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## **The Empathic Love Therapy to Reduce Stress on the Caregiver of Schizophrenia Patients**

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### **Abstract**

The aim of the study is to reduce stress on the caregivers of schizophrenia patients using the Empathic Love Therapy. The study adopted quasi-experimental design, using the “the one-group pretest-posttest design with follow up” the participants in the study involving five female caregivers aged 31-42 years old, and has medium until heavy stress based on the caregiver stress scale. The data obtained were analyzed using the Friedman Test and Wilcoxon analysis. The results of the analysis indicate that there is a change in the form of a very significant stress reduction (chi-square was 10.00, with  $p = .007$ , then  $p < .01$ ) and a decrease in the mean value before treatment (pretest), after gave the treatment (posttest) until the follow-up process. The Empathic Love Therapy also has an effect on decreasing stress aspects, such as: biological aspects, cognitive aspects, emotional aspects, and behavioral aspects. The analysis also showed that there were significant stress differences of pretest-posttest, posttest-follow up, and pretest-followup ( $Z = -2.023^b$ , with  $p = .043$ , then  $p < .05$  with values). Therefore, the empathic love therapy can reduce stress on the caregiver of schizophrenia patients.

**Keywords:** Caregiver; empathic love therapy; schizophrenia; stress.

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## 1 1. Introduction

Schizophrenia disorders induce personality changes and heavy social mismatches so the patients unsuccessful in function personally, socially, vocally and physically, consequently the patients depend on others, especially in family members as caregivers [1, 2, 3, 4]. The duty of treating the patients with schizophrenia has its effects on individuals, including physical and psychological impacts. According to the American Psychological Association, the effect experienced by families as caregivers such as: physical stress, psychological and the presence of financial burdens [5]. Other opinions reveal that being the caregiver can cause physical, psychological-emotional, social, and financial burdens in providing the treatment [6]. One of the impacts that become the main focus of the study is the psychological impact of stress experienced by caregivers. A stressful caregiver's condition in mentoring is related to the recurrence of the patients with schizophrenia. It is based on the results of the authors in [7] research states that stressful life events while caring for patients can trigger relapses of schizophrenic patients. Therefore, the study aims to reduce stress on the caregiver of schizophrenia patients. Some of the previous studies aimed at reducing stress in schizophrenic caregivers, were considered still not comprehensive. The research conducted by the authors in [8] using MBSR (Mindfulness-Based Stress Reduction) to decrease stress on schizophrenia caregiver, trying to increase self-consciousness and participants understanding of the conditions experienced by schizophrenia patients, through mindfulness techniques (breathing, body consciousness, eating and walking), psychoeducation, and feedback. Also, other studies of the authors in [9] utilize the BCBSMP (Brief Cognitive-Behavioral Stress Management Programme) to decrease the stress and burdens of schizophrenic caregivers, use psychoeducation, and Cognitive Behavioral Techniques (thought analysis, identifying cognitive distortion, and finding alternative thoughts). Therefore, in the study the intervention method used to reduce stress is the Empathic Love Therapy (ELT). The Empathic love therapy is a transpersonal approach and is considered the most comprehensive or exhaustive. Transpersonal interventions are eclectic and integrative involving techniques of prior psychological variations such as behavior modification, cognitive restructuring, humanistic practice, psychodynamics, music therapy, and arts [10]. Among other intervention methods aimed at reducing stress, ELT focuses on healing past wound experiences, or so-called primal wounding which when not cured will lead to negative perceptions and feelings about the current condition. Thus, in the study the response of caregiver in dealing with the condition of families experiencing schizophrenia.

### *1.1. Stress Caregiver of Schizophrenia*

The authors in [11] states that treating schizophrenics can give a positive influence on caregivers, including maintaining dignity and maximizing the potential of care-recipients, feeling responsible, sharing love and support, personal development [12, 13], the feeling of being close to care-recipient, and heightening self-esteem. However, the researcher found data in the field that showed that there was a negative effect on the caregiver of schizophrenia patients. One of the effects felt by the caregiver is stress. Stress is a depressed state experienced by someone, both physically and psychologically [14]. These conditions involved the ability to care for the caregiver to be reduced, so it can trigger a recurrence in schizophrenia patients. The data obtained is supported by research results from the authors in [15] said that have family members with schizophrenia creates personal burdens such as physical burdens, considering that the patients with schizophrenia need the assistance, the

