

# FREQUENCY OF FAMILY BURDEN AMONG CAREGIVERS OF PATIENTS WITH SCHIZOPHRENIA

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## ABSTRACT

**Background:** The life time prevalence of Schizophrenia is significant. Studies have shown that schizophrenia causes family burden among caregivers leading to unhealthy family functioning. **Objective:** To determine the family burden among care givers of patients having Schizophrenia. **Methodology:** The sample size in this study was calculated and the cross sectional study was carried out at Department of Psychiatry and Behavioral Sciences, Sheikh Zayed Medical College/Hospital, Rahim Yar Khan from 1<sup>st</sup> June 2014 to 31<sup>st</sup> March 2015. Sampling technique was non probability purposive sampling. Care givers of the included 130 patients having schizophrenia was calculated using 14% expected family burden at 6% margin of error and 95% confidence level using WHO formula. Both genders, age ranged between 18-60 years and care givers of patients having at least 2 years history of schizophrenia was included. The data was collected using a structured proforma. The participants were assessed with a comprehensive battery of using Zarit burden interview scale which explores negative physical, mental, social and economic impacts of care giving on the life of caregivers. **Results:** Mean age of all 130 care givers was 34.03±11.59 years. There were 65 male and 65 female care givers. As per ZARIT score, 01(0.8%) care giver had mild to moderate burden, 42 (32.3%) had moderate to severe burden and 87 (6.9%) care givers had severe burden. It was observed that in younger age groups the burden was high as that of elderly age group but this difference was not statistically significant. **Conclusion:** Relatives of patients with schizophrenia face enormous burdens, with financial, stigma and negative patient behavior being more prominent.

**Key Words:** Family burden, Care givers, Schizophrenia.

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## INTRODUCTION

Schizophrenia is a psychiatric disorder and its reported life time prevalence of 1.3%.<sup>1</sup> It poses numerous challenges in its management and consequences therefore, requires long term support which may be burden some to caregivers. Care giving to a patient is a demanding task and places a great demand on caregivers in terms of provision of direct care, engagement and retention in treatment, financial assistance, and emotional support. During the last few decades, importance has been given all over the world towards community care of patients thus, leading to increase in care giving responsibilities of care givers. Mostly, care givers are patient's spouses, parents and closest relatives and are responsible for providing emotional and physical support to patients for longer periods of time.<sup>2</sup> In an effort to provide care to patients; caregivers sacrifice their own emotional and physical needs which can strain even the most capable person, therefore

suffer from emotional distress.<sup>3</sup> Although there is paucity of data yet, it's known that care giving places family burden on caregivers.<sup>2</sup> Family burden is a psychological state produced by the combination of physical work, emotional pressure, social restrictions and economic demands arising from taking care of a patient.<sup>4</sup> Family burden can be subjective meaning by the extent to which the caregivers perceive the burden (care givers emotional reactions, morale, depression, anxiety) and objective indicating effects on the household such as taking care of daily tasks, problems associated with care giving.<sup>5</sup> It can also be psychological, physical, financial, and emotional while an important cause being social stigma and behavior of people towards psychiatric patients.<sup>2</sup> Studies have shown that schizophrenia causes family burden among caregivers leading to unhealthy family functioning,<sup>6</sup> also that, caregivers reported family burden due to emotional distress and stigmatization.<sup>3</sup> The studies reported that among the participants majority (96%) of the caregivers had moderate to severe burden with a mean score of 1.27 ± 0.863.<sup>7</sup> Family burden hereby, will be assessed by using Zarit burden interview (ZBI) which explores negative physical, mental, social and economic impacts of care giving on life of caregivers.<sup>4</sup> Despite the fact that patients with schizophrenia often remain physically and emotionally dependent on their caregivers and pose a great deal of family burden,

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little research work has been done in order to see the impact of having a family member with schizophrenia. International studies has reported wide range of prevalence of family burden.<sup>7</sup> Moreover no local study has found done to determine such burden. So, objective of this study was to explore family burden among care givers of patients of schizophrenia. The results of study will help us to understand family burden in our society setup and propose psychological interventions and other therapeutic strategies to minimize the distress and suffering of caregivers.

