

A study on Predictors of Caregiver Stress Perceived by Family Care Givers of Elderly People in Rural Tamil Nadu, 2017 – 18.

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INTRODUCTION

- Demographic trends in Southeast Asian countries have shown an increase in geriatric population.
- In developing countries, the position of a family caregiver overshoots the position of formal caregiver.
- Aged persons expect emotional support which can be provided only by a family caregiver.
- Growing elderly population with a reciprocal decrease in available family caregivers has laid down excess of stressors on caregivers.

OBJECTIVE

- To identify and analyse the predictors and moderators influencing caregiver stress.
- **JUSTIFICATION**

Findings from the study will provide an overall picture of magnitude of caregiver stress among family caregivers.

Our study may contribute in identifying community and family base solutions for family caregivers.

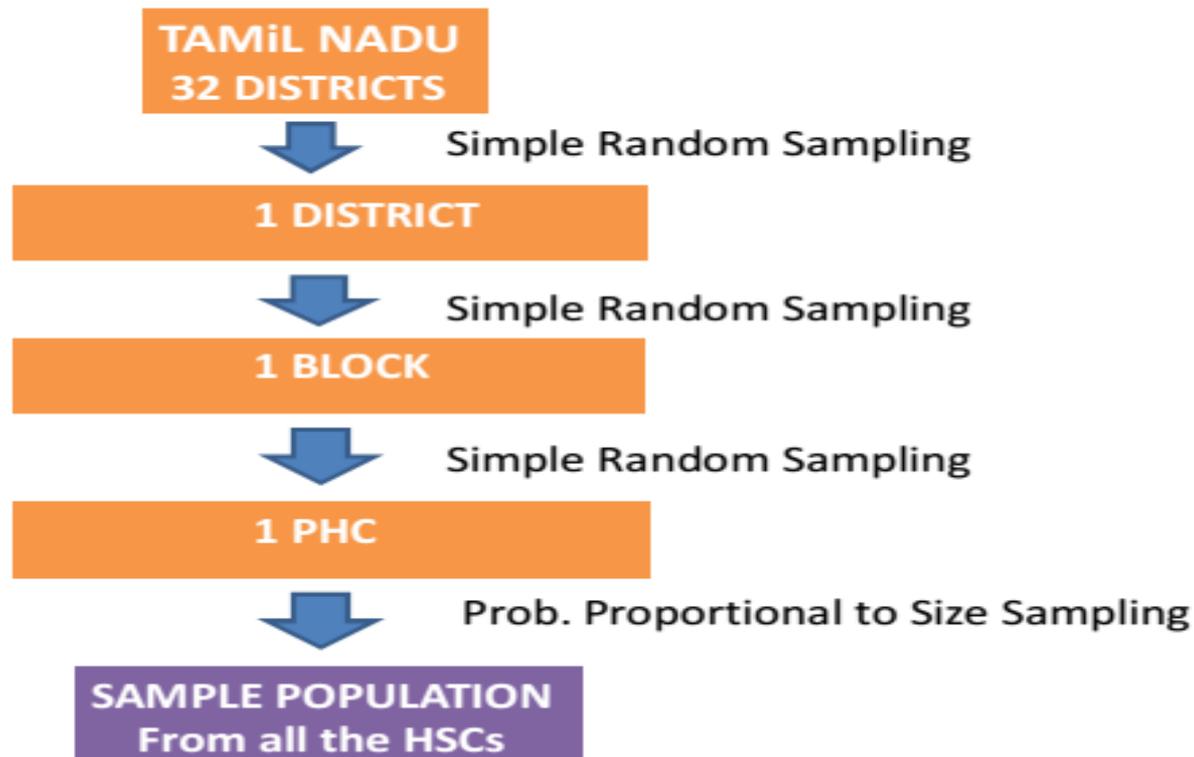
METHODOLOGY

- **Study design** : Community based cross sectional study
- **Study place** : P.....nallur Primary Health entre in Thiruvallur district, Tamil Nadu
- **Study population** : Family caregivers of elderly people (age 60 and above)
- **Study duration** : April 2017 to December 2017
- **Sample size** : With a 95% C.I, prevalence of 38% (3), 20% of relative precision and 10% non response rate, using the formula, N
= $Z_{(1-\alpha/2)}^2 pq/d^2$
= 180

METHODOLOGY (Contd)

- Sampling

MULTISTAGE SAMPLING METHOD



STUDY TOOL

3 parts

- **1. Pretested semi-structured questionnaire with following sections –**
 - a) Socio - demographic details
 - b) Details of caregiving
 - c) Co – morbid conditions of both caregiver and care recipient
 - d) Care recipients' Activities of daily living - **Barthel index**
- **2. Caregiver Stress Scale – modified caregiver strain index (Robinsons, 1983)(1)**
- **3. Multidimensional Scale for Perceived Social Support (MSPSS)(3)**