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treatment and control of their closest people or family. On the other hand, treating the patients with schizophrenia also make material burdens because medical expenses are not cheap and are not compatible with the family's economic situation. Other burdens felt are mental encumbrance as well as feelings of shame caused by society's negative views of family members as the patients with schizophrenia. Generally, inadequate knowledge and skills can induce caregivers to have disappointment, stress, and frustration [16]. The research by the authors in [17, 18] stated that caregivers have high emotional levels in treating schizophrenic clients. As a result, caregivers often show an emotional expression on clients such as: criticizing clients, showing hostility, speaking a high intonation and expressing excessive anger [19]. Excessive emotional expression received by the client will have the effect of schizophrenia and can increase the risk of disease recurrence [20]. Thus some researches have shown that families treating heavy mental patients have great pressure and burdens, so the family's caregiver needs to receive help from mental health professionals [21].

### ***1.2. Empathic Love therapy***

According to Assagioli in [22], in transpersonal therapy are two main goals, namely the personal goal to strengthen the development of personality by involving all mental processes involved, including thoughts, feelings and behavior to achieve harmony and optimal. Addition it is a transpersonal goal that is deeper, which offers the possibility to realize the true-self, concerning the relationship between individual and God. The therapist's role in this therapy is helping the client in the healing process, strengthening personal self to make a more dynamic relationship full of love, accepting the divine dimension, opening up the area of consciousness in a comprehensive union between humans and God, so that the individuals can emit love [23]. In this case, the individuals as an individual them-self and then their role as an ODS caregiver are expected to emit empathetic love, thus they can see, accept and love all aspects of themselves called "true self" [24]. The efforts to achieve the conditions, it is expected to have "true self" contact through dialogue among the heart, mind, and body to make it actualize [25], and through the Empathic Love can provide a way for individuals to see themselves in understanding their mistakes related to mind, perception and negative behavior so that the individual can construct thoughts, perceptions and positive behaviors [26]. The Empathic Love as a unifier of an authentic self-center to find oneself as a loving, empathic and intact "I". An extraordinary healing from the emergence of empathic love growth "I" as a whole person so formed "I am alive, full of love and surrender" [27]. Based on the explanation above, The Empathic Love Therapy is expected to be an effective psychological intervention to reduce stress on the caregiver of schizophrenia patients.

## **2. Material and Methods**

### ***2.1. Participants***

The participants of the study were families who became schizophrenic caregivers, female gender and ages 31-42 years, who have stress due to their role as caregivers of schizophrenia patients. The participants were selected through a screening process of 12 patients who were schizophrenic caregivers registered at the Banguntapan health center 2.

### ***2.2. Measures***

1 Stress on participants was measured using a caregiver stress scale from the author in [28] with an alpha reliability coefficient of .952. The caregiver stress scale consisted of 34 items with five choices of answers namely 1-5 (never until always). Empathic love therapy is given based on empathic love modules that have been validated based on the validity of Aiken's contents in the research of the authors in [29]. The modules are arranged based on seven main concepts of psychosynthesis from Assagioli which are summarized into eight therapy sessions, and are completed with several worksheets.

**2.3. Procedures**

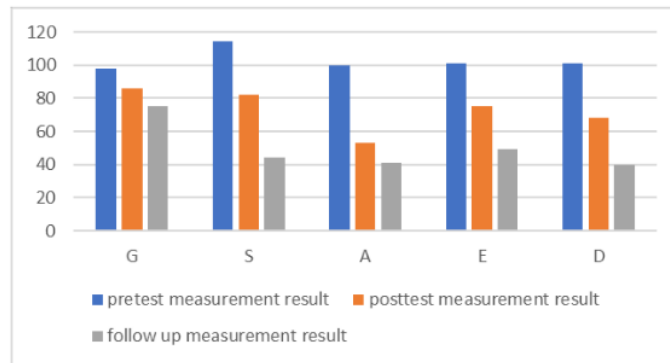
The study adopted Quasi-Experimental Design using "The One-Group Pretest-Posttest Design with Follow-up" method [30], because the number of sample that appropriate with criteria is limited, so it does involve the control group. The study began with a screening process of 12 potential participants who were recommended by psychiatric nurses at the Banguntapan health center 2. The researcher also found five participants that appropriate with the criteria (caregiver of schizophrenia patients, female gender, age 30-45 years old) and willing to follow a series of therapeutic processes conducted for 8 sessions (procession, self-exploration, wound exploration, interaction of the subjects, I love my self and let it go, volition, aspirations and action plans, love and gratitude) within two weeks. One therapy session lasts for 2 to 4 hours. The participant stress data were taken at the pretest, posttest and follow-up, which were then analyzed using the Friedman Test and Wilcoxon.

