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A STUDY TO ASSESS THE LEVEL OF STRESS AND COPING STRATEGIES AMONG FAMILY MEMBERS OF PATIENT'S ADMITTED IN ICUS OF SELECTED HOSPITALS, GUWAHATI, ASSAM.

Medical Surgical Nursing

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ABSTRACT

Introduction And Objectives: Stress is an universal phenomenon and condition in which the human system responds to changes in its normal balanced state. All people experience it, stress can have a both positive and negative effect. The study was attempted to assess the level of stress and coping strategies among family members of patients admitted in ICUs of selected hospitals, Guwahati, Assam. **Methods And Materials:** A Descriptive research design was used to accomplish the objectives. Study was undertaken on 116 family members of patients admitted in ICUs of selected hospitals, Guwahati, Assam by using non probability purposive sampling technique. Participants were selected on the basis of inclusion and exclusion criteria. 3 point rating scale was used to assess level of stress and coping strategies. **Results And Analysis:** In level of stress, out of 116 samples majority i.e, 66(57%) of the respondents had mild stress, 38(33%) of the respondents had no stress and 12(10%) had moderate stress. In coping strategies, out of 116 samples majority i.e, 92(79%) of the respondents had adopted average coping strategies, 15(13%) of the respondent had adopted good coping strategies and remaining 9(8%) had poor coping strategies. The mean stress level and coping strategies score were 20.14 and 24.54 respectively. The co-relationship between stress level and coping strategies were 0.119 which was weak positive co relation. There was a significant association of stress level with gender. **Conclusion:** From this study it was concluded that majority of the family members had mild stress and majority of family members had average coping strategies, which means family members were well adopted with coping strategies. So, the investigator concluded that majority of the family members of patients admitted in ICU had mild stress as they had well adopted with coping strategies.

KEYWORDS

level of stress, coping strategies, family members, ICU.

INTRODUCTION:

"Stress is the non-specific response of the body to any kind of demand made up to it"

-Selye(1956)

Stress is an universal phenomenon and condition in which the human system responds to changes in its normal balanced state. According to the cognitive- transactional model of stress, stress is the dynamic relationship between an individual and the environment in which a stimulus disturbs an individual's homeostasis, causing him/ her to respond to the situation with all available resources.[1]

The family is one of the basic units of society and has a great influence on its members. When a family member becomes ill, the illness affects the well-being of other family members, causing changes in the life of the whole family.[2]

As family members are not traditionally allowed into intensive care unit, and hours to visit ICU patients are very limited, families usually undergo high levels of stress when they are not by their patient's side and when they are waiting behind the close doors for more information on their patient.[3]

The admission to an ICU generates a high degree of stress and anxiety to the family. The environment is perceived by them as an aggressive and threatening space because it evidences the risk of the patient dying.[4] Consequently, the ICU environment can trigger behaviors and feelings such a doubt, helplessness, mental disorganization, inability to take action when faced with unexpected decisions, and other reactions, including depression or diseases caused by stress and anxiety.[5]

Every year in United States approximately 20% of all deaths occur in an intensive care unit and family members suffer from being withdrawn or withheld. Many of patients are unable to communicate because of sedation, mechanical ventilation, confusion, and comatose. This results in much of the burden of decision making and treatment choices on the patients' family members. This type of experience may adversely affect family members by increasing their stress levels and increasing risk for psychological and physical symptoms.[6]

Objectives:

1. To assess the level of stress among family members of patient admitted in ICUs
2. To assess the coping strategies adopted by family members of patient admitted in ICUs
3. To find out the co-relation between stress level and coping strategies among family members of patients admitted in ICUs.
4. To find out the association between the stress level among family members of patient admitted in ICU with selected demographic variables.

METHODS AND MATERIALS:

An ethical clearance has been obtained from the institutional ethical committee. A descriptive research design was used to assess the level of stress and coping strategies among family members of patients admitted in ICUs of selected hospitals, Guwahati, Assam. The study was conducted on selected hospitals of Guwahati which are Health City Hospital, GNRC, GMCH. A sample of 116 family members was selected by using non probability purposive sampling technique. Level of stress and coping strategies was assessed by using 3 point rating scale.

RESULTS AND DISCUSSION:

The data gathered were analysed by using descriptive and inferential statistics in order to assess the level of stress and coping strategies adopted by the family members. Karl's pearson correlation co-efficient was computed to find out the co-relation between stress level and coping strategies among family members of patients admitted in ICUs. Chi square was computed to find association between the stress level among family members of patient admitted in ICU with selected demographic variables.

Frequency And Percentage Distribution Of Demographic Variables Of The Family Members Of Patient Admitted In ICU:

Findings of study showed out of 116 family members, 43 (37%) of the family members belongs to 25-34yrs of age, 78 (67%) of the family members were male, 71 (61.2%) of the respondents were married, 41 (35.4%) of the respondents were graduate, 35 (30.2%) of the respondents were businessmen, 30 (26%) of the respondents have income of 20,000-29,000, 30 (26%) of the respondents have income of 30,000-39,000, 55 (47.4%) of the respondents were nuclear families, 62 (53%) of the respondents were parents.