METHODOLOGY (Contd)

- **ETHICS:** permission obtained from the Institutional Ethics Committee of Madras Medical College.
- **DATA ANALYSIS :** data entered in Excel and analysed using SPSS version-16.
- **MODEL :**
Modified stress appraisal model (Ellen Verbakel and colleagues)

RESULTS - Predictors

GENDER OF CAREGIVER	Low stress	High stress	total	Chi square value	p value
Male	27(71%)	11(29%)	38	4.367	0.037*
Female	74(52%)	68(48%)	142		

AGE OF CAREGIVERS	Low stress	High stress	Total	Chi square value	p value
Less than 40 years	60 (70.6%)	25 (29.4%)	85	14.136	0.001*
40 to less than 60 years	27 (45.8%)	32 (54.2%)	59		
60 years & above	14(38.9%)	22(61.1%)	36		

RESULTS- Predictors

AGE OF CARE RECIPIENT	Low stress	High stress	total	Chi square value	p value
Age less than 70 years	82(63.1%)	48(36.9%)	130	9.221	0.002*
Age 70 years and above	19(38%)	31(62%)	50		

CAREGIVER'S RELATIONSHIP WITH CARE RECIPIENT	Low stress	High stress	Total	Chi square value	p value
Spouse	22(40.7%)	32(59.3%)	54	10.187	0.006*
Children	38(55.9%)	30(44.1%)	68		
Other relatives	41(70.7%)	17(29.3%)	58		

RESULTS – Predictors

EDUCATIONAL STATUS OF CAREGIVERS	Low stress	High stress	total	Chi square value	p value
Up to middle schooling	46(46.9%)	52(53.1%)	98	7.349	0.007*
High school & above	55(67.1%)	27(32.9%)	82		

CAREGIVER CO –MORBID STATUS	Low stress	High stress	total	Chi square value	p value
With no co – morbid conditions	64(73.6%)	23(26.4%)	87	20.826	<0.001*
With co – morbid conditions	37(39.8%)	56(60.2%)	93		

RESULTS - Predictors

Care recipient ADL status	Low stress	High stress	Total	Chi square value	p value
Independent to slightly dependant	22(78.6%)	6(21.4%)	28	13.596	0.001*
Moderately dependant	74(56.1%)	58(43.9%)	132		
Severely to total dependant	5(25%)	15(75%)	20		

- Gender, education, comorbid status of care recipient, occupation of both caregiver and care recipient, duration and time spent in care giving – No statistically significant association with caregiver stress found in the study

RESULTS – Moderators

CAREGIVER'S PERCEIVED – SOCIAL SUPPORT	Low stress	High stress	Total	Chi square value	p value
Yes	87(73.1%)	32(26.9%)	119	42.914	< 0.001*
No	14(23%)	47(77%)	61		

- **Perceived Social support** (domains - family, friends and significant other special person)

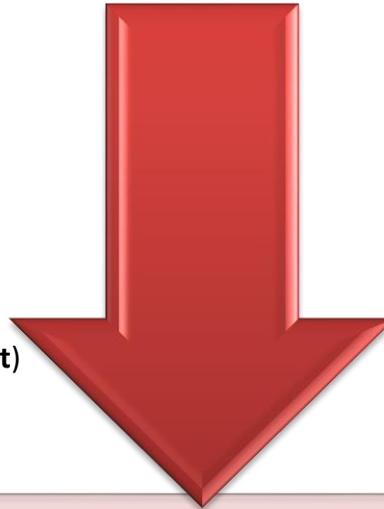
PREDICTORS & MODERATORS

PREDICTORS (caregiver)

- gender
- age
- relationship
- education
- co-morbid status

PREDICTORS (care recipient)

- age
- dependency status



CAREGIVER STRESS

MODERATORS

- caregiver's
perceived social support



CONCLUSION

- Most of female caregivers were dependent on earning family members. In the absence of support from family they were more likely to be stressed.
- Spousal caregivers by themselves were in the position of impending care recipients. Caregiving task might have developed stress.
- Unless family caregivers were able to extract social support from their families, friends and neighbours, most of them would remain highly stressed.

RECOMMENDATIONS

- NCD clinics should educate caregivers about the basic elements of geriatric care.
- Day care centres exclusively for elderly people, where minor health problems can be dealt.
- Ambient time and scope should be provided so that they can share with health personnel their grievances.
- Day care centres will lessen the burden laid on caregivers and thereby bring down the stress level.
- LIMITATION - Financial strain and other constraints were not assessed.

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THANK YOU