

# The Effect of a Nonviolent Communication Training Program for Schizophrenics<sup>1</sup>

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## Abstract

*This study aimed at verifying the effect of a nonviolent communication training program for schizophrenics centered on improving communication skills. 31 people were subjects: 18 of them were an experimental group and 13 were a control group. The experiment group was a member under day-hospital in the National Hospital located in N region. The control group was a member in Mental Health Center located in N city which proved similar psychiatric rehabilitation services. The scales of communication skills, interpersonal relations change and interpersonal relations function were checked in a pretest and a posttest as well as a later test for effective measurements. The result showed that communication skills and interpersonal relations change increased significantly after the program. In a later test, the scores of communication skills and interpersonal relations change improved significantly. The researcher also discussed its limits and suggestions.*

**Keywords:** *Schizophrenia, Communication, Interpersonal Relations, Nonviolent Communication*

## 1. Introduction

Schizophrenia affects about 1%-2% of the general public, devastating lives and causing the<sup>3</sup> disorder. Schizophrenia destroys the ability to assess inner and external realities and causes partial damages. Mental disorder has been included in dishabilles since the amendment of the Welfare Law for Persons with Disabilities in 1999. About 72.6% of mental disorders in Korea correspond to schizophrenia.

One of the chronic features of schizophrenia is its impact on communication ability including inadequate self-assertiveness [2]. People with schizophrenia not only fail to assert their rights and opinions in threatening and ostracized circumstances but also have a hard time in delivering their good intention and behaviors. As a result, they avoid social relations and fail to keep employed and independent [3]. This prevent them from having good relations with others and society.

As people with schizophrenia lack communication skills and experience social difficulties and conflicts and lose the ability to solve problems, they become socially inactive.

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Communication training program would be very valuable in helping them escape from isolated, dependent and passive status and interact with others as well as enhance the opportunity to communicate[4].

While communication skills are a major issue to people with schizophrenia, various studies regard the skills as a part of social adaptation ones. Especially, in an area of mental health, it is rare to find intervention studies related to communication training [2]. Studies related to communication skills for people with schizophrenia include self-assertion training and social skill training. The former focuses on learning to express themselves frankly to others regarding their rights, needs, opinions and feelings because their assertiveness has been reduced due to social withdrawal. The latter involves communication training along with daily life training skills [6]. However, it mainly concentrates on behavioral skill training for schizophrenics. As people with schizophrenia are characterized by a lack of the ability to express themselves and to empathize with others, a communication training program which influences feelings and behaviors is necessary.

The nonviolent communication model by Rosenberg (2003) based on the people-centered theory takes advantage of four principles such as observation, feeling, needs and requests. And the nonviolent communication designed to practice "express frankly" and "listen empathetically" is a proper intervention method to enhance communication skills. It is a practical communication model in showing principles necessary to communicate with others effectively and build positive relations. Two principles of it is to express oneself frankly in a way for one's feelings to be accepted and listen empathetically and attentively while understanding others[8].

It was reported that a nonviolent communication program is effective not only for the public but also for the mentally challenged. A nonviolent communication program for the mentally challenged in a rehabilitation facility enhanced interpersonal relations and sympathy significantly [7]. The program for hospitalized alcoholics had a positive effect on empathy, anger expression, communication and self-efficacy [9]. However, it is hard to find the study in verifying communication skills and interpersonal relations by applying a nonviolent communication program to schizophrenics.

The study has two questions as follows: Firstly, will the score of communication skills among patients with schizophrenia participating in a nonviolent communication program improve compared to a control group? Secondly, will the score of interpersonal relations among patients with schizophrenia participating in a nonviolent communication program improve compared to a control group?

## **2. Study Method**

### **2.1. Study Participants**

The study participants consist of subjects and a program performer. 31 people are subjects: 18 of them are an experimental group and 13 are a control group. They are members under day-hospital in the National Hospital located in N region as well as in Mental Health Center located in N city, an adjacent area.

### **2.2 Nonviolent Communication Training Program**

The researcher referred "NVC1 interpersonal relations and communication" [11] and a nonviolent communication training program was restructured applicable to schizophrenics. The program consisted of 90 minutes (per session) once a week for 10 sessions.

### 2.3. Tool

The scale of communication skills is to measure difficulties of communication in communicating with others and keeping interpersonal relations. The questionnaire developed by Son Myeongja and Bae Jeonggyu (1999) were adopted. It is composed of 30 items with 5 point Likert scale. In terms of reliability, Cronbach's  $\alpha$  is .90. Cronbach's  $\alpha$  per sub-categories amounts to .66~.88.

The researcher used a relationship change scale where Moon Seonmo (1980) adapted the relationship change scale developed by Schien Guerney(1997) to Korean circumstances and Cheon Seokgyun (1994) revised it. The scale has 25 items with a 5-point Likert scale. In terms of reliability, Cronbach's  $\alpha$  is .93. Cronbach's  $\alpha$  per sub-categories amounts to .60~.82.

