

Emotional Issues and Coping Strategies of Family Members of Patients Experiencing Depression

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ABSTRACT

Depression affects almost every aspect of a person's life including the mood, thought and perception of the world, interest in daily activities and interaction with people around him. Family members play a significant role in the treatment and management of patients experiencing depression. However, multiple studies have suggested that they often experience various emotional issues in the process of care giving. Therefore, exploration about family members' emotional issues and the coping strategies used by them would be helpful in identifying the need of the family members, so as to design strategies to meet their needs. A qualitative phenomenological design has been adopted to conduct the study with the aim of exploring the emotional issues and coping strategies of family members of patients experiencing depression. The study was carried out among the family caregivers of persons with depression currently under treatment in OPD of a Mental Health Institute in India. The family members of patients diagnosed with Depressive episode and taking treatment from a Mental Health Institute in India were selected through purposive sampling technique. Written consents from the respondents have been collected before data collection. Data was collected through in-depth interviews from respondents using an interview guide. Analysis of data has been done by thematic analysis. The identified emotional issues experienced by the family members were frustration, guilt feeling, fear, worry, and burden. Identified coping strategies used by the family members to deal with their emotional issues were denial, spending time alone, drinking, praying, and doing same household works repeatedly.

Keywords: *Depression, Family Members, Emotional Issues, Coping Strategy, Qualitative Research*

Depression affects almost every aspect of a person's life including the mood, thought and perception of the world, interest in daily activities and interaction with people around him. This nature of the disorder not only affects the patient experiencing depression but also the family members and those living with him/her. Family members play a significant role in the management of patients with depression. As most of the mild to moderate cases of depression don't need hospitalization and are treated Out-Patient

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Department (OPD) basis, family members' role becomes most critical in their treatment. The family members can be instrumental in almost all the aspects of depression management, for example, identifying the symptoms of depression, encouraging patients for consultation, reporting the observed symptoms, assisting and supervising in medication intake, providing support to the patient, and observing and preventing suicidal behaviour. However, whereas being able to comfort the patients experiencing depression can be satisfying for the family members, this process of care giving can also be exhausting for them. Studies have shown that family members often experience various emotional issues (Richard et al., 2008) in the process of care giving to the patients experiencing depression. Some of the identified and reported emotional issues of the family members of patients experiencing depression are fear, sadness, frustration, hopelessness and guilt feeling (Sarkar et al., 2020).

Empirical evidence show that there is association between negative coping style and mental illness (Li, Y., 2021, Junhua, H., 20013, and Hollifield. M, 2008). This suggests that if the family members of patients experiencing depression do not receive timely mental health interventions for their emotional issues may develop serious mental health conditions. Further, strategies used by the caregivers to cope with their emotional issues play a significant role in the effective management of their emotional issues. For example, a study conducted by Oluwaseyi et al (2021) showed, family members who utilized emotion oriented coping strategies reportedly experienced anxiety and stress rather than those who used task oriented coping strategies. Another study conducted by Azar et al (2021) showed that caregivers who used more negative coping strategies experienced higher burden of care. Therefore, we explored the emotional issues and coping strategies of family members of patients experiencing depression which would further help in designing interventions for them to meet their needs.

MATERIALS AND METHODS

A qualitative phenomenological design has been adopted to conduct the study among the family members of patients experiencing depression currently under treatment in OPD of a Mental Health Institute in India. The participants were recruited through purposive sampling technique. A self-structured socio-demographic proforma was used to collect the demographic information from the participants. Data was collected from seven participants through in-depth interviews till data saturation occurred. An interview guide was prepared based on literature review, expert opinion and researcher's own clinical observation. The participants were explained about the purpose and the procedures of the study prior to data collection and written informed consent was obtained from each of them. Respondent anonymity and data confidentiality was maintained.

Data Collection and Analysis

Data was collected by carrying out face-to-face in depth interviews. Each interview lasted approximately for 45 minutes. The Interview sessions were audio recorded along with the field notes that were kept securely for data analyses and future reference. A 'zigzag' approach (Ghasemi et al., 2017) was adopted for data collection where the transcribed data were discussed with the participants to establish respondent validity till data saturation occurred. All the recorded data then were transcribed, coded in three phases, where the first and second phase involved structural and pattern coding respectively of the collected data. In the third phase data triangulation was done. Following this, the complete set of data was debriefed (Earnest, D. 2020) by two peer debriefers to increase validity and reliability. Principles of constant comparative analysis was used, where, the transcripts were read on a number of occasions to determine how the emerging analysis fitted in with existing data. A

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thematic analysis (Vaismoradi, M. et al., 2013) was undertaken to analyze the qualitative data where initial codes were grouped together into similar concepts to form the categories and themes.

