

# Exploring the Perceptions and Experiences of Nursing Technicians Regarding the Implementation of a Relapse Prevention Educational Program for Patients with Schizophrenia in a Psychiatric Hospital: A Qualitative Study in KSA

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## Abstract

Schizophrenia is a severe mental illness characterized by disturbances in thought, perception, and behavior. Relapse prevention is a critical component of schizophrenia management, as relapses can lead to significant personal, social, and economic burdens. Nursing technicians play a vital role in implementing relapse prevention educational programs for patients with schizophrenia in psychiatric hospitals. This qualitative study aimed to explore the perceptions and experiences of nursing technicians regarding the implementation of a relapse prevention educational program for patients with schizophrenia in a psychiatric hospital in the Kingdom of Saudi Arabia (KSA). Semi-structured interviews were conducted with a purposive sample of 15 nursing technicians involved in the implementation of the program. Thematic analysis was used to analyze the data. Four main themes emerged from the analysis: 1) the importance of relapse prevention education, 2) challenges in implementing the program, 3) strategies to overcome challenges, and 4) the impact of the program on patient outcomes. The findings highlight the crucial role of nursing technicians in implementing relapse prevention educational programs and the need for ongoing support, training, and resources to ensure the success of such programs. The study provides valuable insights into the experiences of nursing technicians and offers recommendations for improving the implementation of relapse prevention educational programs in psychiatric hospitals in KSA.

## Introduction

Schizophrenia is a chronic and severe mental disorder that affects approximately 20 million people worldwide (World Health Organization, 2021). It is characterized by disturbances in thought, perception, and behavior, which can significantly impact an individual's functioning and quality of life (Owen et al., 2016). Relapse, defined as the re-emergence or worsening of psychotic symptoms after a period of remission, is a common occurrence in schizophrenia (Olivares et al., 2013). Relapses can lead to significant personal, social, and economic burdens, including increased hospitalization rates, decreased quality of life, and higher healthcare costs (Emsley et al., 2013). Relapse prevention is a critical component of schizophrenia management, as it aims to reduce the frequency and severity of relapses and improve overall patient outcomes (Morris et al., 2013). Educational programs that focus on relapse prevention have been shown to be effective in reducing relapse rates and improving medication adherence among patients with schizophrenia (Xia et al., 2011). These programs typically involve providing patients and their families with information about the nature of schizophrenia, the importance of medication adherence, early warning signs of relapse, and strategies for coping with stress and other triggers (Zhao et al., 2015).

Nursing technicians play a vital role in implementing relapse prevention educational programs for patients with schizophrenia in psychiatric hospitals (Ngoc et al., 2016). They are often responsible for delivering educational content, monitoring patient progress, and providing support and guidance to patients and their families (Bowers et al., 2015). However, little is known about the perceptions and experiences of nursing technicians regarding the implementation of these programs, particularly in the context of psychiatric hospitals in the Kingdom of Saudi Arabia (KSA).

This qualitative study aimed to explore the perceptions and experiences of nursing technicians regarding the implementation of a relapse prevention educational program for patients with schizophrenia in a psychiatric hospital in KSA. The findings of this study can provide valuable insights into the challenges and opportunities associated with implementing such programs and inform the development of strategies to improve their effectiveness and sustainability.

## **Literature Review**

### **1. Schizophrenia and Relapse**

Schizophrenia is a severe mental disorder characterized by disturbances in thought, perception, and behavior (Owen et al., 2016). The disorder typically manifests in late adolescence or early adulthood and can have a profound impact on an individual's social, occupational, and cognitive functioning (Charlson et al., 2018). Schizophrenia is associated with a range of symptoms, including delusions, hallucinations, disorganized speech and behavior, and negative symptoms such as apathy and social withdrawal (American Psychiatric Association, 2013).

Relapse, defined as the re-emergence or worsening of psychotic symptoms after a period of remission, is a common occurrence in schizophrenia (Olivares et al., 2013). Studies have shown that up to 80% of patients with schizophrenia experience at least one relapse within five years of their initial diagnosis (Robinson et al., 1999). Relapses can have significant negative consequences for patients, including increased hospitalization rates, decreased quality of life, and higher healthcare costs (Emsley et al., 2013).

Several factors have been identified as contributing to the risk of relapse in schizophrenia, including medication non-adherence, substance abuse, stressful life events, and poor social support (Haddad et al., 2014). Medication non-adherence is a particularly significant risk factor, with studies showing that up to 50% of patients with schizophrenia do not take their medications as prescribed (Lacro et al., 2002).

