



A CROSS-SECTIONAL STUDY ON BURDEN AMONG WIVES OF ALCOHOLICS

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ABSTRACT

Alcoholism is one of the major health and social problems all over the world. Often the family members of alcoholics suffer intense psychological, physical and social trauma due to the core drinking problem of the family member. The aim of the study was to assess the coping pattern among spouse of alcoholics. This study design was a cross sectional survey. The sample size was 100 persons with alcohol problems. The present study adopted purposive sampling technique and appropriate tools were used to collect the data. The result showed that majority (29.0%) of the respondents were between the age of 36-40 years, 39.0% of the respondents were belonging to 6-10 standard level of education, 39.0% of the respondents were homemaker in their occupational status, and 53.0% of the respondents were in rural domicile background. About 87.0% of the respondents were belonging to family type of nuclear family, 28.0% of the respondent were reported that duration of consume alcohol between 11 to 15 years, 22.0% of the respondent were in 21 to 25 year of living with spouses. Overall results of the burden reveal that majority of the (80.0%) respondents were reported to have moderate burden. The details of the results have been presented in this article below.

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INTRODUCTION

Worldwide there are 3.3 million deaths occurred in every year and 5.9% people are lose their life due to alcohol problems. The addiction of alcohol is a causal issue in more than 200 diseases and it damages the health conditions. The global burden measures that entire 5.1% disease and injury is attributable to alcohol and it as determinate in disability adjustment life years. The risky use of alcohol effects on huge disease and also on social and economic burden in societies. The dangerous use of alcohol can also result in detriment to other people, such as family members, friends, colleagues, stranger and also significant health, social and economic burden on society at large⁽¹⁾. India has second largest population in the world and 30% of its population taking alcohol regularly⁽²⁾.

Alcohol addiction has been one of the major portions to family problem. It emphasizes that facts of the excessive consumption affect not just the drinker but others in the family and it is problem of the family functioning and relationship between family members⁽³⁾. Global plan has specified that

special consideration to be given to additional concern as drinkers such as husband or spouse, child, relatives, friend, neighbor, co-worker, person living in the same household as they may possibly be use of the dangerous drinking it can be affected⁽⁴⁾. There are growing body of literature that there are detrimental effects of alcohol misuse not only for the drinkers themselves, but also for the families⁽⁵⁾.

The families of alcoholics suffer mainly in psychological, physical and social trauma because of the main drinking problem of the family member, it deeply affected are the wives of alcoholics. The problems faced by spouses of alcoholics are physical, psychological, economical and social⁽⁶⁾. Many women worry about their partner's or husband's drinking. The negative effects of alcohol are harmful to themselves as well as to other family members. It puts excessive stress on the partner or wife of an alcohol dependent person. Psychological stress is one of the utmost effects of alcoholism on family. It is more common among family members particularly among spouse of drinkers⁽⁷⁾. Self-blame, irritability, anger outburst, shamefulness, hopelessness and helplessness are all comprehensible emotional replies

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manipulated by somebody involved with a drinker. This type of emotional stress can lead to medical depression. Partner or spouse of a drinker come to be a kind of smaller help for the alcohol follower and they ignoring the whole thing when he is in drinking for that their own emotional and physical needs. It may lead to further abuses which include vocal, emotional, economic abuses encountered by spouse of drinkers in day to day life ⁽⁸⁾.

The family burden of alcoholics is enormous and family members are facing a lot of problems in the society. Study shows that it depends upon the level of education of husband, occupational status of the husband, wives' age at the time of marriage and duration of marriage ⁽¹⁵⁾. Wives of alcoholics are experiencing the burden both subjectively and objectively. Alcohol addiction of the husband leading to burden such as financial burden, disruption of family interaction, and disruption of family daily activities were definitely correlated with high level of consequence ⁽⁹⁾. Wives of both alcohol and heroin dependent patients had moderate-to-high burden of caregiving and perceived more burden in the factors of impact on marital relationship, appreciation of caregiving and impact on relation with others ⁽¹⁰⁾.

MATERIALS AND METHODS

Alcohol dependence is considered as a "family disease". Alcohol dependence affects the individual as well as those around them in terms of occupational and social dysfunctions, physical and emotional distress and financial burden which has a serious impact on the lives of the significant others ⁽¹¹⁾. An earlier opioid dependence by using the Family Burden Interview Schedule showed moderate to severe burden in all the three groups ⁽¹²⁾. Another study assessed the severity of burden in wives of opioid dependence patients and reported severe burden in both objective and subjective scales ⁽¹³⁾.

