

Psychological Wellbeing And Care Burden Among Caregivers Of Mentally Ill Patient In Selected Hospital

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ABSTRACT

Background: The family is extremely crucial in the care of a mentally ill patient. A caregiver who has been staying with the patient for a year or more and who plays a key role in their daily activities, interactions, and medical care has been described as a caregiver. Studies suggested that mental illness carries high care burden on caregiver.

Objective - To assess the level of psychological wellbeing and care burden among caregivers of mentally ill patients.

Material and Method: - quantitative research approach with descriptive research design was used, data was collected from selected hospital of Dehradun, Uttarakhand through consecutive sampling by interview method. The caregiver was assessed by Zarit burden scale and the Riff psychological well-being's scale.

Result: Out of 123 caregiver men were more in number than women (58.5%). Zarit burden score was 10.38 ± 3.593 and Riff psychological wellbeing score was 28.94 ± 3.822 , and the majority of caregivers (50.6%) expressed low psychological well-being, and showing mild to moderate care burden (81.3%), a weak negative correlation that was $r = -0.189$ found between psychological well-being and care burden.

Conclusion: The Psychological well-being and care burden had significant negative correlation which mean that when caregivers care burden level increases the psychological wellbeing level decreased.

Keywords: care burden, psychological wellbeing, caregiver of mentally ill patient.

INTRODUCTION

Human being is the man as the product and subject of working hard. Aristotle characterized human beings as logical animals. Humans are highly familiar and tend to live in familiar structure composed of many conspire and struggling groups. Humans are omnivorous capable of consuming a wide variety of plants, and animals. Language, art and trade are defining characteristics of human. Like all living things, humans also have a life cycle. ⁽¹⁾

A family is a small group of people who come together to form a society. Individuals value their families because they provide benefits to their physical, mental, and internal health that they cannot obtain from any other source. ^(2,3)

A cross sectional study to analyses the connection between psychological well-being and component of healthy lifestyle in the population aged 45-72, stratified sample of 10940 urban citizen were randomly selected and their response rate was 65% as result. If the healthy lifestyle is not maintained or the individual psychological well-being is affected then it leads to mental illness/disorder. ^(4,5)

There are over 450 million people worldwide who are dealing with some sort of mental or social difficulty, with schizophrenia, bipolar illness, depression, and alcoholism serving as main cause for lengthy periods of disability. According to the available data, approximately 190–200 people out of every 1000 people in India suffer from a mental illness, accounting for about 20% of the country's total population. Lack of mental health workers, financial support, shame, and parental problems are the main difficulties in India when it comes to mental health. ^(6,7)

The dependency ratio worldwide is ranges from 15% to 17% in developed nations, 64% of people are dependent on another person for their daily needs. 2.2% of the population in India needs care from others. A mental illness carries a heavy burden on a global scale. A mentally ill person has a higher dependency need and requires long-term care. ⁽⁸⁾

Approximately 792 million people had mental health issue in 2017, according to a poll. This equates to 10.7% of the global population, or slightly more than one in ten. 7.5% of Indians currently deals with mental illness, and by the conclusion of this year, roughly 20 percent of the population will be afflicted. Statistics show that 38 million Indians experience anxiety problems and 56 million experience depression. ⁽⁹⁾

Researcher believes that this investigation is assessing care burden and psychological well-being among caregivers of mentally ill patient and only few of them have looked into the correlation between caregiver burden and psychological well-being, and the interface between them need to be assessed to develop strategies to aid in caregiving so, the researcher decided to lead this point for the current investigation.

AIMS AND OBJECTIVES

The aim and objective of the study were to assess the psychological wellbeing and care burden among caregiver of mentally ill patient.

MATERIAL AND METHODS

The study was conducted in a selected hospital of Dehradun. 123 sample was selected using consecutive sampling. The quantitative research approach with descriptive research design used which aimed to assist the psychological wellbeing and care burden among caregiver of mentally ill patient was used. Interview method was taken into consideration for collecting data from the caregiver. The standardized riff psychological wellbeing scale developed by Carol D. Riff was used. It has 42 items and Likert scoring pattern. The score interpreted as done on median basis as follows High psychological wellbeing (≥ 155) Low psychological wellbeing (≤ 155). The test-retest reliability was 0.9. The zarit burden interview scale developed by Zarit, Reever, and Bacg Peterson was used to measure the level of burden. The questionnaire has 21 items. The tool is categorized the care burden score as follows Little or no burden (0-20), Mild to moderate burden (21-40), Moderate to severe burden (41-60), Severe burden (61-88). The test-retest reliability was 0.99. After explaining the purpose of the study, written informed consent from caregiver was obtained.