**3. Results**

The results of the study indicate a decrease in stress scores from pretest, posttest, to follow-up, can be seen in the following table and figure:

**Table 1: Changes in stress scores**

The Participants	The results of Stress Score Measurement					
	Pretest	Category	Posttest	Category	Follow up	Category
G	98	Medium	86	Medium	75	Medium
S	114	High	82	Medium	44	Low
A	100	Medium	53	Low	41	Low
E	101	Medium	75	Medium	49	Low
D	101	Medium	68	Medium	40	Low



**1**  
Figure 1: chart of change in stress score

Table 1 and Figure 1 show that each participant has a decrease in stress scores in the pre-test, post-test, and follow-up. The condition shows that the empathic love therapy has a contribution to reducing participants' stress scores of pretest until follow-up.

The score reduction data is supported by the results of the analysis that conducted using the Friedman Test, as follows:

**Table 2:** The results of the friedman test and wilcoxon analysis

The results of the Friedman Test Analysis								The results of Wilcoxon analysis		
Aspect	N	p	Pretest		Posttest		Follow up		Z	p
			Mean	SD	Mean	SD	Mean	SD		
Stress	5	.007	102.80	6.38	72.80	13.03	49.80	14.52	Pre-post	2.023 <sup>b</sup> .043
Biological	5	.008	24.00	2.74	15.80	5.36	10.80	3.83	Post-follow	2.023 <sup>b</sup> .043
Cognitive	5	.007	25.60	2.88	20.20	4.03	13.60	1.82		
Emotional	5	.015	29.80	2.17	21.60	4.39	15.00	6.40	Pre-follow	2.023 <sup>b</sup> <b>1</b> .043
Behavior	5	.007	23.40	2.19	15.20	2.49	10.40	3.29		

The results of the analysis of stress variables using the Friedman Test in table 2 show a significance level of .007 ( $p < .01$ ). The data shows that there is a very significant change in stress score before the intervention (pre-test), after intervention (post-test), and after two weeks of intervention (follow-up). It can be seen from the mean score that decreases from pre-test, post-test, until follow-up shows that the changes that occur are in the form of reduced stress. Furthermore, the analysis of stress aspects showed that there were differences in mean scores on biological aspects which decreased from pretest score was 24.00, posttest score was 15.80, and follow-up score was 10.80 and  $p = .008$  ( $p < .01$ ). Therefore it can be interpreted that there is a change in the form of a decrease in stress score which is very significant in the biological aspects of the pretest, posttest, and follow up. Also, the

1 cognitive aspect was a significance level of .007 ( $p < .01$ ), and the difference in mean scores decreased from pretest score was 25.60, posttest score was off 20.20, and follow-up score was 13.60. Therefore, there is a difference in the form of a decrease in participants' stress scores which is very significant in the cognitive aspects of the pretest, posttest, and follow up. Subsequent data showed a significant level on the emotional aspect was .015 ( $p < .05$ ), and found the difference in mean scores which decreased of pretest score was 29.80, posttest score was 21.60, and follow-up score was 15.00. So it can be concluded that, there are differences in the form of a significant decrease in participants' stress scores on the emotional aspects of the pretest, posttest, and follow up. The level of significance in the behavioral aspects showed  $p = .007$  ( $p < .01$ ), and found the difference in mean scores which decreased of pretest score was 23.40, posttest score was 15.20, and follow-up score was 10.40. So it can be concluded that, there is a difference in the form of a decrease in participants' stress scores which is very significant in the behavioral aspects of the pretest, posttest, and follow up. Furthermore, the results of the analysis using Wilcoxon showed a significance level of .043 ( $p < .05$ ), both at pretest-posttest, posttest-follow-up, and pretest-follow-up. The results indicate a significant difference between pretest-posttest, posttest-follow-up, and pretest-follow-up.

