**Table 4.2 The needs of family members caring for mental health care users.**

|  |  |  |
| --- | --- | --- |
| **THEMES** | **CATEGORIES** | **SUBCATEGORIES** |
| 1.Psychosocial experiences of family members | 1.1Psychological experiences of family members | 1.1.1 Feeling of fear for own safety and that of the MHCU.  1.1.2 Feelings of shame and embarrassment  1.1.3 Feelings of powerlessness  1.1.4 Feelings of emotional distress and loss  1.1.5 Feelings of depression  1.1.6 Ineffective coping with caregiving demand |
| 1.2 Social experiences of family members | * 1.2.1 Experience of lack of social support. * 1.2.2 Experience of lack of shared responsibility**.** |
| 2.Healthcare needs of family members | 2.1 Physical healthcare needs | * 2.1.1 The need for physical health support |
| 2.2 Psychological healthcare needs | * 2.2.1 The need for psychological counselling * 2.2.2 The need to acquire healthy ways of coping with caregiving challenges. * 2.2.3 The need to establish a nurse-family therapeutic relationship. |
| 2.3 Social needs | * 2.3.1 The need for de-stigmatization and non-discrimination * 2.3.2 The need for social support and contact |
| 2.4 Financial needs | * 2.4.1 Various additional cost to sustain the MHCU * 2.4.2 The need to provide MHCU with permanent disability grant * 2.4.3 The need for employment opportunities for the MHCU * 2.4.4. The need for suitable housing |
| 2.5 Educational and information support needs | * 2.5.1 Knowledge on mental illness its causes, signs and symptoms, course and prognosis and treatments options * 2.5.2 Identification of early warning signs of relapse and its management. * 2.5.3 Information about management of day-to-day challenging behaviors * 2.5.4 Information regarding substance abuse by the MHCU * 2.5.5 Information regarding medication adherence * 2.5.6 Information regarding side-effects caused by psychotropic drugs and management thereof. |
| 2.6 Spiritual support needs | * 2.6.1 The need for traditional practitioner consultation * 2.6.2 The need for pastoral support care |
| 3.Healthcare expectations | 3.1 Expectations from healthcare system | * 3.1.1 The provision of community-based psychiatric rehabilitation with sufficient resources. * 3.1.2 Availability of psychotropic medications at the community health centers * 3.1.3 Assistance from South African Police Service during crisis |
| 3.2 Expectations from healthcare professionals | * 3.2.1 Suitable psychopharmacological prescription medication. * 3.2.2 Home visits by healthcare providers |

**psychoeducational program should entail**

|  |  |
| --- | --- |
| **THEMES** | **CATEGORIES** |
|  | Interventions to provide information and education for families  1.1 Mental health education on mental illness: (causes, signs and symptoms, prognosis and treatment options)  1.2 Psychotropic medications, side effects and its management  1.3 Management of challenging behaviours |
|  | 2. Interventions to enhance family support by the community  2.1 Reduction of stigma and discrimination against family members and MHCUs  2.2 SAPS assistance during crisis  2.3 Engagement of the MHCUs in community activities |
|  | 3. Interventions to enhance physical care of the MHCUs and family members  3.1 Provision of basic needs  3.2 Maintenance of personal hygiene of MHCUs  3.3 Assessment of physical health status of the MHCU and family members |
|  | 4. Interventions to provide social support  4.1 Suitable housing for the MHCUs  4.2 Shared responsibility between the health care providers and the family members |
|  | 5. Interventions to provide financial assistance  5.1 Provision of permanent disability grants  5.2 Establishment of income generation occupational activities  5.3 Provision of employment opportunities |
|  | 6. Interventions to enhance spiritual supportive care  6.1 Collaborative care by health professionals, church leaders (pastors) and traditional health practitioners  6.2 Respect for the belief system of the MHCUs in relation to treatment programme  6.3 Involvement of church leaders in rehabilitation of the MHCUs |
|  | Interventions to ensure health care provision by health care providers  7.1 Provision of family therapy and counselling  7.2 Home visits by health care providers  7.3 Availability of psychotropic drugs  7.4 Rehabilitation (sheltered employment for the MHCUs, skills training and support groups)  7.5 Mental health education awareness campaigns |

