease process. Gülseren et. al (2010) stated that the families’ burden might increase because of the stigmatisation. Schizophrenia disease affects family system and may cause great stress in the family (Öztürk, 2001). Disease process may cause the family members to feel depressed, stressed, embarrassed, guilty, scared, desperate and angry (Saunders & Byrne 2002; Gülseren, 2002). The name of the disease is a label (Angermeyer and Matschinger, 2003). While this definition is a labelling for many diseases, it reaches stigmatisation level for some diseases (Yıldız et. al., 2011). Schizophrenia is one of them.

As for the stigmatisation which is among the problems faced by the families during disease, firstly some mindscapes about these patients develop. Then, these mindscapes turn into prejudices which is followed by negative thoughts and feelings. A power balance is in place in stigmatisation which goes towards the weak from the strong one (Corrigan ve Watson, 2002). The families may feel that the sick person and they are, along with him or her, are being trivialised (Struening et. al., 2001), and the family members face stigma together with the mentally ill person (Larson and Corrigan, 2008). Therefore, stigma affects not only the mentally sick individuals but also their families. Dardas and Simmons (2015) stated that some authors considered the stigma as an information problem while some considered the same thing as a form of negative attitudes, and some considered it as a result of discriminative behaviours.

Stigma affects the individuals’ life quality and social interaction (Yanos et al., 2001; Lundberg at al., 2008). Whereas communicating and interacting with mental health services have a positive impact on some aspects of life quality such as family relationships, financial situation, security and health; stigma has a negative impact on these aspects (Rosenfield, 1997; Lundberg et al., 2008).
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