RESULT

Both descriptive and inferential statistics were used. The analysis of the data was done on the objectives of the study.

**Table no. 1 Scio-demographic characteristic of patient and caregiver of mentally ill patient
n=123**

S.No	Scio-demographic variable	Frequency	Percentage
1.	Age	24	19.5
	21-30	51	41.5
	31-40	32	26.0
	41-50	16	13.0
	51-60		
2.	Gender	72	58.5
	Male Female	51	41.5
3.	Marital status	111	90.2
	Married Unmarried	12	9.8
4.	Education status	15	12.2
	No formal education	35	28.5
	Primary	36	29.3
	Inter-mediate Graduation/post-graduation	37	30.1
5.	Occupation	37	30.1
	Housewife	37	30.1
	Self-employment	43	35.0
	Private job Government job	6	4.9
6.	Monthly income	87	70.2
	5000-15000	34	27.6
	15001-30,000 30,001-45,000	2	1.6
7.	Duration of care by caregiver	26	21.1
	<1year	69	56.1
	1-3year	15	12.2
	4-6year	13	10.6
	>6year		
8.	Relationship with patient	45	36.6
	Spouse	20	16.3
	Daughter/son	39	31.7
	Parent Sibling	19	15.4
9.	Type of family	78	63.4

	Nuclear Joint	45	36.6
10.	Religion Hindu Muslim Sikh	63	51.2
		29	23.6
		31	25.2
11.	Residence Urban Rural Semi-urban	49	39.8
		56	45.5
		19	15.4

Table 1 illustrates the frequency and percentage distribution of sociodemographic characteristics of the study participants. majority of the caregiver 51(41.5%) were between 31-40 years of age group, half of the caregiver (58.5%) were male out of which majority of caregiver 111(90.2%) were married and completed their education 37(30.1%), most of the caregiver occupation status 43(35.0%) were private job with monthly income between 5,000-15,000 that is (70.2%), majority of the caregiver duration of care 69(56.1%) lie between 1-3 year with relationship status 45(36.6%) were spouse. The type of family was nuclear 78(63.4%), the religion was Hindu 63(51.2%), and the residence was rural 56(45.5%).