The aim of the present study was to assess the burden among spouse of alcoholics. The objectives were to find out the socio-demographic details of the spouse of alcoholics and to assess the coping among spouse of alcoholics. This study design was a cross sectional survey. The study population was the spouses of patients who gave informed consent from the in-patient and out-patient departments of department of psychiatry in srm medical college hospital and research centre, kantankulathur, kanchipuram district, Tamilnadu. The sample was drawn by the researcher between November 2017 and January 2018 from the spouses of patients with alcohol use disorders attending general hospital psychiatric unit at srm hospital. The sample size was 100 spouses of alcoholics. The present study was adopted purposive sampling technique for collecting data from the respondents. The inclusion criteria were spouse of alcohol dependent patients; person consumes alcohol more than 2 years, spouse age range of 20 – 45 years and person diagnosed as alcohol dependent syndrome by the treating psychiatrist according to ICD – 10. The exclusion criterias were alcoholics associated with psychiatric illness and mental retardation.

The tools used in this study were socio-demographic data sheet and the Burden Assessment Schedule of Scarf (BASS). It was developed by Thara, Padmavathi, Kumar, and Srinivasan in 1995 ⁽¹⁴⁾. This is a 40-item scale measuring 9 different areas of objective and subjective caregiver burden. Each item is rated on a 3-point scale. The responses are not at all, to some extent, and very much. Some of the items are reverse coded. Scores

range from 40 to 120 with higher scores indicating greater burden i.e. mild burden (0-40), moderate burden (41-80) and severe burden (81-120). This scale has been used widely in India.

After getting approval from the institutional ethical committee of the srm medical college hospital and research centre, the patients with alcohol use disorders who fulfilled the inclusion and exclusion criteria were taken up for the study. A brief introduction and verbal explanation about the purpose and objectives of the research study was given to the respondents individually along with written information, and then written consent was taken from the respondents. The statistical package for social science (SPSS) 23 versions was used for statistical analysis. Descriptive statistics calculated for continuous variable and non-parametric was used for categorical variables. Analysis was done for the collected data and frequency distribution used for socio-demographic sheet and burden scale.

RESULTS

Table 1 Socio-Demographic Characteristics of Spouse of Alcoholics

Sl. No	Socio-demographic characters	Frequency (N=100)	Percentage (100%)
	Age		
1	20 – 25	11	1.0
	26 – 30	20	20.0
	31 – 35	22	22.0
	36 – 40	29	29.0
	41 – 45	28	28.0
	Education		
2	Illiterate	11	11.0
	1 – 5	12	12.0
	6 – 10	39	39.0
	11 -12	18	18.0
	Diploma	7	7.0
	UG and PG	13	13.0
	Occupationstatus		
3	Housewife	39	39.0
	Dailywages Self-employ	20	20.0
	Private employ	7	7.0
	Government employ	27	27.0
	Other	6	6.0
		1	1.0

Table -1 reveals that majority (29.0%) of the respondents were age group was 36 to 40 years, majority (39.0%) of the respondents were studied 6th standard to 10th standard of education level, and occupation status shows that majority (39.0%) of the responds were housewives.

Table 2 Socio-Demographic Characteristics of Spouse of Alcoholics

Sl. No	Social-demographic characters	Frequency (N=100)	Percentage (100%)
	Income		
4	5000 – 10000	14	14.0
	11000– 15000	35	35.0
	16000– 20000	24	24.0
	21000– 25000	11	11.0
	26000– 30000	6	6.0
	31000– 35000	4	4.0
	36000 &above	6	6.0
	Religion	80	80.0
5	Hindu Muslim Christian	4	4.0
		16	16.0
	Domicile background		
6	Rural	53	53.0
	Urban	47	47.0

Table - 2 shows that majority (35%) of the respondents were belonging to family income between 11000 and 15000, then majority (80.0%) of the respondents were belong to Hindu religions, and 53.0% of respondents were in rural domicile background.

Table 3 Socio-Demographic Characteristics of Spouse of Alcoholics

S. No	Social-demographic characters	Frequency (N=100)	Percentage (100%)
Family types			
7	Nuclear Family	87	87.0
	Joint family	7	7.0
	Extended family	6	6.0
Duration of consuming alcohol of patients			
8	0 – 5	5	5.0
	6 – 10	22	22.0
	11 – 15	28	28.0
	16 – 20	24	24.0
	21 – 25	15	15.0
	26 – 30	2	2.0
	31 & above	4	4.0
Year of living with husband			
9	0-5	7	7.0
	6-10	22	22.0
	11 – 15	21	21.0
	16 – 20	17	17.0
	21 – 25	24	24.0
	26 – 30	9	9.0

Table - 3 reveals that majority (87.0%) of the respondents were belonging to nuclear type of family, then majority (28.0%) of the patients consumed alcohol between 11 and 15 years of duration, and majority (24.0%) of the respondents were in 21 years to 25 years of living experience with husband.