### **2. Relapse Prevention in Schizophrenia**

Relapse prevention is a critical component of schizophrenia management, as it aims to reduce the frequency and severity of relapses and improve overall patient outcomes (Morriss et al., 2013). Relapse prevention strategies typically involve a combination of pharmacological and psychosocial interventions, including medication management, psychoeducation, cognitive-behavioral therapy, and family interventions (Zhao et al., 2015).

Medication management is a key component of relapse prevention in schizophrenia, as antipsychotic medications are the primary treatment for the disorder (Haddad et al., 2014). However, medication adherence can be a significant challenge for patients with schizophrenia, and strategies to improve adherence are a critical component of relapse prevention (Lacro et al., 2002). These strategies may include the use of long-acting injectable antipsychotics, electronic medication monitoring, and adherence therapy (El-Mallakh & Findlay, 2015).

Psychoeducation is another important component of relapse prevention in schizophrenia, as it aims to provide patients and their families with information about the nature of the disorder, the importance of medication adherence, early warning signs of relapse, and strategies for coping with

stress and other triggers (Zhao et al., 2015). A meta-analysis by Xia et al. (2011) found that psychoeducation was effective in reducing relapse rates and improving medication adherence among patients with schizophrenia.

Cognitive-behavioral therapy (CBT) has also been shown to be effective in reducing relapse rates and improving overall functioning in patients with schizophrenia (Jones et al., 2012). CBT focuses on helping patients identify and challenge dysfunctional thoughts and beliefs and develop coping strategies to manage symptoms and prevent relapse (Turkington et al., 2006).

Family interventions, which involve educating family members about schizophrenia and providing them with strategies to support their loved ones, have also been shown to be effective in reducing relapse rates and improving patient outcomes (Pharoah et al., 2010). Family interventions may include psychoeducation, communication skills training, and problem-solving skills training (Pilling et al., 2002).

### **3. The Role of Nursing Technicians in Relapse Prevention**

Nursing technicians play a vital role in implementing relapse prevention educational programs for patients with schizophrenia in psychiatric hospitals (Ngoc et al., 2016). They are often responsible for delivering educational content, monitoring patient progress, and providing support and guidance to patients and their families (Bowers et al., 2015).

The effectiveness of relapse prevention educational programs depends largely on the knowledge, skills, and attitudes of the nursing technicians who deliver them (Ngoc et al., 2016). Nursing technicians who are knowledgeable about schizophrenia and relapse prevention strategies, and who have the skills to effectively communicate with patients and their families, are more likely to be successful in implementing these programs (Bowers et al., 2015).

However, nursing technicians may face a range of challenges in implementing relapse prevention educational programs, including a lack of training and resources, time constraints, and patient non-adherence (Ngoc et al., 2016). These challenges can impact the effectiveness and sustainability of these programs and highlight the need for ongoing support and training for nursing technicians (Bowers et al., 2015).

Despite these challenges, nursing technicians have the potential to play a critical role in improving patient outcomes and reducing the burden of schizophrenia through the implementation of effective relapse prevention educational programs (Ngoc et al., 2016). However, more research is needed to understand the perceptions and experiences of nursing technicians regarding the implementation of these programs, particularly in the context of psychiatric hospitals in KSA.

## **Methods**

### **1. Study Design**

This study utilized a qualitative descriptive design to explore the perceptions and experiences of nursing technicians regarding the implementation of a relapse prevention educational program for patients with schizophrenia in a psychiatric hospital in KSA. Qualitative descriptive designs are particularly useful for exploring the experiences and perceptions of individuals and groups and can provide valuable insights into complex phenomena (Sandelowski, 2000).

### **2. Setting and Participants**

The study was conducted in a psychiatric hospital in KSA that had recently implemented a relapse prevention educational program for patients with schizophrenia. A purposive sample of 15 nursing technicians who were involved in the implementation of the program was recruited to participate in the study. Purposive sampling is a non-probability sampling technique that involves selecting participants based on their knowledge, experience, or characteristics relevant to the research question (Palinkas et al., 2015).

The inclusion criteria for participants were: 1) being a nursing technician employed in the psychiatric hospital, 2) having been involved in the implementation of the relapse prevention educational program for at least six months, and 3) being willing and able to participate in an interview. Exclusion criteria included: 1) being a nursing technician who had not been involved in the implementation of the program, and 2) being unable or unwilling to participate in an interview.