### 2.4 Data Analysis

In case of the collected data from 31 participants, an independent t-test was conducted to check for homogeneity of a pre-test with the use of SPSS/21.0. In order to verify the post effect of a nonviolent communication training program for people with schizophrenia, an independent t-test was conducted to verify differences in communication skills, interpersonal relation change and social relation functions between an experimental group and a control group.

## 3. Result

### 3.1 Check for homogeneity of a pre-test between an experimental group and a control group

It shows the homogeneity of a pre-test between an experimental group and a control group: communication skills score ( $t=1.097, p>.05$ ) and interpersonal relation change score ( $t=-.197, p>.05$ ) in accordance with self-rating,

### 3.2 Posttest Effect of a Nonviolent Communication Training Program

In order to find out the effectiveness of a nonviolent communication training program for schizophrenics, an independent t-test was conducted to verify differences between an experimental group and a control group with the help of a posttest. Table 1 shows the result.

Communication skills had significant differences between an experimental group and a control group ( $t= 3.830, p<.001$ ). With regard to the analysis per sub-category, communication skills ( $t=2.919, p<.001$ ), nonverbal communication skills ( $t=2.321, p<.05$ ), self-assertiveness( $t=3.624, p<.001$ ) showed significant differences.

Table 1. Posttest Effect of a Nonviolent Communication Training Program

scale name	sub-category	experimental group (n=18)	control group (n=13)	t
		M(SD)	M(SD)	
Communication skills	communication skills	42.29(5.33)	35.93(6.81)	2.919**
	nonverbal communication skills	26.41(3.69)	23.07(4.32)	2.321*

	self-assertiveness	28.29(3.03)	24.29(3.09)	3.624***
	total score	112.11(9.12)	95.85(14.36)	3.830***
interpersonal relation change	communication	18.47( 2.71)	15.93(3.07)	2.442*
	sensitivity	7.35( 1.32)	5.29(1.81)	3.667***
	total score	93.24(11.75)	82.36(17.61)	2.054*

\* $p < .05$ , \*\* $p < .01$ , \*\*\*  $p < .001$

The interpersonal relation change had significant differences between an experimental group and a control group ( $t=2.054$ ,  $p<.05$ ). With regard to the analysis per sub-category, communication ( $t=2.442$ ,  $p<.05$ ), sensitivity ( $t=3.667$ ,  $p<.001$ ) showed significant differences.

### 3. The Consistent Effect of a Nonviolent Communication Training Program

In order to find out the consistent effect of a nonviolent communication training program for schizophrenics after three weeks, an independent t-test was conducted between an experimental group and a control group with the help of a posttest. Table2 shows the result.

The communication skill scale had significant differences between an experimental group and a control group ( $t=3.619$ ,  $p<.001$ ). With regard to the analysis per sub-category, communication skills ( $t=3.859$ ,  $p<.001$ ), nonverbal communication skills ( $t=2.441$ ,  $p<.05$ ), self-assertiveness ( $t=2.174$ ,  $p<.05$ ) and sociability ( $t=2.441$ ,  $p<.05$ ) showed significant differences.

The interpersonal relation change had significant differences between an experimental group and a control group ( $t=2.235$ ,  $p<.05$ ). With regard to the analysis per sub-category, communication skills ( $t=2.578$ ,  $p<.05$ ), sensitivity ( $t=4.178$ ,  $p<.001$ ) showed significant differences.

Table 2. Inter-group program effect

scale name	sub-category	experimental group(n=18)	control group(n=13)	t
		M(SD)	M(SD)	
communication skill	communication skills	43.35(4.55)	35.57(6.64)	3.859***
	nonverbal communication skills	26.94(3.26)	23.50(4.57)	2.441*
	self-assertiveness	27.47(2.80)	25.07(3.33)	2.174*
	sociability	14.94(1.81)	12.86(2.85)	2.469*
	total score	112.70(8.53)	97.00(14.27)	3.619**
interpersonal relation change	communication	18.71(2.66)	16.07(3.02)	2.578*
	sensitivity	7.59(1.17)	5.50(1.60)	4.178***
	total score	93.94(11.56)	82.43(17.02)	2.235*

\*  $p < .05$ , \*\*  $p < .01$ , \*\*\*  $p < .001$

### 4. Discuss

This study aimed at verifying whether positive changes take place in communication skills and interpersonal relations when conducting a nonviolent communication training program for schizophrenics. To this end, a nonviolent communication training program for schizophrenics was conducted. Then communication skills and interpersonal relations were analyzed in the form of pretest, posttest and later test.

