Effectiveness of Coping Strategies Intervention on Caregivers’ Burden among Caregivers of Dependent Elderly

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Abstract

The study was aimed at evaluating effectiveness of coping strategies intervention on caregivers’ burden among caregivers of dependent elderly in selected hospital, Kozhikode. The objectives of the study was to assess the caregivers’ burden among the caregivers of dependent elderly before administering the coping strategies intervention, to evaluate the effectiveness of coping strategies intervention on caregivers’ burden among caregivers of dependent elderly, to find out the association between caregivers’ burden and selected demographic variable. The research approach used for the study is quantitative approach, the research design used for the study is one group pre-test post-test design, and sampling technique used for the study is convenience sampling technique. 30 caregivers of dependent elderly were taken as the subjects. The study was conducted in selected general wards in MIMS hospital, Kozhikode. Demographic data and caregivers’ burden scale were the tools used for conducting the research. Data analysis was done by descriptive and inferential statistics. The present study showed that 60% of subjects had mild to moderate burden and about 40% had little or no burden before administering coping strategies intervention. In posttest all the subjects had only little or no burden. The mean caregivers’ burden in the intervention group decreased. Calculated paired t value (13.03) was greater than the table value (2.05) at df 29. Finally study showed that coping strategies interventions are effective in reducing the care givers’ burden. And also there is a significant association between religion and caregivers’ burden.

Keywords: Coping strategies intervention, Caregivers’ burden, Dependent elderly.

INTRODUCTION

Aging is a biological reality and ageism is the disliking of aging and older people based on the belief that aging makes people unattractive, unintelligent and unproductive. It is an emotional prejudice or discrimination against people based on age. Ageism allows the young to separate themselves physically, emotionally from the old [1].

Caregivers’ burden is the stress which is perceived by caregivers due to the homecare situation. Coping strategies intervention are those intervention which can be used by caregivers in order to reduce the caregivers’ burden. These include supportive education program on physical, psychological and social aspect of caring elderly, stress reduction strategies like physical exercise, breathing exercise and mental imagery, and emotional support by providing awareness on support group, counselling centers, government services etc.

An interventional study was conducted on effectiveness of problem focused coping strategies on the burden of caregivers of hemodialysis patients. 76 sample were taken. The intervention group received four training sessions on problem-focused coping strategies, but the control group did not receive any intervention. Both groups answered the caregiver’s burnout inventory at the start and six weeks after the last educational session. The mean caregivers’ burden in the intervention group decreased, and the two groups were significantly different at the end of the study. Finally study showed the effectiveness of problem-focused coping strategies on reducing the burden on caregivers of hemodialysis patients [2].

The purpose of the present study is to assess the effectiveness of coping strategies intervention on caregivers’ burden among caregivers of dependent elderly by using caregivers’ burden scale and also to assess the association between caregivers’ burden and selected demographic variable.
OBJECTIVES

The study is aimed to:

- Assess the caregivers’ burden among the caregivers of dependent elderly before administering the coping strategies intervention.
- Evaluate the effectiveness of coping strategies intervention on caregivers’ burden among caregivers of dependent elderly.
- Find out the association between caregivers’ burden and selected demographic variable.

MATERIALS AND METHOD

Research Design: One group pre-test post-test experimental design was adopted for the study.

Settings of the Study: The study was undertaken in selected general wards of Aster MIMS hospital, Kozhikode. It is a multi-specialty hospital for training undergraduate and postgraduate nursing and as well as the allied health professional students. It is a well-equipped hospital with 650 beds.

Population: The selected population of this study was caregivers of dependent elderly.

Sample: The sample selected for this study were 30 caregivers of dependent elderly in selected general wards of Aster MIMS hospital, Kozhikode.

Sampling Technique: Convenience sampling technique was used for the selection of 30 caregivers of dependent elderly.

Sampling Criteria

Inclusion Criteria

- Caregivers of patients who are bedridden for a period >3 years and admitted in general wards of Aster MIMS
- Caregivers who are taking care of patients for a period >6 months.
- Caregivers who are having blood relation with the patient.

Exclusion Criteria

- The caregivers who had attended similar program earlier.
- Caregivers who belongs to any health profession
- Caregivers of patients who are admitted in critical care area.

Data Collection Instruments

Tool-1: Socio-demographic profile of the subjects.

There were 11 items; age, gender, religion, and marital status, area of residence, type of relation, number of children, education and socio-economic status of caregivers, how long caregivers care the elderly and name of disease affected.

Tool-2: Caregivers’ burden scale.

Modified caregivers’ burden inventory was used. Area of burden measures in the questions are financial burden, personal burden and social burden. All the items had 5 alternatives like never, rarely, sometimes, frequently and nearly always. Never carries mark 0, rarely carries mark 1, sometimes carries mark 2, frequently carries mark 3 and nearly always carries mark 4. Total maximum score was 88. Out of total score subjects with score ranging from 0-20 are considered to have little or no burden, score between 21-40 are considered to have mild to moderate burden, score between 41-60 are considered to have moderate to severe burden and score between 61-88 are considered to have severe burden.

