

“A STUDY TO ASSESS THE LEVEL OF STRESS AND COPING STRATEGIES ADOPTED BY THE FAMILY MEMBERS OF PATIENTS ADMITTED IN ICU AT ADESH HOSPITAL, BATHINDA, PUNJAB.”

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Abstract

The admission to an ICU generates a high degree of stress and anxiety to the family because the environment is perceived by them as an aggressive and threatening space as it evidences the risk of the patient's dying. Consequently, the ICU environment can trigger behaviors and feelings such as 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. ¹Aim of the study is to assess the level of stress and the coping strategies adopted by the family members of patients admitted in ICU of selected hospital. In the present study quantitative research approach and Descriptive research design was used. The subjects were selected by Convenience Sampling Technique. 100 family members of patients admitted in ICU of Adesh Hospital, Bathinda were participated in the study. The data was collected by using *structured Interview questionnaire* and *Brief cope scale* on the 2nd day of admission of patients in ICU by scheduled interview method. Major *findings* of the study revealed that majority of subjects i.e. 77 (77.0%) had moderate level of stress whilst 13 (13.0%) had severe stress and only 10 subjects i.e. 10.0% had mild level of stress. In relation to coping strategies adopted by relatives of patients admitted in ICU the majority of subjects i.e. 84 (84.0%) had moderate level of coping while 9 (9.0%) had poor level of coping, and very few subjects that is only 7 (7.0%) had good level of coping. The variety of socio demographic variable were included in the present study, which were including Age of Respondent, Gender, Educational status, Marital status, Residence, Occupation, Type of family, Income per annum, Length of stay in hospital, Previous history of Exposure to hospitalization of Relative. In present study association of variable was evaluated by using chi square and it had revealed that only coping strategies are associated with occupation (P= .032) at the level of 0.05. So there is no significance found between level of stress with socio demographic variables.

Keywords: Stress, coping strategies, family members, ICU.

INTRODUCTION

It starts with the shock when someone we love is sick enough to be here. The sight of the individuals parent, partner or child under harsh lights, possibly bandaged and bruised, attached to tubes, drains, IV lines, even a ventilator. The unfamiliar sounds of beeps, buzzes and emotional outbursts from nearby rooms mixed with rare periods of somber silence. Fast-moving staff in a blur of stethoscopes, scrubs and rapid-fire exchanges of incomprehensible medical terminology. It's none other than the Intensive Care Unit.²

The intensive care unit (ICU) is an environment inducing mental strain among conscious patients and their families. Family members of patients treated in ICUs are at higher risk of developing depressive, anxiety and stress-related disorders. After the patient's death, an estimated one in three bereaved family members meets the criteria of at least one of the following

psychiatric disorders: depression, anxiety or complicated grief. Relatives of ICU patients are also at risk of developing acute stress syndrome and posttraumatic stress disorder.³

The intensive care unit (ICU) is formed by a set of functionally grouped elements, intended to care for critically ill patients who require uninterrupted medical and nursing care, in addition to specialized human resources and equipment. Due to the intensive nature of this type of care, admission to an ICU is a stressful event, both for the patient and for his or her family, causing both physical and mental stress⁴

OBJECTIVES :

1. To assess the level of stress experienced by the family members of patients admitted in ICU .

2. To identify the coping strategies adopted by the family members of patients admitted in ICU .

3.To find the association between the level of stress and coping strategies among family members of patients admitted in ICU.

4. To find the association between level of stress with the selected socio-demographic variables among family members of patients admitted in ICU.

5. To find the association between coping strategies with the selected socio demographic variables among family members of patients admitted in ICU.

MATERIALS AND METHODS

The research approach adopted for the study was non-experimental with descriptive design. The present study was conducted on hundred family members to assess the level of stress and coping strategies adopted by the family members of patients admitted in ICU at Adesh hospital, Bathinda. The subjects were selected by using convenience sampling technique. The tool developed and used for data collection was structured Interview schedule. **Section I:** It comprised of items seeking information pertaining to sample characteristics (Age of Respondent, Gender, Educational status, Marital status, Residence, Occupation, Type of family, Income per annum, Length of stay in hospital, Previous history of Exposure to hospitalization of Relative. **Section II:** It comprised of 38 items structured interview questionnaire to assess the level of stress perceived by the family members of patients admitted in ICU. **Section III :**It comprises of 28 items *Brief cope scale* to assess the coping strategies adopted by the family members of patients admitted in ICU.

