



E-ISSN: 2664-2301
P-ISSN: 2664-2298
IJOGN 2021; 3(2): 33-35
Received: 15-05-2021
Accepted: 19-06-2021

Dr. M Baskaran
Professor, Department of
Mental Health (Psychiatric)
Nursing, PSG College of
Nursing, Coimbatore,
Tamil Nadu, India

Dr. G. Raghuthaman
Professor, HOD of Psychiatric
Department, PSG IMSR,
Coimbatore, Tamil Nadu,
India

Dr. A Jayasudha
Principal, PSG College of
Nursing, Coimbatore, Tamil
Nadu, India

Santhosh Kumar K
BSc Nursing, Department of
Mental Health (Psychiatric)
Nursing, PSG College of
Nursing, Coimbatore, Tamil
Nadu, India

Corresponding Author:
Dr. M Baskaran
Professor, Department of
Mental Health (Psychiatric)
Nursing, PSG College of
Nursing, Coimbatore,
Tamil Nadu, India

Effectiveness of family psychoeducation interventions regarding caregivers burden among primary caregivers of psychiatric clients admitted at selected tertiary care hospital, Coimbatore

Dr. M Baskaran, Dr. G. Raghuthaman, Dr. A Jayasudha and Santhosh Kumar K

Abstract

Introduction: Family caregivers play a main role in providing care and assistance to mentally ill individuals and their families. The influence of stressors on family members caring for an ill individual in the family has been mentioned as caregivers burden. Chronic mental illness has a distressing effect on the patient as well as his or her family members.

Methods: The Pre experimental study was undertaken among management of care giver burden among primary caregivers. Purposive sampling technique was used and data was collected using demographic, Clinical variables & Zarit caregiver burden scale. The information was entered into Excel sheet and examined through IBM SPSS Statistics 24.

Results: The result of the study reveals that pretest mean score of level of care giver burden among caregivers of psychiatric clients was 70.9 ± 15.35 and the post-test mean score was 22.60 ± 6.44 . The mean difference score was 48.30. The calculated paired 't' test value of $t = 14.89$ was found to be statistically significant at $p < 0.001$ level.

Conclusion: The study concluded that there was significant reduction in the level of care giver burden among primary caregivers after administration of family psychoeducation interventions.

Keywords: Effectiveness, caregivers burden, family, primary caregivers, psychoeducation

Introduction

Families caring for people with mental illness receiving community-based mental healthcare have a great need for support. People with mental illness who have severe symptoms require long-term care, which imposes a significant burden on families providing such care [1]. For example, the financial burden on the family is severe because considerable amounts of time are devoted to caregiving, resulting in the loss of work opportunities and reduced income [2]. Moreover, insufficient downtime to recover from the stress of caregiving results in both physical and mental illnesses [3]. Families also become worn out and stressed by the demands of coping with this illness, which is characterised by repeated hallucinations and delusions if symptoms do not stabilize [4]. Furthermore, a parent of a son or daughter with mental illness might worry about what will become of their child after his or her death.

They might also feel they are not getting adequate information about what social services are available to them [5]. Stigma against the illness is also deeply rooted and can lead to families becoming socially isolated [3]. Therefore, families of people with mental illness have various physical, psychological, economic and social burdens.

Several studies have addressed the development and evaluation of effective family interventions. According to a systematic review, family psychoeducation (FPE) is a scientifically effective psychological intervention that has been used to reduce caregiver burden [6, 7]. The components of FPE mainly include sharing information about the disorder, early warning signs, relapse prevention, as well as skills training in coping, communication and problem solving. FPE can directly improve caregivers' knowledge about mental illness and related caregiving problems. Improved knowledge of coping strategies and resources can lead to a more positive appraisal of caregiving experiences by families as well as caregivers' own self-efficacy in coping with the demands of caring for people with mental illness, thereby lessening the burden [6].

Materials and Methods

The researcher obtained evaluative research approach and the preexperimental pretest and posttest only design was used to assess the effectiveness of family psychoeducation caregiver's burden among the primary caregivers of psychiatric clients, Coimbatore. The research study was conducted among primary caregivers of psychiatric clients who full filled the inclusion criteria at PSG Hospital, Coimbatore. The sample size was 20 primary caregivers of psychiatric clients. The sample technique was convenient sampling technique.

The tool constructed for the study has two parts (Data collection tool, intervention tool).