Data Collection Process

After the permission and approval of the IEC, permission was obtained from the chief nursing officer of Aster MIMS hospital, Kozhikode. The main study was conducted in Aster MIMS hospital, Kozhikode for a period of 2 weeks. Purpose of the study was explained and information got was kept confidential. An informed consent was taken from the caregivers who participated in the study and subjects were selected conveniently and the willingness of the participants were considered. The data collection process started with the administration of the socio-demographic profile. Caregivers’ burden scale was administered to assess the level of burden among caregivers of dependent elderly and coping strategies intervention was given for all participants on first day of admission. After one week, post-test was conducted. The data collected were subjected to statistical analysis.

Statistical Analysis

The data analysis include descriptive and inferential statistics. The sample characteristics were analyzed by using frequency and percentage. The level of caregivers’ burden among caregivers of dependent elderly were assessed by using mean, standard deviation, frequency and percentage. The effect of coping strategies intervention were assessed by using paired t test. The association of level of caregivers’ burden and selected demographic variables were analyzed by chi square test.

RESULTS

Section: 1 sample characteristics

This section deals with the frequency and percentage distribution of sample based on the demographic variables.

The findings shows that about 33.2% of subjects were in the age group of >50 years and 73% of subjects were females. About 67% of subjects were Hindu and majority of subjects (93.4%) were married.
About 67% of the subjects have their domicile in the rural area and 44% of the subjects were sons/daughters. The findings shows that 50% of the subjects have 2 children and about 50% of the subjects were educated up to upper primary class. About 60% of the subjects having a low income in between 1000-5000 and about 60% of the subjects care the patients for more than 3 years. The findings shows that about 43.3% of patients were belongs to renal diseases.

Section 2: Analysis of level of caregivers’ burden among caregivers of dependent elderly

This section deals with analysis and interpretation of pre-test and posttest level of caregivers’ burden among caregivers of dependent elderly. It include mean caregivers’ burden score, standard deviation and percentage distribution of level of caregivers’ burden. The caregivers’ burden scores were arbitrarily classified in to little or no burden, mild to moderate burden, moderate to severe burden and severe burden.

Table-1: Pre-test and post test score of caregivers’ burden among caregivers of dependent elderly, (N=30)

<table>
<thead>
<tr>
<th>Category of burden</th>
<th>Range of score</th>
<th>Pre-test</th>
<th>Post test</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Frequency</td>
<td>Percentage</td>
<td>Frequency</td>
</tr>
<tr>
<td>Little or no burden</td>
<td>0-20</td>
<td>12</td>
<td>40</td>
</tr>
<tr>
<td>Mild to moderate burden</td>
<td>21-40</td>
<td>18</td>
<td>60</td>
</tr>
<tr>
<td>Moderate to severe burden</td>
<td>41-60</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Severe burden</td>
<td>61-88</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

(Minimum score=0, Maximum score=88)

Above table shows that in pre-test most of subjects (60%) had mild to moderate burden and about 40% had little or no burden. In posttest all the subjects had only little or no burden.

Table-2: Mean pre-test and post test score of caregivers’ burden among caregivers of dependent elderly

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>SD</th>
<th>Mean difference</th>
<th>Table t value</th>
<th>df</th>
<th>Calculated t value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-test</td>
<td>29.3</td>
<td>46.5</td>
<td>15.9</td>
<td>2.05</td>
<td>29</td>
<td>13.03</td>
</tr>
<tr>
<td>Posttest</td>
<td>13.4</td>
<td>29</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Above table shows that the calculated paired t value (13.03) was greater than the table value (2.05) at df 29. Hence the null hypothesis stating that there is no significant difference in the level of caregivers’ burden among caregivers of dependent elderly before and after coping strategies intervention is rejected and the research hypothesis were accepted. Thus it can be interpreted that there is significant difference in the level of caregivers’ burden among caregivers of dependent elderly after coping strategies intervention.

Section: 4 Association between the level of caregivers’ burden among caregivers of dependent elderly and selected demographic variable.

Religion had significant association with the caregivers’ burden at p<0.05 level of significance.

DISCUSSION

The present study on effectiveness of coping strategies intervention on caregivers’ burden among caregivers of dependent elderly shows that 60% of subjects were having mild to moderate burden and about 40% of subjects were having no or little burden in pre-test. The post test score of caregivers’ burden is significantly less than pre-test score of caregivers’ burden. And we conclude that there is significant reduction in the level of caregivers’ burden after coping strategies intervention with a mean difference 15.9 at p<0.05 level of significance. Among the selected demographic variables religion had significant association with caregivers’ burden among caregivers of dependent elderly.

CONCLUSION

Caregivers’ burden is the stress which is perceived by caregivers due to the homecare situation. Coping strategies intervention are those intervention which can be used by caregivers in order to reduce the caregivers’ burden. There is significant association between coping strategies intervention and caregivers’ burden among caregivers of dependent elderly.

ACKNOWLEDGEMENT

The authors are grateful to the authorities of MIMS College of Nursing for providing various facilities for the successful completion of research.

Conflict of Interest: The authors declare no conflict of interest.

REFERENCES