Frequency And Percentage Distribution Of Respondents According To Their Health Related Information:

Findings of study showed out of 116 family members, 79 (68%) of the respondents did not received health related information before coming to the hospital, 13 (35%) of the respondents had received health related information from friend, 38(33%) of respondent's patient had suffered from cardiac disorder, 83(72%) of the respondent's patients

duration of illness is < 1 month, 55 (48%) of the respondent's patient's duration of hospital stay is between 1-5 days, 48 (41%) of the respondent's patient's do not have previous history of hospital stay, 60(52%) of the respondent's condition of client is improving, 47 (40%) of the respondent's condition of client is stable, 70 (60%) of the families reside in the rural area and 46(40%) of the families reside in the urban area, 55 (47%) of the respondents used public transport, 40 (35%) of the respondents used private transport to hospital, 61 (53%) of the respondent's distance from home to hospital is >30 km, 100 (86%) of the respondent's patient's support system were family members.

Frequency And Percentage Of Family Members According To Their Stress Level: N=116

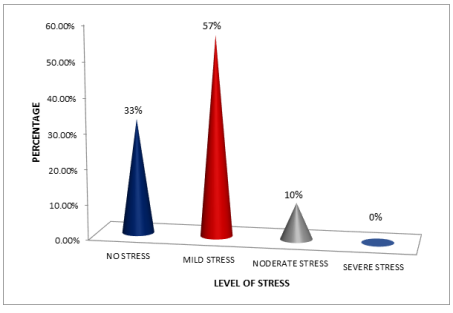

Fig 1 – Graph showing percentage distribution of stress level of family members.

Data presented in the figure showed that among 116 family members, majority i.e 66(57%) family members had mild stress, 38(33%) had no stress and 12(10%) had moderate stress and 0% had severe stress.

Frequency And Percentage Of Family Members According To Their Coping Strategies: n=116

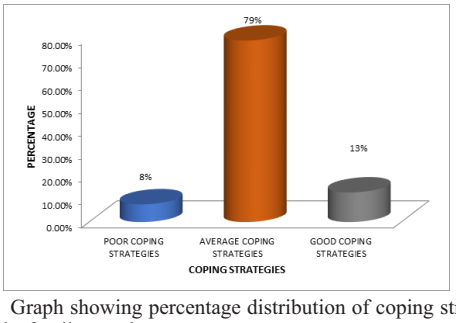

Fig 2 – Graph showing percentage distribution of coping strategies adopted by family members.

Data presented in the figure showed that among 116 family members, majority i.e, 92(79%) had average coping strategies, 15(13%) had good coping strategies and 9(8%) had poor coping strategies.

Table-I Karl's Pearson Correlation Between Stress Level And Coping Strategies Among Family Members:

VARIABLE	MEAN	SD	CORRELATION COEFFICIENT	LEVEL OF SIGNIFICANCE
Stress	20.14	4.24	0.119	0.05
Coping strategies	24.54	6.54		

Table-I shows the correlation between stress level and coping strategies among family members of patients. The correlation was statistically calculated using karl's pearson correlation co-efficient. The calculated r' value was found to be, r'=0.119

Therefore, there is weak positive correlation between stress level and coping strategies among family members of patients admitted in ICUs. Thus, with stress family members have adopted coping strategies.

TABLE-II Association Of Stress Level With The Selected Demographic Variables:

Variables	Stress score less than median	Stress score more than median	Frequency (f)	df	Calculated χ^2 Value	Tabled χ^2 Value	Remarks
Age: I) ≤34 years	19	42	61	1	1.42	3.84	NS*
ii) ≥ 35 years	19	36	55				
TOTAL	38	78	116				
Gender: I) Male	33	45	78	1	10.30	3.84	S**
ii) Female	5	33	38				
TOTAL	38	78	116				
Marital Status: i)Married	25	46	71	1	.083	3.84	NS*
ii) Unmarried and others	13	27	40				
TOTAL	38	73	116				
Educational Level : I) Primary& middle school	5	13	18	2	.288	5.99	NS*
ii) High & H.S	16	30	46				
iii) Graduate & post graduate	17	35	52				
TOTAL	38	88	116				
Occupation : I) House wife &unemployed	5	24	29	2	4.32	5.99	NS*
ii) Student & daily labour	7	13	20				
iii.) Service, business & professionals	26	41	67				
TOTAL	38	88	116				
Family monthly income: i)<20,000 &20,000 – 29,000	13	33	46	2	1.42	5.99	NS*
ii) 30,000-49,000	13	28	41				
ii) >49,000	12	17	29				
TOTAL	38	78	116				
Type of family : I) Nuclear	19	36	55	2	.902	5.99	NS*
ii) Joint	14	35	49				
iii) Extended & single parent	5	7	12				
TOTAL	38	78	116				
Relationship with patient I) Spouse	5	12	17	3	.453	7.81	NS*
ii) Parents	21	41	62				
iii) Siblings	7	17	24				
iv) Children	5	8	13				
TOTAL	38	78	116				

Table-II shows that, there is a significant association between the level of stress and gender of the respondents at 0.05 level of significance.

CONCLUSION:

The Following Conclusions Were Drawn From The Present Study:

Out of 116 samples, majority i.e 66(57%) family members had mild stress, The overall mean was 20.14 and standard deviation was 4.24. Majority 92(79%) had average coping strategies, the mean was 24.54 and standard deviation was 6.54 .

The calculated coefficient correlation value was 0.119, which shows a positive correlation between stress level and coping strategies. This revealed that with stress family members have adopted coping strategies. There was a significant association of stress level with gender.

Thus, this study concluded that majority of family members have mild stress because they have well adopted coping strategies with stress.

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