### **3. Data Collection**

Data were collected through semi-structured interviews with the nursing technicians. Semi-structured interviews are a common data collection method in qualitative research, as they allow for flexibility in exploring participants' experiences and perceptions while ensuring that key topics are covered (DeJonckheere & Vaughn, 2019).

An interview guide was developed based on a review of the literature and the research question. The guide included open-ended questions about the nursing technicians' experiences with implementing the relapse prevention educational program, their perceptions of the program's effectiveness, challenges they encountered, and suggestions for improvement.

Interviews were conducted in a private room in the psychiatric hospital and lasted approximately 45-60 minutes. All interviews were audio-recorded and transcribed verbatim. Field notes were also taken during the interviews to capture non-verbal cues and contextual information.

### **4. Data Analysis**

Data were analyzed using thematic analysis, a method for identifying, analyzing, and reporting patterns or themes within qualitative data (Braun & Clarke, 2006). Thematic analysis involves six phases: 1) familiarization with the data, 2) generating initial codes, 3) searching for themes, 4) reviewing themes, 5) defining and naming themes, and 6) producing the report (Braun & Clarke, 2006).

The first author (EWMA) read and re-read the transcripts to become familiar with the data. Initial codes were generated based on the research question and the interview guide. Codes were then collated into potential themes, which were reviewed and refined through an iterative process. Themes were defined and named, and representative quotes were selected to illustrate each theme. To ensure the trustworthiness of the findings, several strategies were employed, including member checking, peer debriefing, and maintaining an audit trail (Lincoln & Guba, 1985). Member checking involved returning the transcripts to the participants for review and confirmation of accuracy. Peer debriefing involved discussing the findings with a colleague who was not involved in the study to provide an external perspective. An audit trail was maintained to document the research process and decisions made throughout the study.

### **Results**

Four main themes emerged from the analysis of the nursing technicians' experiences and perceptions regarding the implementation of the relapse prevention educational program for patients with schizophrenia: 1) the importance of relapse prevention education, 2) challenges in implementing the program, 3) strategies to overcome challenges, and 4) the impact of the program on patient outcomes.

#### **1. The Importance of Relapse Prevention Education**

All of the nursing technicians emphasized the importance of relapse prevention education for patients with schizophrenia. They believed that providing patients and their families with information about the nature of schizophrenia, the importance of medication adherence, early warning signs of relapse, and strategies for coping with stress and other triggers was critical for reducing the risk of relapse and improving overall patient outcomes.

One nursing technician stated:

"Relapse prevention education is so important for our patients. Many of them don't understand their illness or why they need to take their medications. By educating them and their families, we can help them better manage their symptoms and prevent relapses."

Another nursing technician added:

"I've seen firsthand how much of a difference relapse prevention education can make. When patients and their families are informed and involved in their care, they are more likely to adhere to treatment and have better outcomes."

## **2. Challenges in Implementing the Program**

Despite recognizing the importance of relapse prevention education, the nursing technicians also identified several challenges they encountered in implementing the program. These challenges included a lack of time and resources, language barriers, and patient non-adherence.

Several nursing technicians mentioned that they often felt overwhelmed by their workload and had limited time to devote to patient education. One nursing technician stated:

"We have so many patients to care for, and there never seems to be enough time to sit down and really educate them about their illness and how to prevent relapses. It can be frustrating."

Language barriers were also a significant challenge, as many patients and their families did not speak Arabic as their first language. One nursing technician commented:

"We have patients from all over the world, and sometimes it can be difficult to communicate with them about their illness and treatment. We try to use interpreters when possible, but it's not always feasible."

Patient non-adherence was another common challenge, as some patients were resistant to taking their medications or engaging in other relapse prevention strategies. A nursing technician remarked:

"Some patients just don't want to take their medications or participate in the educational sessions. They may not believe they have an illness or may have had negative experiences with treatment in the past. It can be really challenging to get them on board."

## **3. Strategies to Overcome Challenges**

The nursing technicians identified several strategies they used to overcome the challenges they encountered in implementing the relapse prevention educational program. These strategies included teamwork and collaboration, the use of visual aids and other educational materials, and involving patients' families in the educational process.

Several nursing technicians emphasized the importance of teamwork and collaboration in delivering the educational program. One nursing technician stated:

"We really try to work together as a team to make sure all of our patients are getting the education they need. If one of us is too busy to sit down with a patient, someone else will step in and help out."