Section A: The demographic data the age of caregivers, gender, religion, educational status, occupational status, relationship of caregiver with patients, monthly family income, source of income ,breadwinner of the family, source of expenses, type of family.

Section B: Clinical variable including the age, gender, diagnosis of the patient, duration of illness of the client, frequency of hospital visit.

Section C: The Zarit caregiver burden scale include 22 items. Each questions had five possible response as never, rarely, sometimes, quite frequently and nearly always .The scoring given as 0, 1,2,3,4. The level of stress categorised as very mild, mild, moderate, and severe.

Scoring Interpretation

The scores are interpreted as follows.

0 to 20 = Little or no burden

21 to 40 = Mild to moderate burden

41 to 60 = Moderate to severe burden

61 to 88 = Severe burden.

Intervention

It refers to interventions with systematic, structured, and didactic knowledge transfer for a definition, causes, signs and symptoms, management of care giver burden, integrating emotional and motivational aspects to enable primary caregiver of psychiatric clients to cope with the illness and to improve its treatment adherence and efficacy.

The Investigator obtained formal permission from the Dean PSG IMS&RH, Principal, PSG College of Nursing, and also obtained formal permission from ethical committee of PSG IMS&R Institute of Human Ethical Committee. Total of 20 samples were selected by simple convenience sampling technique those fulfilled the sampling criteria. The investigator explained the purpose of the study to the college students and reassured them the confidentiality of the information being given during the study. Pre-test was conducted to assess the caregivers using questionnaire. Intervention was administered. The post-test was carried on sixth day using same questionnaire. The information was entered into Excel sheet and examined through IBM SPSS Statistics 24.

Table 1: Frequency and percentage distribution of pre-test and post-test level of care giver burden among primary caregivers of psychiatric clients.

Level of care giver burden	Little 0 - 20		Mild 21 - 40		Moderate 41-60		Severe 61-88	
	f	%	f	%	f	%	f	%
Pre Test	0	0	0	0	5	25	15	75
Post Test	12	60	8	40	0	0	0	0

Table 2: Effectiveness of psycho education on caregiver burden among primary caregivers of psychiatric clients.

Level of care giver burden	Mean \pm S.D	Paired 't' Test value
Pretest	70.9 \pm 15.35	t = 14.89 p = 0.0001 S***
Post Test	22.60 \pm 6.44	

***p<0.001, S – Significant

Table 3: Association of pretest level of caregiver burden among primary caregivers of psychiatric clients.

Demographic variables	Moderate		Severe		Chi square value
	f	%	f	%	
Age					$\chi^2 = 0.884$ d.f=2 p= 0.642 N.S
31-40Years	1	5	4	20	
41-50Years	3	15	4	20	
51-60Years	2	10	6	30	
Gender					$\chi^2 = 3.778$ d.f=1 p= 0.078 S***
Female	2	10	11	55	
Male	4	20	3	15	
Occupational status					$\chi^2 = 1.548$ d.f=3 p= 0.671 N.S
Daily wages	2	10	4	20	
Government job	0	0	3	15	
House wife	3	15	5	25	
Private job	1	5	2	10	
Monthly family income					$\chi^2 = 1.270$ d.f=2 p= 0.530 N.S
Above Rs.15000	3	15	7	35	
Rs.10000-15000	2	10	2	10	
Rs.5000-10000	1	5	5	25	

Types of family					$\chi^2 = 5.185$ d.f = 1 p = 0.079 S***
Joint family	2	10	0	0	
Nuclear family	4	20	14	70	

Discussion

The first objective was the assessment of level of care giver burden among primary caregivers of psychiatric clients: The findings revealed that the pretest level of care giver burden, majority 15(75%) had severe stress and 5 (25%) had moderate stress, whereas in posttest 12 (60%) had little stress and 8(43%) had mild stress.

Effectiveness of Family Psycho education intervention on caregivers burden among the primary caregivers:

The findings revealed that the calculated pretest mean score of level of care giver burden among caregivers of psychiatric clients was 70.9 ± 15.35 and the post-test mean score was 22.60 ± 6.44 . The mean difference score was 48.30. The calculated paired 't' test value of $t = 14.89$ was found to be statistically significant at $p < 0.001$ level.

Therefore, the hypothesis H_1 stated earlier that "There will be a significant difference in the pre and post-test caregiver burden in among the primary caregivers of psychiatric clients" was accepted at $p < 0.05$. The above findings were supported by a quasi-experimental design study was conducted on an educational intervention to reduce the burden on family caregivers of patients with schizophrenia applied at the Psychiatric Outpatients Unit in Beni-Suef University Hospital. Result of the study was the mean scores of caregiver burden reduced from 84.05 pre-program into 53.24 post-program ($P < 0.001$). (Hani Hamed Ali Desouki *et al.*, 2019) [8].