## METHODOLOGY

This cross sectional study was carried out at Brig Mowadat Hussain Rana, Department of Psychiatry and Behavioral Sciences, Sheikh Zayed Medical College/Hospital, Rahim Yar Khan from 1<sup>st</sup> June 2014 to 31<sup>st</sup> March 2015. Sampling technique was non probability purposive sampling. This study included 130 study subject using 14% expected family burden at 6% margin of error and 95% confidence level using WHO formula. Both genders, age ranged between 18-60 years and having history of the care givers of patients having at least 2 years history of schizophrenia was included. In this study there was no risk involved to patients and to their caregivers. Informed consent was obtained. The study sample consisted of 130 care givers of patients who had schizophrenia recruited to participate in this study. The caregivers who had learning disability, psychiatric or medical comorbidities were excluded from the study. The data was collected using a structured proforma which included the questions that were prepared to measure the family burden demographic information was obtained, along with history of family burden, and the participants were evaluated by using Zarit burden interview scale. The Zarit Burden Interview, a caregiver 22-item self-report inventory that examines burden associated with financial/bahvioral impairments and the home care situation. Its reliability (Cronbach's alpha = 0.83 and 0.89; test re-test reliability and 0.71 validity were confirmed.<sup>8,9</sup> Each question is scored on a 5 point Likert scale ranging from never to nearly always present.<sup>8,9</sup> Descriptive statistics were calculated for both qualitative and quantitative variables. SPSS version 21 was used for quantitative variables like age, to measure

mean  $\pm$  SD was calculated. Frequency and percentages were calculated for qualitative variable like gender. Data was stratified for age and gender in order to deal with effect modifiers. A p value of 0.05 or less was taken as significant.

## RESULTS

There were 130 caregivers of which 65(50%) were male. The mean age of the care givers was 34.03 $\pm$ 11.59 years, ranged between 16 to 70 years. It was noted that 47 (36.15%), 63 (48.46%) and 20 (15.39%) care givers were caring their patients for the last 2-3 years, 4-5 years and 6-7 years respectively. Mean ZARIT score was 62.60 $\pm$ 6.88, ranged between 33 and 80. 01 (0.8%), 42 (32.3%) and 87 (66.9%) care givers had mild to moderate, moderate to severe and severe burden among the caregivers respectively (Table I).

A statistically significant association was present between severity of family burden among the care givers and the duration of care giving. i.e. (p-value=0.012) (Table II). It was noted that 01 caregiver had mild to moderate burden and was in the age range of 31-45 years and among the 42 caregivers who had moderate to severe burden; 20, 14, 07, 01 were in the age range of 15-30 years, 31-45 years, 46-60 years and above 60 years respectively. Among the 87 caregivers who had severe burden; 44, 26, 17 were in the age range of 15-30 years, 31-45 years and 46-60 years respectively. (p-value=0.602) (Table II). It was noted that 01 male caregiver had mild to moderate burden, 20 male and 22 female caregivers had moderate to severe burden, 44 male and 43 female caregivers had severe burden. (P-value=0.575)

**Table I: Severity of family burden among care givers of schizopheria**

Family burden	Score	Frequency	Percentage
Mild to moderate Burden	21- 40	1	0.8%
Moderate to severe Burden	41- 60	42	32.3%
Severe Burden	61- 88	87	66.9%
<b>Total</b>		130	100%

(P.Value = 0.01)

One study subject who has mild to moderate burden had 2-3 years duration of care, 42 subjects who has

moderate to severe burden 21 (50 %) has 2-3 years 10 (24 %) has 4-5 years and 11 (26 %) has 6-7 years duration of care whereas, 87 subjects who has severe burden, 25 (29%) has 2-3 years, 53 (61 %) has 4-5 years and 9 (10 %) has 6-7 years duration of care ( $p=0.00$ ).

**Table II: Stratification of age in relation to severity of family burden**

Age (Years)	Mild Moderate	Moderate Severe	Severe	Total
15-30	0(0%)	20(47.6%)	44(50.6%)	64(49.2%)
31-45	1(100%)	14(33.3%)	26(29.9%)	41(31.5%)
46-60	0(0%)	7(16.7%)	17(19.5%)	24(18.5%)
>60	0(0%)	1(2.4%)	0(0%)	1(0.8%)
Total	1 (0.8%)	42 (32.3%)	87 (66.9%)	130 (100%)

(P.Value = 0.602)

