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RESEARCH ARTICLE

THE LEVEL OF STRESS AND COPING AMONG CARE GIVERS OF PATIENTS WITH MENTAL ILLNESS

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| ARTICLE INFO | ABSTRACT |
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| Article History: | Background of the study: Stress has been viewed as a complex and vibrant transaction between individuals and their surroundings. It will adversely affect the emotional, physical, psychological and social |
| Received 05 th July, 2015 | functions of an individual even though the perception and reaction to stress and way of coping differs |
| Received in revised form | individually. Caregivers of patient with mental illness can experience stress that leads to negative |
| 08 th August, 2015 | consequences not only for themselves but also for the patients and other family members. |
| Accepted 10 th September, 2015 | Objectives: The study is aimed to assess the level of stress and coping among caregivers of patients with |
| Published online 28 st | mental illness. |
| October, 2015 | Methodology: A total of 100 caregivers of patients with mental illness were selected by Non probability convenient sampling technique. The tools used for the data collection were perceived stress scale and |
| Key words: | modified coping scale and socio-demographic proforma. |
| Level Of Stress, Coping, Caregiver, Patient, Mental Illness | Results: The study results revealed that majority of the caregivers (76%) were in the age group of 19 to 50 years. Majority of them (65%) had moderate level of stress, 33% had mild level of stress and 2% had severe level of stress. Majority of the caregivers (75%) had average coping. |
| | Discussion : Majority of the care givers had moderate level of stress and average coping. The nurse administrator should plan and organize educational program for care givers of patients with mental illness, in order to prepare them to cope up with any stressful situations. Hence the researcher emphasizes the need for more research to improve the knowledge and by applying the research finding for future. |

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INTRODUCTION

Mental illness can be defined as a clinical, significant, behavioural or psychological syndrome that occurs in a person and this is normally associated with impairment in one or more important areas in functioning, or an important loss of freedom¹. The society views the mental illness as something to be ashamed of and usually the members of the society initially recognize that most of the patients' behaviour deviated from the social norms².

The main change in most of the mental illness is associated with behavioural pattern of the patients and these changes may influence them and family in different altitudes. Most of the mental illness does not have a single cause in common and it is generally associated with structural changes in the brain.³ In such a point, the families play a significant role in caring of these patients with mental illness even though the family members of the patients are less likely to label the individuals' behaviour as mental illness. The core concept of the care giving consists of accepting, encouraging and supporting the patients and assists them in daily activities.⁴

Stressors can be broadly defined as situation or events that have the potential to influence health outcomes. Stress can be regarded as a psychological hazard, in which the individual sees a situation as an impending hazard.⁵ Family stress can have both positive and negative effects and involves a demand for change in family functioning. Family distress reflects the family's required resources imbalance and can significantly affect family functioning.⁶

The World Health Report (2001) has stated that nearly 45 crore, individuals suffer from mental and behavioural disorders globally. In China, it is estimated that there are 16 millions of adults with mental illness; 30 millions of adolescents and children with emotional and behavioural problems and numerous elderly people with dementia and mental problems. In India the prevalence rates for all mental disorders is $65.4/1000.^7$

In India the period of 1960 was termed as a period of Psychiatric Epidemiological survey. According to a survey by (Reddy, 1998) the estimated prevalence rate of mental illness in India is 58.2/1000 population. Now ,a more recent study of

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mental illness in India conducted in 2003 June, concluded that the prevalence rate of a mental illness in India is 73/1000 that is in rural 70.5 and in urban 73 out of 1000.⁷

Families not only provide personal care but also give emotional support to the person with a mental illness. There is no doubt that the families of those with mental illness are affected by the condition of their near ones. Research into the impact of care-giving reveals that one-third to one-half of care givers bear significant psychological distress and experience higher rates of mental ill health than the general population.⁸