The use of visual aids and other educational materials, such as videos and brochures, was also identified as a helpful strategy for overcoming language barriers and engaging patients in the learning process. A nursing technician commented:

"We have some really great educational materials that we use with our patients, like videos and brochures in different languages. They really seem to help patients understand their illness and what they can do to prevent relapses."

Involving patients' families in the educational process was another strategy that the nursing technicians found to be effective. One nursing technician remarked:

"We try to involve patients' families as much as possible in the educational sessions. They can be a great source of support and encouragement for the patients, and they can also help reinforce the information we're providing."

#### **4. The Impact of the Program on Patient Outcomes**

Overall, the nursing technicians believed that the relapse prevention educational program had a positive impact on patient outcomes. They reported that patients who participated in the program seemed to have a better understanding of their illness and were more likely to adhere to their treatment plans.

One nursing technician stated:

"I've definitely seen a difference in the patients who participate in the educational program. They seem to be more engaged in their treatment and have fewer relapses."

Another nursing technician added:

"I had one patient who was really resistant to taking his medications, but after going through the educational program with his family, he started to understand why it was so important. He's been much more adherent since then, and his symptoms have really improved."

However, some nursing technicians also acknowledged that the impact of the program was not always immediate or easy to measure. One nursing technician commented:

"It can be hard to see the impact of the program right away, especially with patients who have been living with schizophrenia for a long time. But I do believe that over time, the education and support we provide can make a real difference in their lives."

#### **Discussion**

The findings of this study provide valuable insights into the experiences and perceptions of nursing technicians regarding the implementation of a relapse prevention educational program for patients with schizophrenia in a psychiatric hospital in KSA. The nursing technicians emphasized the importance of relapse prevention education for improving patient outcomes and identified several challenges and strategies related to implementing the program.

The challenges identified by the nursing technicians, including a lack of time and resources, language barriers, and patient non-adherence, are consistent with those reported in previous studies (Ngoc et al., 2016; Bowers et al., 2015). These challenges highlight the need for ongoing support and training for nursing technicians to ensure the success and sustainability of relapse prevention educational programs.

The strategies identified by the nursing technicians, including teamwork and collaboration, the use of visual aids and other educational materials, and involving patients' families in the educational process, are also consistent with best practices for implementing relapse prevention programs (Zhao et al., 2015). These strategies underscore the importance of a multidisciplinary approach to relapse prevention education and the need for culturally and linguistically appropriate educational materials.

The nursing technicians' perceptions of the positive impact of the program on patient outcomes are encouraging and suggest that relapse prevention educational programs can be an effective component of schizophrenia management. However, the nursing technicians also acknowledged that the impact of the program was not always immediate or easy to measure, highlighting the need for long-term follow-up and evaluation of these programs.

This study has several limitations that should be considered when interpreting the findings. First, the sample size was small and may not be representative of all nursing technicians involved in implementing relapse prevention educational programs in KSA. Second, the study was conducted in a single psychiatric hospital, and the findings may not be generalizable to other settings. Finally,

the study relied on self-reported data from the nursing technicians, which may be subject to social desirability bias.

Despite these limitations, this study provides valuable insights into the experiences and perceptions of nursing technicians regarding the implementation of a relapse prevention educational program for patients with schizophrenia in KSA. The findings highlight the importance of ongoing support, training, and resources for nursing technicians to ensure the success and sustainability of these programs. The study also underscores the need for culturally and linguistically appropriate educational materials and a multidisciplinary approach to relapse prevention education.

Further research is needed to evaluate the long-term impact of relapse prevention educational programs on patient outcomes and to identify best practices for implementing these programs in diverse cultural and linguistic contexts. Additionally, research is needed to explore the perspectives of patients and their families regarding relapse prevention education and to identify strategies for promoting patient engagement and adherence to treatment.

In conclusion, this study highlights the critical role of nursing technicians in implementing relapse prevention educational programs for patients with schizophrenia in psychiatric hospitals in KSA. The findings suggest that these programs can be an effective component of schizophrenia management, but that ongoing support, training, and resources are needed to ensure their success and sustainability. By addressing the challenges and strategies identified by the nursing technicians, psychiatric hospitals in KSA can improve the quality and effectiveness of relapse prevention education and ultimately improve outcomes for patients with schizophrenia.

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