RESULTS

Characteristics of the participants

Table: Sociodemographic characteristics of the family members of patients experiencing depression

	P1	P2	P3	P4	P5	P6	P7
Age	49years	34years	22years	20years	53years	39years	51years
Sex	Female	Male	Female	Male	Male	Female	Female
Education	XII	B.Com	BA	XII	B.A	X	X
Occupation	Home maker	Marketing executive	Student	Student	Businessman	Home maker	Home maker
Marital status	Married	Unmarried	Unmarried	Unmarried	Married	Married	Married
Relationship	Mother	Son	Daughter	Son	Husband	Mother	Wife
Presence of alternative care giver	Yes	No	No	Yes	No	No	No

Three husbands, two mothers, two sons, one daughter, one husband and one wife were interviewed. Participants were aged between 20 to 53 years. Four out of the seven participants were female whereas three were male. Four were married and three were unmarried. Two participants had secondary, two had higher secondary and three had graduate level of education. Out of the seven participants three were home makers, one was marketing executive, two were students and one was businessman. Five of the participants reported that there was absence of an alternate caregiver whereas two reported presence of care giver.

Findings

As gathered from the interviews, family members experienced emotional issues while taking care of the patients with depression. These emotional issues and the coping strategies used to deal with them were identified and categorized under various themes.

Emotional issues

Five themes were emerged from the emotional issues reported by the family members. These were frustration, guilt feeling, fear, worry, and burden.

Frustration

Family members reported undergoing frustration in the process of care giving to the patients experiencing depression. Frustration occurred mainly due to difficulty communicating with the patients. Few of the participants expressed their understanding of the patients' disinterest in communicating with others, which they thought was mostly because of the nature of the disorder. They understood that the nature of the illness resulted in sadness, irritability and disinterest among the patients in communicating with others. However, they felt frustrated over it mainly because they did not know how to deal with it.

A 49 years old mother expressed,

“She yelled at me, got irritated even if I said something on a lighter mode. It was frustrating. I didn't know how to deal with it.” [P1]

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Regret:

Family members expressed regret for not being able to ‘understand the pain’ of the patient. Few of the participants regretted that they were not able to ‘give time’ to the person experiencing depression which they believed was delaying the recovery of the patient. One of the participants wished that he initiated his mother’s treatment early.

The 53 years old husband verbalized,

“I wonder if it’s because of me that she is suffering like this. I was not able to understand her pain even if she tried to express it. I should have brought her to hospital early.” [P5]

Fear:

Participants have experienced fear while taking care of the patients with depression especially when they were having suicidal risk. Some of the participants described that it was difficult for them to leave the patient at home due to the fear that they might ‘try to do something wrong’. This, as reported by the family members has resulted in disturbance in their day to day work and studies.

A 39 year old mother said,

“I was scared that he would kill himself... especially on the days when he did not talk with us and stayed in his room the whole time.” [P6]

Worry:

Some of the family members have verbalized worry over financial matters related to treatment and household management. This was mostly identified among the family members of the patients who were the sole breadwinners in the family. Such worry has also been identified among the family members who lacked support system in caring of the patient.

A 51 years old wife said,

“Since the time he stopped working I keep worrying about everything. Whether he will be able to go to work ever again? What if he never gets better? How will I run the family? What will we eat?” [P7]

Burden:

Burden was experienced by some of the family members while giving care to the patient experiencing depression. This issue was mainly noticed among the younger caregivers who were primarily involved in caring for the patients with depression. Burden was also expressed by a caregiver who did not have any alternative caregiver for taking care of the patient with depression.

A 34 years old son said,

“Managing everything at times becomes difficult. Plus I don’t have anyone who could help me in taking care of him. After managing work I again have to make sure that he is getting all the care to recover from this illness.” [P2]

Coping strategies

Five themes were emerged from the coping strategies as reported by the family members. These were denial, spending time alone, drinking alcohol, praying, and doing same household works repeatedly.

Denial:

It was identified from the interviews that few of the participants were using denial to cope with the feelings of regret of not paying attention to the patient experiencing depression.

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One of the participants said that she doesn't 'think about' her daughter's illness so as to deal with the emotional issues related to the care of patients with depression.

A 49 years old mother explained,

“(I) won't make such mistake in future. We didn't make any mistake though. I mean the thing [sexual contact between the daughter and father-in-law] that has happened, happened. I don't think about it.” [P1]

Spending time alone:

Few of the participants during the interviews have verbalized that they often go out of the house to spend time alone to 'escape' from their own issues. One of them has also said that he goes out and 'shut down' to be able to feel better.

A 34 years old son has described,

“Sometimes I just go out of the house. I shut down myself from everything...” [P2]

Drinking alcohol:

It has been emerged that among the male participants, some gets engaged in drinking alcohol to deal with the emotional issues experienced while care giving to the patients with depression. Participants felt that drinking alcohol helped them to stay calm and get relaxed when they did not see any other way to deal with it.

A 53 years old husband explained,

“Sometimes when I feel too frustrated I go out somewhere. Sometimes I drink one or two pegs...” [P5]

Consoling self:

One of the participants expressed that she dealt with her emotional issues by consoling herself that although he (patient experiencing depression) could not support her and the family, her two sons are there, who would in future support and help her in running the household.

A 59 year old wife verbalized,

“I console myself that I don't need anything else when Allah has given me two sons. They will take care of me if anything happens. They can take care of the family.” [P7]

Praying:

Some of the participants verbalized that they pray to God and read *namaz* to deal with their emotional issues.