Table 3.5: Integration of findings: Phase 1 and Phase 2

|  |  |  |
| --- | --- | --- |
| Design:  Exploratory sequential qualitative | Phase 1 (Qualitative strand findings)  Individual semi-structured interview  N=16 | Phase 2 (Qualitative and quantitative strand findings)  Nominal group technique (NGT)  N=21 |
|  | Qualitative | Qualitative-quantitative |
| Methods:  Sequential methods  (Integration through building) | Qualitative (face-to-face individual semi-structured interview with family members | Qualitative-quantitative (NGT with stakeholders) |
| Interpretation and reporting of integration | **Healthcare needs of family members caring for MHCUs** | **Interventions to meet the psychosocial healthcare needs of family members caring for MHCUs** |
| Educational and information support needs | **1. Interventions to provide information and education for families**  1.1 Mental health education on mental illness: (causes, signs and symptoms, prognosis and treatment options)  1.2 Psychotropic medications, side effects and its management  1.3 Management of challenging behaviours |
| Physical healthcare needs | **2. Interventions to enhance physical care of the MHCUs and family members**  2.1 Provision of basic needs  2.2 Maintenance of personal hygiene of MHCUs  2.3 Assessment of physical health status of the MHCU and family members |
| Social needs | **3. Interventions to provide social support**  3.1 Suitable housing for the MHCUs  3.2 Shared responsibility between the health care providers and the family members |
| Financial needs | **4.Interventions to provide financial assistance**  4.1 Provision of permanent disability grants  4.2 Establishment of income generation occupational activities  4.3 Provision of employment opportunities |
| Spiritual support needs | **5.Interventions to enhance spiritual supportive care**  5.1 Collaborative care by health professionals, church leaders (pastors) and traditional health practitioners  5.2 Respect for the belief system of the MHCUs in relation to treatment programme  5.3 Involvement of church leaders in rehabilitation of the MHCUs |
| Psychological needs | **6.Interventions to ensure health care provision by health care providers**  6.1 Provision of family therapy and counselling  6.2 Home visits by health care providers |

Integration of subcategories form Phase 1 individual interviews and Phase 2 NGT findings

|  |  |  |
| --- | --- | --- |
| Healthcare needs | Subcategory Individual interviews | Subcategory NGT |
| Educational and information support needs | Knowledge on mental illness its causes, signs and symptoms, course and prognosis and treatments options | Mental health education on mental illness: (causes, signs and symptoms, prognosis and treatment options) |
| Information regarding side-effects caused by psychotropic drugs and management thereof. | Psychotropic medications, side effects and its management  Management of challenging behaviours |
| Information about management of day-to-day challenging behaviors | Management of challenging behaviours |
| Information regarding substance abuse by the MHCU |  |
| Information regarding medication adherence |  |
| Identification of early warning signs of relapse and its management. |  |
| Physical healthcare needs | The need for physical health support | Provision of basic needs  Maintenance of personal hygiene of MHCUs Assessment of physical health status of the MHCU and family members |
|  |  |  |
|  |  |  |

Figure… Exploratory Sequential Design (Two phased Design)

Phase 1: Individual interviews Phase 2: NGT

Quantitative data

Collection and analysis

Qualitative data

Collection and analysis

a

Interpret results to compare

Qualitative data

Collection and analysis

Figure 3.1 Integration of research findings using an exploratory sequential research design ( ( Mixed method)

Refinement of the psychoeducational programme using E-Delphi technique.

Development of psychoeducational program and integration of theoretical framework

Findings compared , Integrated and interpreted

Phase

Qualitative and Quantitative

NGT

Phase 1

Qualitative

Individual interview

Sequential Design

Phase 1

Qualitative

Individual interview

Phase

Qualitative and Quantitative

NGT

SE