Introduction

Schizophrenia is an extremely puzzling condition, the most chronic and disabling of the major mental illnesses. Approximately, 1% of the population develop schizophrenia during their lives (Health High Lights, 2007). In Egypt, patients with schizophrenia constitute 79% from total admission in governmental Mental Hospitals (Abd Elatif, 2008).

Schizophrenia is an extremely complex mental disorder: In fact there are probably many illnesses masquerading as one. A biochemical imbalance in the brain is believed to cause symptoms. Recent research reveals that schizophrenia may be a result of faulty neuronal development in the fetal brain, which develops into full-blown illness in late adolescence or early adulthood. Schizophrenia causes distorted and bizarre thoughts, perception, emotions, movements, and behavior, it cannot be defined as a single illness, rather, schizophrenia is thought of as a syndrome or disease process with many different varieties and symptoms much like the varieties of cancer (Buchanan and Carpenter, 2005; Edlyn, 2008).

Schizophrenia is a chronic illness consisting of both positive and negative symptoms such as ; disordered thoughts, fluctuation in affect, social withdrawal and impaired social and coping skills (Corrigan et al., 2004).

Negative symptoms have been found to correlate positively with social skills deficits and to vary inversely with overall amount of appropriate behavior, particularly prosocial interpersonal activity. Negative symptoms have been shown to be more resistant than positive symptoms to neuroleptic treatment (Kennedy and O'Conner, 2008).
Schizophrenic patients often exhibit neurocognitive impairment as well as deficits in social functioning. These features, along with other negative symptoms, may lead to social isolation and substantially reduce quality of life. Found that 83% of schizophrenics were unemployed, and one-third had a family contact less than once per month. In addition, one-third of the sample reported that they had visited with friends or peers less than once per month (Lim and Korn, 2009; Agency for Health Care Research and Quality (AHRQ), 2008).

The world health organization (WHO) has defined the term "health related quality of life "as the individuals` perception of their position of life in the context of the culture and value systems in which they live and in relation to their goals, expectations and concerns (Mohangoo et al., 2007).

The interest in studying quality of life in persons with schizophrenia started as concern was increasing about the role played by the chronically mentally ill in the community. Although there is no consensus between researchers on the definition of the concept of ‘quality of life’, it seems that certain patients' characteristics, such as family and social relations, safety, employment and finances, have been identified as the main determinants of quality of life in mentally ill people (Schene et al., 2009).