Mediating Role of Illness Representation Among Social Support, Therapeutic Alliance, Experience of Medication Side Effects, and Medication Adherence in Persons With Schizophrenia

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The purpose of this cross-sectional research study was to examine factors affecting medication adherence in Thai individuals with schizophrenia. The Common-Sense Model of Illness Representation was used to guide the study. Two hundred twenty-five subjects met the inclusion criteria and were interviewed. Variables of interest focused on experience of medication side effects, therapeutic alliance, social support, illness representation, and behavior change with medication adherence. Results indicated that therapeutic alliance and the experience of medication side effects enhanced illness representation, which in turn led to an intention to change adherence behavior. Social support did not alter illness representation or adherence behavior. Because illness representation positively influenced patients' intention to change adherence behavior, mental health nurses should promote patients' perception about their illness to enhance medication adherence.

MEDICATION REMAINS THE hallmark of treatment in individuals with schizophrenia. Thus, medication nonadherence represents a major clinical problem in treating individuals with schizophrenia and is unfortunately a common occurrence. Keith and Kane (2003) found estimates of nonadherence to oral antipsychotic medications ranging from 12% to 65% over a 6-month period. In Thailand, approximately 59.4% of rehospitalized individuals with schizophrenia had been nonadherent to medication (Kitaroonchali, 2005).

In addition to rehospitalization, medication nonadherence leads to symptom worsening (Mueser & McGurk, 2004; Thieda, Beard, Richter, & Kane, 2003). Dissertations for the Degree of Doctor of Philosophy in Nursing, Faculty of Graduate Studies, Mahidol University, Thailand.

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