Association of pretest level of caregiver burden among primary caregivers of psychiatric clients:

The findings revealed that the demographic variable gender ($\chi^2 = 3.778$, $p = 0.078$) and types of family ($\chi^2 = 5.185$, $p = 0.078$) among primary caregivers at $p < 0.001$ level. The other demographic variables had not shown statistically significant association with level of care giver burden among caregivers of psychiatric clients. H_2 was retained.

Hence the hypothesis H_2 stated earlier "There will be a significant association of the pre-test level of caregiver burden with selected demographic variables among primary caregivers of psychiatric clients" was accepted for gender & types of family. This is supported by a cross sectional survey was conducted to associate between caregiver burden, distress, psychiatric morbidity and healthcare utilization among persons with dementia in Singapore. The study result reveals that the Caregiver burden was significantly associated with higher number of days spent by persons with dementia in the hospital (IRR: 1.03, 95% CI: 1.0–1.1, $p = 0.02$). The study concluded that identifies caregiver variables associated with the healthcare utilization of PWD. (Lau *et al.*, 2021) [9].

Conclusion

The study aimed at assessing the effectiveness of family psychoeducation interventions on caregivers burden among primary caregivers of psychiatric clients. Hence the investigator concluded that there was significant reduction in the level of caregivers burden among primary caregivers

of psychiatric clients after administration of psychoeducation interventions.

Acknowledgement

The study was conducted in the Psychiatric Ward & New Psychiatric Wing, PSG Hospitals, and Coimbatore after getting the formal permission from the Dean, PSG IMS&R, HOD of Psychiatric department and the Nursing Superintendent of PSG hospitals. Ethical clearance obtained from PSG IMS&R Institutional Human Ethics Committee. My heartfelt thanks to my research group students B.Sc Nursing III Year Ms. Gurulakshmi. M, Ms. Mega. M, Ms. Shivani. J for their support. This study is submitted in 2020 partial fulfillment of the requirement for the degree of Bachelor of Science in Nursing from The Tamil Nadu Dr. M.G.R Medical University, Chennai. Tamil Nadu, India.

References

1. Yasuma N, Sato S, Yamaguchi S, *et al.* Effects of brief family psychoeducation for caregivers of people with schizophrenia in Japan provided by visiting nurses: protocol for a cluster randomised controlled trial. *BMJ Open* 2020;10:e034425. doi:10.1136/bmjopen-2019-034425
2. Saunders JC. Families living with severe mental illness: a literature review. *Issues Ment Health Nurs* 2003;24:175-98.
3. Shah AJ, Wadoo O, Latoo J. Psychological distress in carers of people with mental disorders. *British Journal of Medical Practitioners* 2010;3:a327.
4. Gopinath PS, Chaturvedi SK. Distressing behaviour of schizophrenics at home. *Acta Psychiatr Scand* 1992;86:185-8.
5. McAuliffe R, O'Connor L, Meagher D. Parents' experience of living with and caring for an adult son or daughter with schizophrenia at home in Ireland: a qualitative study. *J Psychiatr Ment Health Nurs* 2014;21:145-53.
6. Sin J, Gillard S, Spain D, *et al.* Effectiveness of psychoeducational interventions for family carers of people with psychosis: a systematic review and meta-analysis. *Clin Psychol Rev* 2017;56:13-24.
7. Sin J, Jordan CD, Barley EA, *et al.* Psychoeducation for siblings of people with severe mental illness. *Cochrane Database Syst Rev* 2015;5:Cd010540.
8. Hani Hamed Ali Desouki, Saida El-Sayed Hassan Ibrahim El-Azzab, Entisar Mohammed Mahmoud Abu-Salem. An Educational Intervention to Reduce the Burden on Family Caregivers of Patients with Schizophrenia. *SSRG International Journal of Nursing and Health Science*. 2019;5(1):17-25.
9. Lau JH, Abidin E, Jeyagurunathan A, Seow E, Ng LL, Vaingankar JA, *et al.* The association between caregiver burden, distress, psychiatric morbidity and healthcare utilization among persons with dementia in Singapore. *BMC geriatrics* 2021;21(1):67. <https://doi.org/10.1186/s12877-021-02014-2>