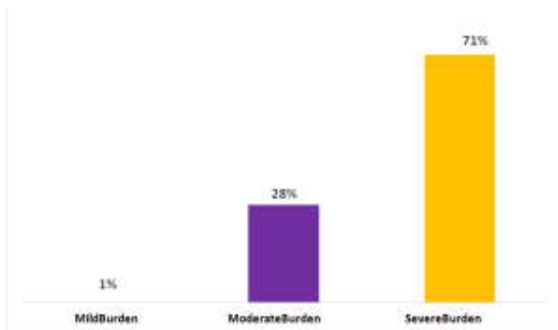


Figure 1 Family Burden Scale - (Physical and Mental Health)

Figure – 1 shows that majority (71%) of the respondents were reported to have severe burden in the domain of physical and mental health, followed by moderate burden (28%) and mild burden (1%).

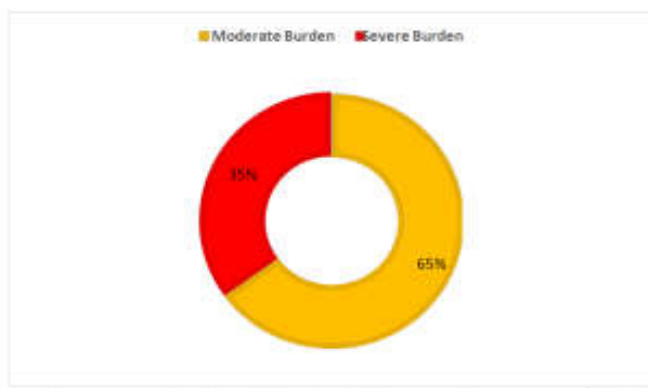


Figure 2 Family Burden Scale - (Support of the Patient)

Figure – 2 reveals that majority (65%) of the respondents were

reported to have moderate burden in the domain of support of patient and followed by severe burden (35%).

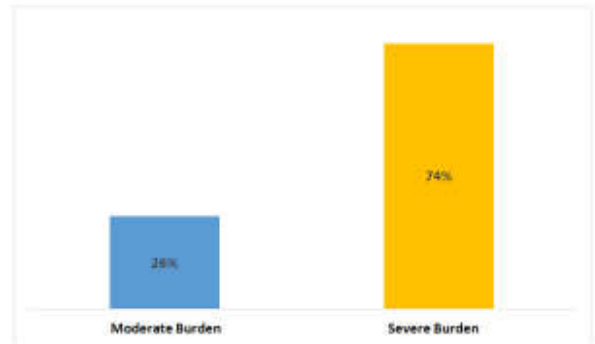


Figure 3 Family Burden Scale - (Taking Responsibility)

Figure – 3 indicates that majority (74%) of the respondents were reported to have severe burden in the domain of taking responsibility and followed by moderate burden (26%).

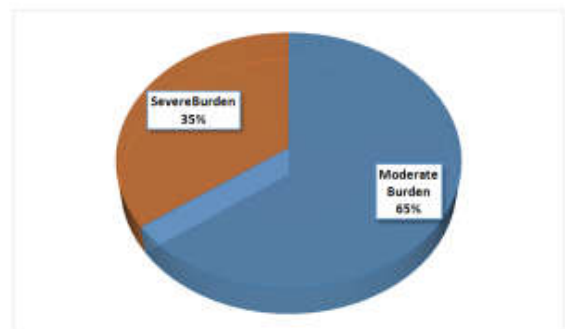


Figure 4 Family Burden Scale - (Other Responsibility)

Figure – 4 reveals that majority (65%) of the respondents were reported to have moderate burden in the domain of other responsibility and followed by severe burden (35%).

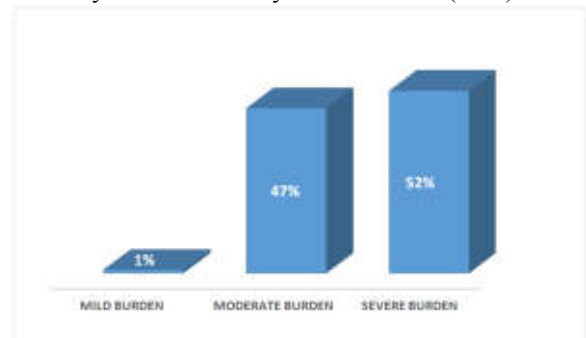


Figure 5 Family Burden Scale - (Caregiver Strategy)

Figure -5 shows that majority (52%) of the respondents were reported to have severe burden in the domain of caregiver strategy, followed by moderate burden (47%) and mild burden (1%).

