

Social Support In Relation To Quality Of Life among Caregivers of Drug Addicted People

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ABSTRACT

Taking care of a dependent relative entails different physical, psychological and social changes for caregivers. One of the most affected aspects is the social network and support, due to the lack of opportunities for leisure activities, impossibility to go out to work and changes in family routines. Social support also could act as a moderator when it affects caregiver's quality of life by altering the direction and/or strength of the relation between the caregiver and his/her quality of life. Thus, social support to caregivers helps them to deal with their quality of life in a positive manner. Quality of life is a person's perceived assessment of his/her own well-being. This includes emotional, social, and physical aspects of the individual's life.. The social support scale and WHO quality of life brief questionnaire was administered on care givers of drug addicted people to collect data. T-test and Pearson product moment co-efficient of correlation were used for data analysis. The obtained result revealed significance difference between male and female caregivers of drug addicted people on social support and quality of life and the relationship between social support and quality of life was found significantly positive.

Keywords: *Caregivers, Drug addicted people, Social support, and Quality of life.*

Family caregivers play a critical role in our health and long term care system by providing a significant proportion of the care for both the chronically ill and aging. Taking care of a dependent relative at home entails different physical, psychological and social changes for caregivers. One of the most affected aspects is the social network and support, due to the lack of opportunities for leisure activities, impossibility to go out to work and changes in family routines.

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Caregivers

A caregiver is anyone who provides care for another person in need, such as a child, an aging parent, a husband or wife, a relative, friend, or neighbor. A caregiver also may be a professional who provides care in the home or at a place that is not the person's home. Caregivers who are motivated by a sense of duty, guilt, or social and cultural norms are more likely to resent their role and suffer greater psychological distress than caregivers with more positive motivations.. It is well documented that family members provide most of the informal care when community-dwelling dependent elders need help (Angel and Angel 1997; Cotler 1996; George 1987). Although replacement of this informal care by formal care is not a likely outcome, supplementing informal support with formal support can offset caregiving costs and perhaps reduce or delay the need for institutionalization of the older family member (Bass, Noelker, and Rechlin 1996; Kosloski and Montgomery 1995). Despite such benefits, care recipients and caregivers consistently use few formal support services (Caserta, Lund, Wright, and Redburn 1987; Cox and Monk 1993; Lawton, Brody, and Saperstein 1989). The limited information that is available has suggested that a combination of caregiver and care recipient conditions (i.e., physical health, depression, cognitive impairment) is important determinants of social support (Bass and Noelker 1987; Houde 1998; Miller and McFall 1991). In addition to caregivers' and care recipients' conditions, background characteristics such as age, education, race, and living arrangement are also documented as important determinants of informal, church, and formal social support (Logan and Spitze 1994)

Drug Addiction

Drug addiction is a chronic, often relapsing brain disease that causes compulsive drug seeking and use, despite harmful consequences to the drug addict and those around them. Drug addiction is a brain disease because the abuse of drugs leads to changes in the structure and function of the brain. Although it is true that for most people the initial decision to take drugs is voluntary, over time the changes in the brain caused by repeated drug abuse can affect a person's self-control and ability to make sound decisions, and at the same time create an intense impulse to take drugs. Drug addiction can cause serious, long-term consequences, including problems with physical and mental health, relationships, employment, and the law.

Social Support

The trauma that a chronic disease instills in a patient is extended to the family as well. Social support has been previously linked to positive effects on health and reduction of stress. It facilitates the process of recovery in most cases. Social support has positively affected physical and emotional health along with spirituality. Desired social support entails the expectations of a patient from his primary caregivers whereas the kind of care that the caregiver believes he is providing refers to perceived social support. The system of support as consisting of three parts or systems: (a) informal, (b) church, and (c) formal social support. These systems of social support are examined separately in this study to determine the relationship background characteristics, needs of care recipients, needs of primary caregivers and network structure have on predicting primary caregivers' use of each system of social support. Second, we examined whether a linking, compensatory, or no relationship existed between the three systems of social support. When systems are linked (positively related), higher levels of informal social support are associated with higher levels of church social support and /or formal social support. When they compensate one for the other (negatively related), lower levels of informal support are associated

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with higher levels of church and /or formal support. It is also possible that the systems are not related at all.