A 39years old mother said,

“I read *namaz*, I pray to Allah. It feels better when I pray.” [P6]

Doing same household works repeatedly:

One of the participants during the interview verbalized that she keeps doing the same work repeatedly to cope with her emotional issues related to care of the patient with depression.

The 51 year old wife said,

“I do the household chores repeatedly; the things which are already done, like cleaning the stuffs to pass time.” [P7]

DISCUSSION

Current study indicated that the family members of the patients with depression experience emotional issues like frustration, regret, fear, worry and burden in the process of care giving to their significant ones. This finding is consistent with the finding of multiple studies (Sarkar et al., 2020) which showed caregivers of patients with depression experience

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different emotional issues like sadness, irritability, burden and worry. These findings call for the need to focus on the family members to enable them to manage the emotional issues they experience while the process of care giving.

The study showed that although family members understood that patient's behaviour resulting in difficult communication was because of the nature of the illness, they felt frustrated about it. This clearly indicates the need for preparing of the family members to deal with the behavioural manifestations of depression.

Present study has also revealed that family members often adopt unhealthy coping strategies like denial and drinking alcohol to deal with their emotional issues. Overuse of such coping mechanism may negatively affect family members mental health, as well as treatment and management of the patient experiencing depression. For example, staying in denial about their emotional issues for a long time may lead to worsening of these issues. Again, drinking alcohol may lead to dependence, cause further physical and mental health issues and disrupt the family functioning. These findings emphasize on the need for designing and implementation of strategies to teach and strengthen the already existing healthy coping strategies among the family members.

In view of the findings of present study, researchers recommend conducting interventional studies among the family members of patients experiencing depression to manage their emotional issues, as well as to teach and strengthen the already existing healthy strategies.

CONCLUSION

Frustration, guilt feeling, fear, worry, and burden were the most reported emotional issues among the family members of patients experiencing depression. Family members were using multiple coping strategies to deal with these issues, among which some were healthy; some, however, were unhealthy coping mechanisms. Study findings indicate a strong need for the mental health care providers to focus on the family members involved in care of patients with depression. Educating the family members on how to manage the patients experiencing depression at home may prevent the emotional issues to a great extent. Further teaching them healthy coping strategies, as well as strengthening the already existing ones would also be beneficial for their wellbeing.

REFERENCES

- Azar, K., Jalil, A., Maryam, M., Kelly-Ann, A., & Seyedeh, A.M. (2021) Caregiver burden and coping strategies in caregivers of older patients with stroke. *BMC Psychology*. 9(51). <https://doi.org/10.1186/s40359-021-00556-z>
- Earnest, D. (2020) Quality in Qualitative research: An overview. *Indian Journal of Continuing Nursing Education*. 21:76-80.
- Ghasemi, A., & Pourmahadian, H. (2017) A paradigmatic model of customer money laundering risk in Iranian banks. *International Journal of Commerce and Management Research*. 3(4):34-41.
- Gotlib, I.H., Hammen, C.L.(2002) Handbook of depression. The Guilford Press. Washington DC.
- Hollifield, M., Hewage, C., Gunawardena, C.N., Kodituwakku, P., Bopagoda, K., & Weerathnege, K. (2008) Symptoms and coping in Sri Lanka 20–21 months after the 2004 tsunami. *British Journal of Psychiatry*. 192(01):39–44. 10.1192/bjp.bp.107.038422

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- Junhua, H., Qunying, L., Jinliang, L., Xuejiang, L., Jin, Y., & Liang, Zhang. (2013) post-traumatic stress disorder status in a rescue group after the Wenchuan earthquake relief. *Neural Regeneration Research*. 8(20):1898–1906. 10.3969/j.issn.1673-5374.2013.20.009
- Li, Y., Cong, X., Chen, S., & Li, Y. (2021) Relationships of coping styles and psychological distress among patients with insomnia disorder. *BMC Psychiatry*. 21(255). <https://doi.org/10.1186/s12888-021-03254-7>
- Oluwaseyi, I.O., Olaolorunpo, O., Adetola, B., Fatimah, O.A., Tolulope, E.O., & Odunayo, A. (2020) Depression, anxiety, stress and coping strategies among family members of patients admitted in intensive care unit in Nigeria. *International Journal of Africa Nursing Sciences*. 13 (100223). <https://doi.org/10.1016/j.ijans.2020.100223>
- Richard, S., & Paula, R.S. Physical and Mental Health Effects of Family Caregiving. *American Journal of Nursing*. 108(9 Suppl): 23–27. doi: 10.1097/01.NAJ.0
- Sarkar, S., & Baruah, A. (2020) Challenges in managing the persons with depression: a qualitative study. *International Journal of Health Science and Research*. 10(10):303-310. http://www.ijhsr.org/IJHSR_Vol.10_Issue.10_Oct2020/40.pdf
- Vaismoradi, M., Turunen, H., & Bondas, T. (2013) Content analysis and thematic analysis: Implications for conducting a qualitative descriptive study. *Nursing and Health Sciences*. 15:398–405. wiley.com/doi/epdf/10.1111/nhs.12048

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Conflict of Interest

The authors declared no conflict of interest.

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