MATERIAL AND METHODS

A descriptive study design was adopted in order to assess the level of stress and coping of caregivers of patients with mental illness in a selected hospital at Mangaluru. The tools used for this study were demographic proforma, perceived stress scale and modified coping scale. The content validity of the tool was established in consultation with seven experts. The perceived stress scale consists of 10 items it is measured with help of modified Likert type scale. Each item has 5 alternatives never, almost never, sometimes, fairly often, and very often. The modified coping scale consists of 20 items. Each item has 5 alternatives strongly agree, agree, uncertain, disagree, strongly disagree. After the ethical approval from the Ethical Committee of Yenepoya University, the tool was pre-tested by administering it to 10 caregivers of patients with mental illness. The samples found that the instructions and the language of the tool were clear and understandable and the time taken to complete the tool was 30 minutes. Reliability of the tool was tested by Crohnbach's alpha method and it was found to be 0.8. Pilot study was conducted to find out the feasibility of the study. A total of 100 samples were selected by non probability convenient sampling technique. Data collected from the samples were analyzed using descriptive and inferential statistics.

RESULTS

The present study showed that the majority of the caregivers of patients with mental illness (34%) were in the age group 41-50 years,(54%) were belongs to male,61% were belonged to Muslim religion, 49% were belongs to rural area,(61%) were belongs to nuclear family,(60%) of the caregivers had primary school education, majority (30%) were worked as private employee. Among the majority (51%) had Rs. 5,001 to 10,000 income per month. The details are depicted in Table 1.

The study finding showed that majority of the caregivers (65%) had moderate level of stress, 33% of caregivers had mild stress and only 2% of them had severe level of stress. The details of the findings are summarized in Figure 1.

Figure 1 shows distribution of caregivers of patients with mental illness according to their level of stress. Majority of them had moderate stress (65%). The study finding showed that majority of the caregivers (75%) have average coping, 20% caregivers have well coping and only 4% caregivers have poor coping. The details depicted in figure 2.

| Table 1 Frequency and percentage distribution of sample | | | | |
|--|--|--|--|--|
| characteristics N=100 | | | | |

| SL.NO | Demographic variables | Frequency(f) | Percentage (%) | | |
|-------|---------------------------|--------------|----------------|--|--|
| | Age in years | | | | |
| 1. | 19-30 | 12 | 12 | | |
| | 31-40 | 29 | 29 | | |
| | 41-50 | 34 | 34 | | |
| | 51-60 | 20 | 20 | | |
| | 61-70 | 6 | 6 | | |
| | Gender | | | | |
| 2. | Male | 54 | 54 | | |
| | Female | 46 | 46 | | |
| | Religion | | | | |
| | Hindu | 36 | 36 | | |
| 3. | Muslim | 61 | 61 | | |
| | Christian | 2 | 2 | | |
| | Others | 1 | 1 | | |
| | Area of residence | | | | |
| 4. | Rural | 49 | 49 | | |
| 4. | Semi-urban | 48 | 48 | | |
| | Urban | 3 | 3 | | |
| | Type of family | | | | |
| 5. | Nuclear | 61 | 61 | | |
| э. | Joint | 36 | 36 | | |
| | Extended | 3 | 3 | | |
| | Educational qualification | | | | |
| | No formal schooling | 19 | 19 | | |
| 6. | Primary school education | 60 | 60 | | |
| | High school education | 16 | 16 | | |
| | Collegiate education | 5 | 5 | | |
| | Occupation | | | | |
| | Government employee | 2 | 2 | | |
| 7. | Private employee | 30 | 30 | | |
| 7. | Business | 23 | 23 | | |
| | Coolie worker | 29 | 29 | | |
| | Others | 16 | 16 | | |
| | Monthly income | | | | |
| 8. | < 5000 | 27 | 27 | | |
| | 5001-10000 | 51 | 51 | | |
| | 10001-15000 | 20 | 20 | | |
| | 15001-20000 | 20 | 20 | | |
| | > 20000 | 0 | 0 | | |
| | 20000 | 0 | U | | |