Figure 1: Level of Care Burden among Caregiver of Mentally Ill Patient

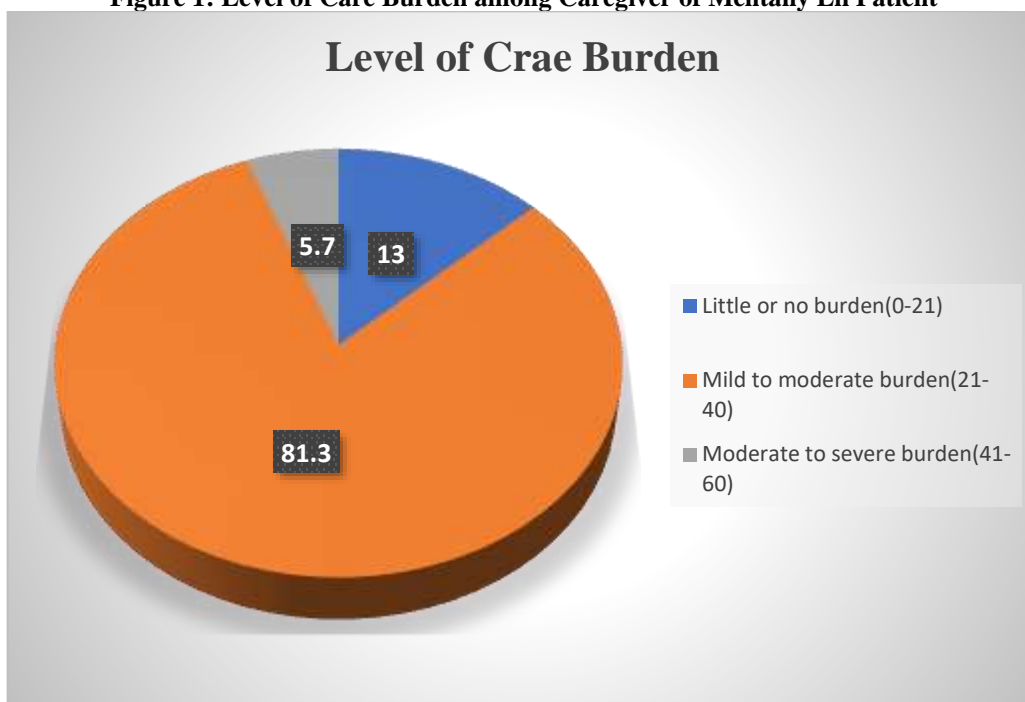


Figure 1 illustrates the level of care burden among caregivers of mentally ill patients. It was found that majority (81.3%) of the caregivers had mild to moderate burden, whereas only (5.7%) of the caregivers had moderate to severe burden. The mean percentage score of care burden was compromised in all domains. The highest in personal strain score was 10.38 with the standard deviation of 3.593, whereas the least in social and family life score was 3.03 with the standard deviation 1.97.

Table No.2: Assessment of the level of psychological wellbeing among caregiver of mentally ill patient.
 n=123

Level of psychological wellbeing	Score	Frequency	Percentage
High psychological wellbeing	≥155	61	49.6
Low psychological wellbeing	≤155	62	50.4

The above table no.2 depicts that, the majority of caregivers had low psychological wellbeing (50.4%), whereas other caregivers had high psychological wellbeing (49.6%).

Figure 2: Correlation between psychological wellbeing and care burden among caregiver of mentally ill patient

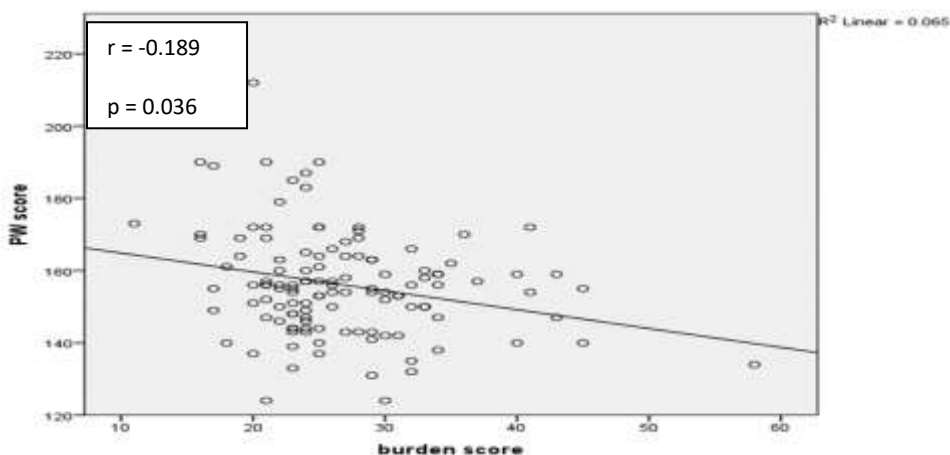


Figure 2 shows the correlation between psychological wellbeing and care burden. It reveals that negative correlation existed among care burden with psychological wellbeing which mean that when the care burden score increased the psychological wellbeing score decreased.

Table No.3 (a): Association of care burden with demographic variables among caregiver of mentally ill patient. n=123

S.No	Scio-demographic variable	Score of burden			Chi-square with fisher exact ^(p)	P Value
		No burden (f)	Mild-moderate burden (f)	Moderate-severe burden (f)		
1.	Age				1.703 ^P	0.175
	21-40	11	59	5		
	40-60	5	42	1		
2.	Gender				4.475 ^P	0.114
	Male	9	62	1		
	Female	7	39	5		
3.	Marital status				.282 ^P	0.292
	Married	5	90	6		
	Unmarried	1	11	0		
4.	Education status				2.823 ^P	0.092
	Illiterate	1	12	2		
	Literate	15	89	4		
5.	Occupation status				3.753 ^P	0.071
	Non-working	4	29	4		
	Working	12	72	2		
6.	Monthly income				1.020	0.686
	5,000-30,000	16	99	6		
	30,001-45,000	0	2	0		
7.	Duration of caregiver				3.254 ^P	0.050
	<1-3year	14	78	3		
	4->6year	2	23	3		
8.	Relationship with patient				4.363 ^P	0.063
	Spouse	5	35	4		
	Daughter/son	4	16	1		
	Parent	6	32	1		
	Sibling	1	18	0		
9.	Type of family				.611 ^P	.131
	Nuclear	9	64	5		
	Joint	7	36	2		
10.	Religion				6.620 ^P	.005*
	Hindu	11	50	2		

	Muslim	4	24	1		
	Sikh	1	26	4		
11.	Residence				1.909 ^p	.120
	Urban	7	39	3		
	Rural	7	45	4		
	Semi urban	2	17	0		

Note: significant at p<0.05, ^pfisher exact

The above table No.3 (a) shows that there were no association found between care burden with sociodemographic variables except one that was religion (.005).