#### 4. Discussion

The results of this study indicate that *empathic love therapy* can reduce stress in the caregiver of schizophrenia patients. The results of this study are supported also by previous research by the authors in [31] shows that empathic love therapy can reduce stress in parents with autism children. Some empathic love therapy process can bring the participants into conscious conditions. The first process, the participants are guide to be able to recognize themselves by realizing all aspects of themselves and each personality that is formed from experiences or wounds in the past, then participants are able to perform as observers of the "self" therefore able to find a whole new understanding of the perfect self. Based on the Rueffler's Opinion [32] said that, being an observer for oneself, individuals can see diverse life experiences in themselves such as happiness, sadness, failure, success, thoughts, feelings and a pattern of behavior. The next step is the process of acceptance, which is to accept all parts of oneself, both positive and negative. In the step, the participant is able to understand the purpose or message carried by each part of him is to balance, so that the participant is able to receive all parts of himself as perfect. Activities or responses that are based on sincere and empathetic acceptance of strengths and weaknesses within oneself can resolve the conflict or inner warfare of each individual [33]. The process of "conscious" and "accepting" makes participants able to understand the emotions that emerge as the performers in themselves, so that they are able to understand the patterns of interaction that are manifested into the form participant behavior in responding something. It opens the awareness that these emotions may arise and present in themselves without need to be suppressed, but the control function is still found in the participants. In this condition, participants' stress levels can decrease. The five participants were also able to foster love in themselves accompanied by gratitude to God, Thus they can radiate love in their interpersonal relationships. According to the concept of Islamic indigenous psychology, acceptance is one aspect that can build the construct of gratitude (Putra, 2014) [34]. In this study, the five participants felt more calm, peaceful, sincere accepting and grateful for everything receive in their lives. The five participants could also be more accepting and even feel more loving for families who have schizophrenia, so that they felt more motivated to accompany patients better and more lovingly. The authors in [35] state that being a family companion who have schizophrenia, individuals



**1** able to find meaning in life that gets closer to God, surrenders and believes that all have their respective goals. The authors in [36] said that gratitude is a form of emotion or feeling that develops into an attitude, habits, good morals, and personality that will ultimately influence the individual in responding to a condition or situation. Stress reduction in participants is also influenced by the techniques applied during the empathic love therapy process. The techniques are relaxation, guided imagery, expression through images, and reflection on experiences. The function of relaxation makes participants feel relaxed, both physically and psychologically. According to the authors in [37], relaxation is one of the techniques that can reduce stress and tension by stretching the entire body to achieve a healthy mental state. Also, the function of relaxation make activate all five senses, thus supporting it in the guided imagery process that has an identification process. The Individuals are invited to make active all senses to remember the past and find experiences that have been still in the subconscious with more conscious. Regarding stress, research from the authors in [38] shows that guided imagery interventions can reduce stress levels in elementary school teachers. Furthermore, the process of expression through pictures and writing allows participants to express their experiences and feelings after going through relaxation and guided imagery. Research from the authors in [39] shows that the play therapy art expression approach using drawing media can reduce stress on street children victims of sexual abuse. The results of the study are supported by the opinion of the author in [40] who revealed that the creative process in creating art has the power spontaneous and authentic as an experience that can aid the requirement for personal healing to express themselves imaginatively and improve emotional condition. The next method is a reflection through sharing in group settings. Participants can better identify themselves consciously and can tell or share these experiences and feelings. The catharsis process through sharing can assist a person to release negative emotions and reduce stress to calm the mind [41]. Sharing done in group settings makes participants get a group or social support from fellow caregivers of schizophrenia patients. The authors in [42] revealed that the group approach is more beneficial than the individual because the process of shared catharsis, mutual support, the feeling of sharing that makes the atmosphere feel comfortable, safe, family and full of empathy and can affect the increase in tolerance for stressful situations. Therefore, participants can feel that the burden as a caregiver is not only experienced by themselves and feels supported by one another. This study is inseparable from the limitations in the process, such as: a) the number of samples in the study was only five people, so this study cannot involve a control group as a comparison to test the effectiveness of therapy in the caregiver group of schizophrenia patient; b) the schedule between subjects and therapists is not appropriate so that the implementation of therapy is not in accordance with the time rules stated in the empathic love therapy module.

## **5. Conclusion**

The Empathic love therapy is effective for reducing stress on the caregiver of schizophrenia patients. Subject stress can decrease very significantly, with a significance level of 0.007 ( $p < 0.01$ ).

## **6. Recommendation**

### **6.1.**

For future researchers is expected to be able to involve more subjects so they can involve a control group, so it can be used as a comparison of the effectiveness of therapy.



**1**  
**6.2.**

The time lag is also important to note because it will affect the internalization process on the subject, so the future researchers are expected to be able to adjust the time of therapy according to what is stipulated in the therapy module.

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