## DISCUSSION

In our study, 66.9% care gives has severe family burden and these results are in consistent with the Pamela Grandón P study who reported 77.3% of the care givers family burden who were taking care of schizophrenic patients.<sup>10</sup> It was found that all caregivers has some burden whereas; the burden was significantly higher among younger care givers aged 15-30 years (50.6%). This finding is consistent with the findings of Hassan WA from Egypt who reported that the mean score of burden was higher among younger age groups.<sup>11</sup> In this study, 32.2% care givers had moderate to severe burden and 66.9% care givers had severe burden. Burden among care givers of this study is higher than that of reported in a Nigerian study.<sup>12</sup> According to the results of a that studies, a high level of caregiver burden was found in 61(47.3%) and 97(75.2%) experienced an enormous burden.<sup>12</sup>

In our study, no significant difference was found regarding family burden among male and female care givers. This is in contrast to the findings of other studies who reported that there are significant gender differences regarding caregiver's distress.<sup>13-15</sup>

## CONCLUSION

Relatives of patients with schizophrenia face enormous burdens, with financial, stigma and negative patient behaviour. However burden was not significantly associated with age and gender. However a significant association was seen between burden faced by care giver and duration

of provision of care to the patient. Efforts should be made to reduce the burden associated with caring for patients with schizophrenia. The government should subsidize the cost of treatment and make mental health facilities more accessible to the community. Emphasis should be laid on prevention, early diagnosis and prompt treatment of mental illness. Communities should be educated about the nature of mental illness in an attempt to reduce stigma.

## REFERENCES

1. WHO. The ICD-10 Classification of Mental and Behavioural Disorders-Diagnostic Criteria for Research (Geneva, World Health Organization). 2010.
2. Imran N, Bhatt MR, Haider II, Azhar L, Omar A, Sattar A. Caring for the caregivers: mental health, family burden and quality of life of caregivers of patients with mental illness. *Journal of Pakistan Psychiatric Society*. 2010;7(1):327-30
3. Tan SC, Yeoh AL, Choo IB, Huang AP, Ong SH, Ismail H, et al. Burden and coping strategies experienced by caregivers of persons with schizophrenia in the community. *J Clin Nurs*. 2012;21(17-18):2411-18.
4. Adeosun LL. Correlates of caregiver burden among family members of patients with schizophrenia in Lagos, Nigeria. *Schizophrenia research and treatment*. 2013.
5. Panayiotopoulos C, Pavlakis A, Apostolou M. Family burden of schizophrenic patients and the welfare system; the case of Cyprus. *Int J Ment Health Syst*. 2013;7(1):13-9
6. Osman CB AB, Tutiiryani MD, Anisah O. Depressive disorders and family functioning among the caregivers of patients with schizophrenia. *East Asia Arch Psych*. 2010;20:101-8.
7. Shihabuddeen I CM, Moosabba. Family burden and family distress in schizophrenia. *Indian Journal of Social Psychiatry*. 2012;28(3-4):113-6
8. Seng BK, Luo N, NG WY, Lim J, Chionh HL. Group NMHPW. Validity and reliability of the Zarit Burden Interview in assessing caregiver burden. *Ann Acad Med Singapore*. 2010;39(10):758-63.
9. Herbert R, Bravo G, Preville M. Reliability, validity and reference values of the Zarit Burden Interview for assessing informal caregivers of community-dwelling older persons with dementia. *Can J Aging*. 2000;19:494-507.
10. Grandón P, Jenaro C, Lemos S. Primary caregivers of schizophrenia outpatients: Burden and predictor variables. *Psychiatry Research*. 2008;158(3):335-43.
11. Hassan WA-N, Mohamed II, Elnaser AEA, Sayed NE. Burden and coping strategies in caregivers of

- schizophrenic patients. *Journal of American Science*. 2011;7(5):802-11.
12. Yusuf AJ, Nuhu FT, Akinbiyi A. Caregiver burden among relatives of patients with schizophrenia in Katsina, Nigeria. *South African Journal of Psychiatry*. 2009;15(2):43-7.
13. Schneider M, Steele R, Cadell S, Hemsworth D. Differences on psychosocial outcomes between male and female caregivers of children with life-limiting illnesses. *Journal of pediatric nursing*. 2011;26(3):186-99.
14. Hassan WA-N, Mohamed II, Elnaser AEA, Sayed NE. Burden and coping strategies in caregivers of schizophrenic patients. *Journal of American Science*. 2011;7(5):802-11.
15. Mandal P, Prakash S, Sagar R. Primary caregivers of schizophrenia outpatients: burden and its correlates. *Delhi Psychiatry Journal*. 2014;17(2):343-8.