Quality Of Life

Quality of life is a person's perceived assessment of his/her own well-being. This includes emotional, social, and physical aspects of the individual's life.

In healthcare, the health related quality of life (HR-QOL) is the assessment of how the individual's well-being is affected over time by the occurrence of a disease, disability or disorder.

LITERATURE REVIEW

Studies on the influence of social support on the QOL of relative caregivers of people with dependency have identified the fact that caregivers who receive some kind of support from family and friends associated themselves with better satisfaction in interpersonal relationships. In addition, caregivers who were dissatisfied with their social relationships had increased burden. This fact may be associated with the subjective assessment of the caregiver regarding the definition of QOL, which according to the World Health Organization, is the perception that the individual has about their position in life, concerning the culture and value system in which they live and in relation to their goals, expectations, standards, and concerns.

Williams SW, Dilworth- Anderson 2002 found that the connections between systems of support: Informal and formal supports were linked. Cohesive family networks and network size are important factors that help determine what support caregivers receive. African American caregivers may be at risk for negative health outcomes because they are less likely to use formal support as care recipients' activities of daily living limitations increase.

Amendola, Oliveria MA, Alvarenga MR 2011 found that the Social Relations domain of the WHOQOL-bref received the best score within the domains of the instrument. Female caregivers, with low burden scores and who had received help from someone to perform the care, obtained the highest scores. . The results provide evidence of the influence of social support regarding Quality of Life and the burden perceived by family caregivers.

Objectives

1. To examine the relationship between social support and quality of life among caregivers of drug addicted people
2. To examine the relationship between social support and quality of life of male and female caregivers of drug addicted people.

Hypothesis

1. There will be a significant relationship between social support and quality of life among caregivers of drug addicted people
2. There will be a significant relationship between social support and quality of life of male and female caregivers of drug addicted people.

METHODOLOGY

Sample:

The sample was comprised of 100 caregivers of drug addicted people of these 50 subjects were males caregivers and 50 subjects were females caregivers. The data was collected from Jawahar Lal Nehru Medical College and Hospital (JNMCH) AMU, Aligarh.

Procedure:

The research data was collected on different subjects individually. All the two scales were administered on the subjects individually. Prior the data collection, the investigator was establish rapport and keeping in mind the subject's readiness to support the purpose, the data may be completed in one session or more than one session.

Tools:

Multidimensional Scale of Perceived Social Support: Zimet, Dahlem, Zimet & Farley (1988). This scale consists of 12 items and each item is rated on 7 point scale. The number of items represents to the 3 factors is as: Family, Friends & significant others.

WHOQOL-bref: This scale consists of 26 items and each item is rated on 5 point scale. The number of items represents to the 4 factors is as: Physical, Psychological, Social Relation and Environment for only for research purpose.

Statistical analyses:

In order to meet the research objectives data were analyzed; Pearson product moment correlation was administered to study the relationship between quality of life and social support. The simple linear regression was applied to examine the influence of quality of life and social support. Further t-test was computed for the comparison of quality of life and social support of both groups.

RESULT DISCUSSION

Table 1: Show the correlation between social support and quality of life among caregivers of drug addicted people

Correlation	
Social support	Quality of life
Pearson Correlation	.434 *
Sig. (2-tailed)	.001
N	60

This table shows that social support is significantly correlated with quality of life ($r=.434$) among the care givers of drug addict people.

Table 2: Show the correlation between social support and quality of life among male and female caregivers of drug addicted people

Correlation			
Social support		Quality of life	
		MALE	FEMALE
Pearson Correlation		.311	.70
Sig. (2-tailed)		.094	.000
N		30	30

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This table shows that social support is insignificantly correlated with quality of life ($r=.311$) and ($r=.740$) among the male and female care givers of drug addict people respectively.

