

**DETERMINE THE BURDEN AND COPING OF CAREGIVERS OF PATIENTS
WITH BIPOLAR MOOD DISORDER****Mrs. Eujin S. B. * & Prof. (Mrs.) Gracia J. ******Associate Professor, Saraswathy College of Nursing, Karode, Kerala, India.**** Principal, Christian College of Nursing, Marthandam, Tamil nadu, India.***ABSTRACT**

A descriptive study using quantitative approach was conducted to determine the burden and coping of care givers of patients with Bipolar Mood disorder, in selected hospital. Convenience sampling technique was adopted and 50 caregivers were selected on the basis of inclusion criteria. The tool used for data collection consisted of demographic data of caregivers, demographic data of patients with Bipolar Mood Disorder, caregivers' burden interview and caregivers' coping scale. Data was analysed by using descriptive and inferential statistics. Results showed that 36% of the caregivers had moderate to severe burden and 78% of them had moderate coping. The study reveals that there is significant association between the caregivers' burden and selected demographic variables such as income, occupation and relationship. The study depicts that there is perfect negative correlation between burden and coping of caregivers of patients with Bipolar Mood disorder.

Keywords: *Burden, coping, care givers, Bipolar Mood disorder.*

ABOUT AUTHOR

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INTRODUCTION

Bipolar disorder is a recurrent and long term mental illness that can seriously affect the lives of patients and their caregivers' lives. It is characterised by the alternating occurrence of manic, hypomanic, depressive and mixed episodes. Bipolar disorder occurs in 1-3.7% of the general population and will represent the sixth leading cause of disability worldwide among all medical illnesses by the year 2020.

Mood disorders impose a significant burden on a personal, medical and socio-economic level of the caregivers. Caring for someone with psychiatric morbidity is associated with a high level of stress. Caring for a relative with Bipolar disorder poses both objective burdens such as increased expenditure of time, money and emotional burdens such as worry, tension and grief. Sundry studies found that 93% of caregivers reported a moderate or higher degree of care giving strain when their relations were admitted to a psychiatric facility.

Care giving has been identified as a basic component of human nature and a primary element of close relationship. A study carried out in 500 caregivers of patients with Bipolar disorder has highlighted that 89% expressed concerns for the patient's behaviour, 52% for loss of social role and 61% for discontinuation of family daily life.

As time and illness progress, caregivers may find themselves angry or resentful about their lives. Difficulties experienced by caregivers often are considered only after the signs of burnout are apparent. Caregivers who report high levels of care giving strain also report experiencing poorer general health and a higher number of chronic medical conditions relative to the general population.

Studies among caregivers suggested that those who experience high levels of strain are low in coping self-efficacy or employ less effective coping strategies. Strong social support has been correlated with lower caregiver burden – specifically, visits by family and a strong social network were associated with lower levels of such burden. It is necessary to improve quality of life of family caregivers of mood disorders, by early detection of signs and degree of caregiver burden. For this reason it is important to identify the nature and extent of burden among the caregivers of Mood disorders.

OBJECTIVES

1. To assess the burden of caregivers of patients with Bipolar Mood disorder.
2. To assess the coping mechanisms adopted by caregivers of patients with Bipolar Mood disorder.
3. To find out the association between the caregivers' burden and the selected demographic variables.
4. To find out the association between the caregivers coping and the selected demographic variables.
5. To find out the correlation between burden and coping of patients with Bipolar Mood disorder.

HYPOTHESIS

1. There is a significant relationship between burden and coping of caregivers of patients with Bipolar Mood disorder.
2. There is a significant association between burden, coping of caregivers of patients with Bipolar Mood disorder and selected demographic variables.

METHODOLOGY

Research approach

The study was designed to determine the burden and coping of caregivers of patients with Bipolar mood disorder. Hence the research approach adopted for the present study was quantitative approach.

Research design

Descriptive research design was adopted to assess the burden and coping of caregivers of patient with Bipolar mood disorder.

Population

The population of the study was all caregivers of patients with Bipolar mood disorder admitted in the selected hospital.

Sample size

The total sample size selected for this study was 50 caregivers of patients who were admitted in the hospital with Bipolar mood disorder, during the study.

Sampling technique

Convenience sampling technique was used on the basis of inclusion criteria.