Table no. 3 (b): Association of psychological wellbeing with Scio-demographic variable among caregiver of mentally ill patient

n=123

S.No	Scio-demographic variable	Score of Psychological- wellbeing		Chi-square with fisher exact ^(p)	P Value
		High psychological wellbeing (f)	Low psychological wellbeing (f)		
1.	Age			.195	0.133
	21-40	39	36		
	41-60	23	25		
2.	Gender			.067	0.140
	Male	37	35		
	Female	25	26		
3.	Marital status			5.767	0.014*
	Married	52	59		
	Unmarried	10	2		
4.	Education status			.059	0.210
	Illiterate	8	7		
	Literate	54	54		
5.	Occupation status			.019	0.154
	Non- working	19	18		
	Working	43	43		
6.	Monthly income			.000 ^p	0.504
	5,000-30,000	61	60		
	30,001-45,000	1	1		
7.	Duration of care by caregiver			6.409	0.007
	<1-3year	42	53		
	4.>6year	20	8		
8.	Relationship with patient			11.620	0.011*
	Spouse	28	17		
	Daughter/son	12	18		
	Parent	11	28		
	Sibling	11	8		
9.	Type of family			0.753	0.103
	Nuclear	37	41		
	Joint	25	20		
10.	Religion			0.477	0.077
	Hindu	30	33		
	Muslim	16	13		
	Sikh	16	15		
11.	Residence			2.504	.096
	Urban	23	26		

	Rural	32	24		
	Semi-Urban	7	12		

Note: significant at $p < 0.05^*$, χ^2 fisher exact

Table no.3 (b) shows the association of psychological wellbeing with various demographic variable, it was found that psychological wellbeing was associated with marital status ($p=0.014$) and relationship with patient($p=0.011$).

DISCUSSION

The finding of the study had been discussed as per the objective of the present study with the reference other studies conducted in the same area.

The result of the present study showed that most of the caregivers having mild-moderate burden (81.3%).

Walke SC, Chandrasekaran V, Mayya SS conducted a cross-sectional study to assess the burden of caregiver of mentally ill and their coping mechanism. The result revealed that caregiver had severe burden that was 40.9% and moderate burden that was 59.1% and the highest burden was assessed in the area of physical, mental health, spouse related and external support.⁽¹⁰⁾

The result of the present study showed that majority of caregiver had low psychological wellbeing followed 62(50.4%) **Krishnan J, Shalini, Savitha** conducted the study to assess the mental health of adult offspring of mentally ill parents. The majority of the samples, 35 (55.6%), were deemed to have high psychological well-being. Only one individual (1.6%) had low psychological wellbeing.⁽¹¹⁾

The present study had shown that care burden was negatively correlated to psychological wellbeing. As the level of care burden score increased the psychological wellbeing score decreased.

Gupta A., Solanki R, Koolwal G. & Gehlot S. conducted the study to investigate the relationship between psychological well-being and the burden of caring. As the result revealed that the relationship between burden and psychological health was found to be highly inverse .

The present study had shown that there were no association found between psychological wellbeing with sociodemographic variables among caregiver of mentally ill patient except religion and there were no association found between care burden with sociodemographic variables among caregiver of mentally ill patient except marital status and relationship with patient. **De-Juanas A., Bernal Romero T. & Goig R.** conducted the study to investigate who performed better on the EDATVA and the Psychological Well-Being Scale across all dimensions. Findings indicate that almost all of the Psychological Well-Being Scale's aspects strongly and favorably connect with those on the EDATVA scale. On the EDATVA scale, moderate associations were found.⁽¹³⁾

CONCLUSION

The present investigation concludes that caregiver had mild-moderate care burden and low psychological well-being. Psychological well-being was having a weak negative correlation with care burden of caregiver of mentally ill patient

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