DISCUSSION AND CONCLUSION

The result of the proposed study shows significant i.e. positive relationship between social support and quality of life in our female group caregivers which means that social support has some contribution in making one's quality of life somehow better. But there is a negative relationship i.e. insignificant correlation between social support and quality of life among male groups, it means that social support has no role or little role in making the quality of life better among male group of caregiver. As we can see that there is significant difference in male and female social support it means that both the groups are quite satisfied with the support that they are receiving.

Present study also shows the significant difference in quality of life of both the groups, which indicate that the both group of caregivers are somehow satisfied with their quality of life. Findings indicate that social support and quality of life significantly correlated with each other which is also verified by (Jonsson 2005) they explore the association between social support and quality of life. Drew (2011) found that the caregivers of individuals with drug addicted people living in Guadalajara, Mexico reported poorer HR-QOL across various domains including mental and general health. He stressed the impact of scarcity of services and physical strain on the quality of life of caregivers. Nijboer (2001) concluded that social support can be of particular significance for persons in a stressful situation such as caregiving, the exact pathways linking social support to caregiver outcomes were however not completely outlined. Consequently, it is concluded that social support has its significant and positive correlation as well as contribution on quality of life of caregivers. The difference between social support and quality of life is also found significant in men and women caregivers.

Acknowledgments

The author appreciates all those who participated in the study and helped to facilitate the research process.

Conflict of Interests

The author declared no conflict of interests.

REFERENCES

- Amendola, Oliveria MA, Alvarenga MR(2011) [Influence of social support on the quality of life of family caregivers while caring for people with dependence] [Article in Portuguese Aug;45(4):884-9]
- Angel R., Angel J., 1997. *Who will care for us? Aging and long-term care in multicultural America* New York University, New York.
- Ann Cathrin Johsson, RN, MSc et al. (2005) "Determinants of Quality of Life in stroke survivors and their informal caregivers". American Heart Association. Inc, 2005.
- Bass D. M., Noelker L. S., Rechlin L. R., 1996. The moderating influence of service use on negative caregiving consequences. *Journal of Gerontology: Social Sciences* 51B:S121-S131

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- Caserta M., Lund D., Wright S., Redburn P., 1987. Caregivers to dementia patients: Use of community services. *The Gerontologist* 27:209-213.
- Cotler M., 1996. Editor's introduction: Chronic illness and current perspectives: What are the problems for patients, families, and other caregivers?. *American Behavioral Scientist* 39:647-654
- Cox C., Monk A., 1993. Hispanic culture and family care of Alzheimer's patients. *Health and Social Work* 18:92-101.
- George L. K., 1987. Easing caregiver burden: The role of informal and formal supports. Ward R. A., Tobin S. S., , ed. *Health in aging: Sociological issues and policy directions* 133-158. Springer, New York.
- Houde S. C., 1998. Predictors of elders' and family caregivers' use of formal home services. *Research in Nursing and Health* 21:533-543.
- Kosloski K., Montgomery R. J., 1995. The impact of respite use on nursing home placement. *The Gerontologist* 35:67-74.
- Logan J. R., Spitze G., 1994. Informal support and the use of formal services by older Americans. *Journal of Gerontology: Social Sciences* 49:S25-S34.
- The WHOQOL Group.(1998)The World Health Organization Quality of Life assessment (WHOQOL): Development and general psychometric properties. *SocSci Med.* 1998;46:1569–1585
- Williams SW, Dilworth- Anderson (2002)Systems of social support in families who care for dependent African American elders: *Gerontologists* 2002 Apr;42(2):224-36
- Zimet, G.D., Dahlem, N.W., Zimet, S.G. & Farley, G.K. (1988). The Multidimensional Scale of Perceived Social Support. *Journal of Personality Assessment*, 52, 30-41.

How to cite this article: T Ahmad, A Nabi, I Khan (2016), Social Support In Relation To Quality Of Life among Caregivers of Drug Addicted People, *International Journal of Indian Psychology*, Volume 3, Issue 4, No. 65, ISSN 2348-5396 (e), ISSN: 2349-3429 (p), DIP: 18.01.139/20160304, ISBN: 978-1-365-34680-4