Description of the tool

The tools used for the study consisted of three parts —

Part I

This part had demographic data of caregivers such as Age, Gender, Education, Income, Occupation and relationship. It also had demographic data of Bipolar Mood disorder patients such as age, gender, education, income, occupation and duration of illness.

Part II

Caregivers' burden scale consisted of 22 questions. Total scores ranged from 0 - 88. Each statement was graded as never, rarely, and sometimes, quite frequently and nearly always.

Part III

Caregivers coping scale consisted of 30 questions. The maximum score was 120.

RESULTS**a) Sample characteristics**

In this study majority (46%) of the caregivers were above 50 yrs of age, 28% belonged to 20-35 yrs, and 26% belonged to age group 36-50 yrs. Majority (64%) of the caregivers were females and 36% of them were males. Among caregivers 42% had primary education, 38% had higher secondary education and 16% of them were graduates. Majority (48%) of caregivers had monthly income of ` 2500-5000, and 24% of them had income above ` 5000. Majority (46%) of the care givers were children, 34% of them were spouses and only 12% of them were parents. Regarding occupation, 44% of the caregivers were daily wage earners, 34% of them were housewives and only 18% of them were employed in jobs.

b) Assessment of caregivers' burden

Table 1: Frequency and percentage distribution of caregivers according to the level of burden

n=50

Level of Burden	Frequency	Percentage
No burden to minimal burden	4	8%
Mild to moderate burden	12	24%
Moderate to severe burden	18	36%
Severe burden	16	32%

Table 1 shows that 36% of the caregivers were having moderate to severe burden.

c) **Assessment of care givers coping****Table 2: Frequency and percentage distribution of caregivers according to the level of coping**

n=50

Level of coping	Frequency	Percentage
Low coping	11	22%
Moderate coping	39	78%
High coping	0	0%

Table 2 shows that 78% of caregivers were having moderate coping.

d) **Association between the caregivers' burden and the selected demographic variables:**

There is highly significant association between the caregivers' burden and selected demographic variables such as income, relationship and occupation, at $p < 0.001$ level.

e) **Association between the caregivers' coping and the selected demographic variables:**

There is a significant association between the primary caregivers' coping and the selected demographic variables such as income, relationship and duration of illness, at $p < 0.001$ level.

f) **Correlation between burden and coping of caregivers of patients with Bipolar mood disorder:**

There is a negative correlation between the burden and coping of caregivers of patients with Bipolar Mood disorder. Spearman's Rank correlation co-efficient was used for determining correlation. This is the non parametric correlation used to assess the linear correlation between two quantitative variables.

DISCUSSION

The present study aimed to assess the burden and coping of caregivers of patients with Bipolar mood disorder. In this study majority (36%) of the caregivers had moderate to severe burden followed by 32% who had severe burden , (24%) had mild to moderate burden and only (8%) had between no burden to minimal burden. The present study findings are consistent with the results of a previous study conducted in 2014 on caregivers' burden and health in respect of Bipolar disorder patients.

The present study findings show that majority (78%) of the caregivers had moderate coping followed by (22%) of them who had minimal coping. Researchers examined the characteristics of caregivers' coping mechanisms and found that active coping skills and management plans were associated with lower caregiver burden level.

In this study chi- square values were calculated to find out the association between the caregivers burden and selected demographic variables. The study results revealed that there is significant association between caregivers' burden and selected demographic variables such as income, relationship and occupation. These findings are consistent with the results of a previous study conducted in 2011 on burden among caregivers of patients with bipolar mood disorder.

The investigator found that there is negative correlation between the burden and coping of caregivers of patients with Bipolar Mood disorder. Studies among caregivers suggested that those who experience high levels of strain are low in coping self-efficacy or employ less effective coping strategies.

Caregivers treated with psycho educational and cognitive behavioural approach experienced a significant improvement in health behaviour and also reported significant reductions in subjective burden associated with patient's symptoms and role function over the course of treatment.

CONCLUSION

Bipolar disorder is one of the most burdensome illnesses that affect human kind. This study has revealed that the primary caregivers had moderate to severe burden and moderate coping. Then it revealed that there was a significant association between the primary caregivers' burden, coping and the selected demographic variables. The investigator

believes that findings from this study will definitely contribute to plan psycho-education programme regarding the disease condition and coping strategies. It helps to provide counselling to the caregivers according to the level of burden.

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