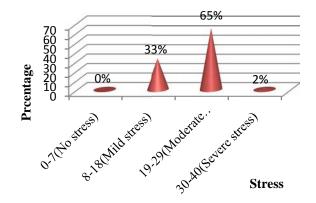
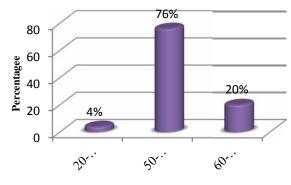


Figure 1 Description of subjects according to level of stress

The data presented in Table 4 shows that, there is significant association between level of stress and demographic variables such as age and income. The level of stress scores are independent of variables like gender (2 =.244,p>0.05), religion (2 =.528,p>0.05), area of residence (2 =.276,p>0.05), type of family (2 =.106,p>0.05), educational qualification (2 =.463,p>0.05), occupation (2 =.916,p>0.05). Figure 2 reveals that 76% caregivers have average coping, 20% have well coping and 4% had poor coping.



Level of Coping

Figure 2 Description of subjects according to level of coping

 Table 2 Association between level of stress and selected demographic variables N=100

| SL. | D | Stres | s score | Df | Chi-square |
|-----|--------------------------|----------|----------|----|------------------------|
| NO | Demographic variable | < Median | ≥ Median | DI | value (²) |
| | Age | | | | |
| | 19-30 | 6 | 6 | | |
| 1. | 31-40 | 14 | 16 | 1 | .021* |
| 1. | 41-50 | 14 | 19 | 1 | .021 |
| | 51-60 | 11 | 8 | | |
| | 61-70 | 4 | 2 | | |
| | Gender | | | | |
| 2. | Male | 26 | 28 | 1 | .244 |
| 2. | Female | 23 | 23 | 1 | .244 |
| | Religion | | | | |
| 3. | Hindu | 15 | 20 | | |
| 5. | Muslim | 31 | 31 | | |
| | Christian | 2 | 0 | 1 | .528 |
| | Others | 1 | 0 | | .526 |
| | Area of residence | 21 | 27 | | |
| 4. | Rural | 21 | 21 | | |
| 4. | Semi-urban | 25 | 23 | | |
| | Urban | 3 | 1 | | |
| | Type of family | | | | |
| 5. | Nuclear | 35 | 27 | 1 | |
| 5. | Joint | 13 | 21 | 1 | .106 |
| | Extended | 2 | 2 | | |
| | Education | | | | |
| | No formal education | 6 | 13 | | |
| 6. | Primary school education | | 29 | | |
| 0. | High school education | 8 | 7 | 1 | .463 |
| | Collegiate | | | | .405 |
| | Education | 4 | 2 | | |
| | Occupation | | | | |
| | Govt employee | 1 | 1 | | |
| 7. | Private employee | 17 | 13 | 1 | .916 |
| 7. | Business | 10 | 12 | 1 | .910 |
| | Coolie workers | 12 | 17 | | |
| | Others | 9 | 8 | | |
| | Income | | | | |
| | <5000 | 8 | 19 | | |
| 8. | 5001-10000 | 30 | 21 | 1 | |
| 0. | 10001-15000 | 9 | 11 | 1 | .024* |
| | 15001-20000 | 2 | 0 | | |
| | >20000 | 0 | 0 | | |

P=0.05 * significant

Data presented in Table 5 shows that there is significant association between level of coping and demographic variables such as age, family, educational qualification and income. The coping level scores are independent of all variables like gender (2 =0.402,P>0.05), religion (2 =0.958,P>0.05), area of residence (2 =0.137,P>0.05), occupation (2 =0.675,P>0.05).