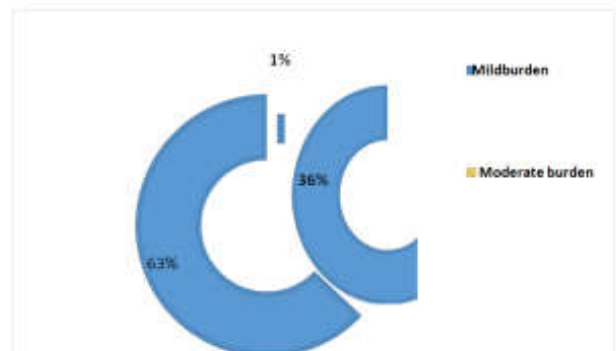


Figure – 6 Family Burden Scale - (Patient's Behaviour)

Figure – 6 reveals that majority (63%) of the respondents were reported to have severe burden in the domain in the caregiver strategy, followed by moderate burden in the domain of patient's behaviour, followed by moderate burden (36%) and mild burden (1%).

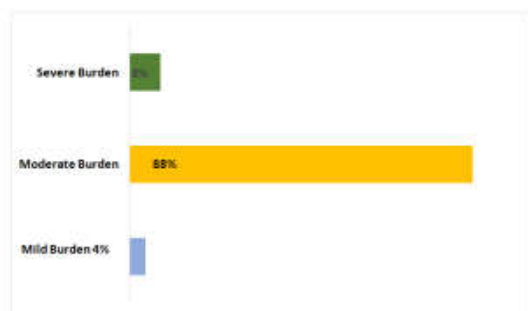


Figure 7 Family Burden Scale - (External Support)

Figure – 7 shows that majority (88%) of the respondents were reported to have moderate burden in the domain of external support, followed by severe burden (8%) and mild burden (4%).

DISCUSSION

The aim of the study was to assess the coping among spouse of alcoholics. The findings of the present study were discussed in detail. The results of the socio-demographic details revealed that the majority of the respondents age ranges from 36 to 40 years, 39% of the respondents studied between 6 and 10 standard, and regarding occupation status of the respondents 39% of wives of alcoholics were home maker. Family income of spouse of alcoholics were Rs.11,000/- to Rs.15,000/- per month, 80% of the respondents were hindus in origin, majority (53%) of the respondents were living in rural area and 87% respondents had nuclear family of family types. The duration of patient's dinking was from 11 to 15 years and living with spouses from 21 years to 25 years. The overall results of the present study on burden of wives of alcoholics similar to the findings reported by ⁽⁹⁾ and ⁽¹⁵⁾ that majority of the wives of alcoholics experienced moderate level of burden and significant associations were found in the husbands' education, occupation of wives and husbands, wives' age at the time of marriage and duration of marriage. The results of the present study are contrast with the research studies ⁽¹⁰⁾. In the present study wives of alcoholics perceived sever burden on physical and mental health, taking responsibility, caregivers' strategy and patient's behaviour where as they perceived more burden on marital relationship, appreciation of caregiving and relations with others. Similarly, the present study is differed from another research study conducted by ⁽¹⁶⁾ where it was found that wives perceived moderate burden on marital distress and marital satisfaction. But in the present study wives felt that moderate burden on support of the patient, other responsibility and external support. Alcohol addiction has been one of the major portions to family problem. It emphasizes that facts of the excessive consumption affect not just the drinker but others in the family and it is problem of the family functioning and relationship between family members over all.

Limitation of the Study

- Sample size of the present study was small for the descriptive research and results of the findings may not be generalized.
- Present study focused on spouses only.
- The present study was a cross sectional survey study and hence the extraneous variable couldn't be controlled.

CONCLUSION

The present study was designed to assess the burden among spouse of alcoholics. The impact of persons with alcohol dependence syndrome is not only on individual, but it also on the family and society at large. The impact especially on spouses is immense. Few studies only focused on perceived burden among wives of alcoholics. The result of the present study shows that majority of wives had moderate burden in the domains overall. Most of them had burden on physical and mental health, taking responsibility, caregiver's strategy and patient's behaviour. The findings of the present study will be useful to plan awareness programme and to develop preventive measures for persons with alcohol dependence syndrome in the community. This study findings also are helpful to plan effective social work intervention strategies for alcohol patients.

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