Firstly, communication skills of an experimental group improved significantly compared to a control group. Sub-categories such as verbal communication skills, nonverbal communication skills and self-assertiveness showed a significant increase. In a later test, communication skills of an experimental group enhanced compared to a control group, testifying the consistent effect of the program. Furthermore, in a later test, sociability skills improved significantly which was not significant in a posttest. Given that social skills can be verified by interacting with others, their significant increase in a later test rather than a posttest means that the program became routine in the lives of schizophrenics and then affected their social skills. This result supports the study by Park Yeonghui [6] who found out an increase in verbal and nonverbal communication skills and interpersonal relations when carrying out the program to enhance communication skills for patients with schizophrenia.

Secondly, the score of interpersonal relations of an experimental group in a pretest and a posttest increased significantly compared to a control group. Cho Euni [10] who conducted a Gestalt group counseling program toward schizophrenics found out significant changes in interpersonal relations at self-rating and interpersonal relations function at an observer's rating. Baek Jeongho [7] conducted a nonviolent communication program for the mentally disordered to improve interpersonal relations and empathy found out significant differences in interpersonal relations change. These precedent studies support this research.

With regard to changes in sub-categories, satisfaction, trustworthiness, friendliness, openness and understanding on interpersonal relations change didn't show significant changes. However, communication skills and sensitivity showed significant improvements in an experiment group. This result means that the program helped schizophrenics to acquire proper communication skills and to increase sensitivity enough to notice other's intentions under interpersonal and social circumstances. This would be related to listen empathically that are the core principle of a nonviolent communication.

In a later test, interpersonal relations improved significantly. This testified that the program helped to enhance their ability to communicate and their sensitivity under interpersonal and social circumstances. Therefore, they can improve social skills to express their thoughts and feelings as well as interact with others. The improvement of sensitivity means to notice other's needs better.

The significance of this study is as follows:

Firstly, this research is about a field study of treating patients with schizophrenia. Secondly, it is meaningful to conduct a nonviolent communication training program for schizophrenics for the first time. Even a short-term intervention such as 10 sessions can improve their communication skills and communication, self-assertiveness as well as sensitivity in interpersonal relations.

When intervening in them by focusing on their desires and feelings, communication skills and self-assertiveness as well as interpersonal relations improved. While they need to live together with others, they also have difficulties in social relations. Under these circumstances, an increased sensitivity would help improve relations and then their quality of lives would be better.

The limit of this study and suggestions are as follows:

Firstly, an experimental group and a control group were randomly designated center by center and then random assignment was not carried out. And the cases between an experimental group and a control group were not equally constructed. These would weaken the power of verification of this study. However, the distinct characteristics of a field study were reflected.

Secondly, when it comes to study participants, sub-types of schizophrenia, the severity of the illness or academic backgrounds were not checked and controlled in advance. It would be better to conduct a follow-up study with this mind.

Thirdly, the program was conducted, revealing that a program practitioner was a researcher. This would become a limit to the result.

## References

- [1] Min Seonggil. (2006) Modern psychiatry. Seoul: ILCHKAK
- [2] Belack, A. S., Mueser, K. T., Hingerich, S., & Agresta, J.(1997).
- [3] Liberman,R.P.(1994). Social and Independent Living Skills: The community re-entry program. Camarillo,CA: Psychiatric Rehabilitation Consultants(PRC)
- [4] Kim Jinhui (2002) The Effect of Social Adjustment Training Program on Self-Esteem and Interpersonal Relations among Chronic Schizophrenic Master thesis in Graduate School of Nursing Science Donga University
- [5] Cross, M., Blake, P., Tunbridge, N., & Gil, T.(2001). Collaborative working to promote the communication skills of a 14 years old student with emotional, behavior, learning and language difficulties. Child Language Teaching and Therapy, 17, 27-246
- [6] Park Yeonghui (2012). Development and Effectiveness of Communication Skill Enhancement Program for Patients With Chronic Schizophrenia. Doctoral Dissertation in Graduate School of Nursing Science Korea University.
- [7] Baek Jeongho (2014). A Study on the Effect of Non-violent Communication Program on Interpersonal Relations and Empathic Ability of Psychiatric Disabilities. Master thesis in Graduate School of Daegu University
- [8] Rosenberg, M. (2003). Nonviolent Communication: A Language of Life: CA. Puddle Dancer Press. Han Catherine (2011). Seoul: KRNVC
- [9] Yang Jeongun (2017). The effect of Non-violent Communication Program for Alcoholics. Doctoral Dissertation in Graduate School of Nursing Science Seoul National University
- [10] Cho Euni (2007). The Effect of Gestalt Relationship Improvement Program (GRIP) on Schizophrenics. Master thesis in Sungshin Women's University
- [11] Han Catherine (2010). NVC1 Nonviolent Communication : a language of life. Seoul: KRNVC
- [12] Son Myeongja, Bae Jeonggyu,(1999). 「The Training Program for Interpersonal Relations」 Psychiatric Rehabilitation Center