| Table 5 Association between coping and selected |
|---|
| demographic variables N=100 |

| CT NO | Demographic Coping score | | | 36 | Chi-square |
|-------|--------------------------|--|--------|----|------------------------|
| SL.N0 | variables | <median< th=""><th>Median</th><th>df</th><th>value (²)</th></median<> | Median | df | value (²) |
| | Age | 5 | 7 | | |
| | 19-30 | | | | |
| 1 | 31-40 | 15 | 14 | 1 | 0.002* |
| | 41-50 | 12 | 22 | 1 | 0.002 |
| | 51-60 | 8 | 12 | | |
| | 61-70 | 0 | 5 | | |
| | Gender | 20 | 34 | | |
| 2 | Male | | | 1 | 0.402 |
| | Female | 19 | 27 | 1 | |
| | Religion | 12 | 24 | | |
| | Hindu | 12 | 24 | | 0.958 |
| 3 | Muslim | 26 | 35 | 1 | 0.958 |
| | Christian | 0 | 2 | | |
| | Others | 1 | 0 | | |
| | Area of residence | 19 | 30 | | |
| | Rural | 19 | 29 | | |
| | Semi urban | 1 | 29 | 1 | 0.137 |
| | Urban | 1 | 2 | 1 | 0.157 |
| | Type of family | 23 | 39 | | |
| 5 | Nuclear | 15 | 19 | 1 | |
| 5 | Joint | 15 | 3 | 1 | 0.000* |
| | Extended | 1 | 3 | | |
| | Educational | | | | |
| | qualification | | | | |
| | No-formal | | | | |
| | education | 7 | 12 | | |
| 6 | Primary school | 20 | 40 | | |
| 0 | education | | | 1 | 0.000* |
| | High school | 8 3 | 7 3 | 1 | 0.000* |
| | education | 3 | 3 | | |
| | Collegiate | | | | |
| | education | | | | |
| | Occupation | 1 | 1 | | |
| | Government | 10 | 20 | | |
| | employee | | | | |
| 7 | Private employee | 9 | 13 | 1 | 0.675 |
| | Business | 11 | 18 | | |
| | Coolie worker | | | | |
| | Others | 8 | 9 | | |
| | Monthly Income | | 1.0 | | |
| | <5000 | 11 | 16 | | |
| 0 | 5001-10000 | 19 | 32 | | |
| 8 | 10001-150000 | 9 | 11 | 1 | 0.000* |
| | 15001-20000 | 0 | 2 | - | |
| | >20000 | 0 | 0 | | |

P=0.05 *significant

DISCUSSION

Description of level of stress among care givers of patients with mental illness

In the present study result revealed that majority of care givers (65%) have moderate stress and 33% of them have mild stress and remaining 2% has severe stress.

This study was supported by the study done by Surekha Kumari *et al* who reported moderate level of stress present in the family members. The stress was higher among the young age, single, illiterate and urban areas caregivers yet were no statistical significant association with amount of stress.⁹

Description of coping adopted by care givers of patients with mental illness

In the present study 76% care givers are having average

coping, 20% of them have well coping and 4% of care givers have poor coping.

The above findings of the study are compatible with the findings of study was conducted in NIMHANS, Bangalore. This study shows that caregivers are using more coping strategies.¹⁰

Association between level of stress and selected demographic variables

The present study finding shows that there is significant association between stress scores and selected demographic variables such as age and monthly income.

Findings of the present study are consistent with another study conducted in Nepal to assess the stress and coping among family care givers living with schizophrenic patients. The sample size was 147. The result of the study showed that there was significant association between the stress levels with selected demographic variables.¹¹

Association between level of coping with selected demographic variables

The presents study findings shows that there is a significant association between level of coping with selected demographic variables such as age, type of family, educational qualification and monthly income.

Findings of the present study are consistent with another study conducted in Nepal to assess the level of stress and coping among family care givers of patients with schizophrenia. The result of the study showed that there is significant association between the coping methods with selected demographic variables.¹²

CONCLUSION

The findings of the study suggest the need of training and counselling by the nurses to the caregivers of patients with mental illness regarding how to cope with stressful situations. It helps them to prevent and manage stress due to the care of patient with mental illness.

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