The tool was submitted to the five experts for validation.Suggestions given by experts were duly made and final draft was prepared.

RESULTS

Table 1: Frequency and percentage distribution of socio-demographic variables of family member in ICU.

N= 100

Sno.	Subject characteristics	f	Percentage
1.	Age		
	20-34years	34	34.0
	35-49years	30	30.0
	50-64years	24	24.0
	65-80 years	12	12.0

2.	Gender		
	Male	52	52.0
	Female	48	48.0
3.	Educational status		
	No formal education		
	Higher secondary	63	63.0
	Graduate	22	22.0
	Post graduate	8	8.0
		7	7.0
4.	Marital status		
	Married		
	Un- Married	84	84.0
	Widow/ widower	15	15.0
		1	1.0
5.	Residential status		
	Rural		
	Urban	70	70.0
		30	30.0
6.	Occupation status		
	Self employee		
	Housewife	35	35.0
	Government job	29	29.0
	Private job	6	6.0
	Unemployed	19	19.0
		11	11.0
7.	Type of family		
	Nuclear	34	34.0
	Joint	66	66.0
8.	Family annual income (in Lakhs)		
	0.5-2		
	2-3.5	47	47.0
	3.5-4	41	41.0
	≥5	5	5.0
		7	7.
9.	Length of stay in hospital		
	<1 week		
	≥1 week	70	70.0
		30	30.0
10.	Previous history of Exposure to hospitalization of Relative.		
	Yes		
	No	43	43.0
		57	57.0

SECTION-II: Finding related to level of Stress experienced by family members in ICU.

N=100

Level of stress	f	Percentage (%)
Mild	10	10
Moderate	77	77
Severe	13	13

SECTION-III: Finding related to level of coping strategies adopted by family members in ICU.

N=100

Coping strategies	Number	Percentage
Poor	9	9
Moderate	84	84
Good	7	7

SECTION-IV: Findings related to comparison of the level of stress and coping strategies among family members in ICU.

N=100

Parameters	N	Mean	Standard Deviation	Coefficient of Correlation (r)	P Value
Stress Level	100	66.53	10.62	0.049	0.628 (NS)
Coping Methods	100	67.21	7.45		

DISCUSSION

First objective was to assess the level of stress experienced by the family members of patients admitted in ICU of selected hospitals.

According to stress scale, 10 (10%) were <55.91 this is under mild category, 77 (77%) were 60 -77.5 this under moderate category, 13(13%) were >77.5 this is under severe category. These study findings were consistent with the findings of (Waghmare JM, et al. 2017). The majority of spouses of ICU patients experienced had moderate stress (score 57-88) and 2%

of them had severe stress (score 89-120). Average coping (score 66 – 103) 6% of them had poor coping (score 28 -65).

Second objective was to identify the coping strategies adopted by the family members of patients admitted in ICU of selected hospitals.

In relation to coping strategies adopted, 9(9%) of the respondents had a score <59.76. This indicated that they had a poor coping strategy. 84(84%) respondents had a score between 38-74.65 indicating that they had moderate ability to cope, 7 (7%) respondents who had a score of <75 indicated that they had good coping ability. These study findings were consistent with the findings of (Antony ad, et al. 2019)) The study results revealed that majority of them (30%) had moderate level of stress, 22% had mild and severe level of stress, 17% had normal level of stress and 9% had extremely severe level of stress. Majority of the caregivers (52%) had average coping. The study also revealed that stress score and coping score were dependent of selected demographic variables

Third objective was to find the association between the level of stress and coping strategies among family members of patients admitted in ICU.

The overall mean for level of stress and coping strategies among family members of patients was 66.53 and 67.21 with standard deviation of 10.62 and 7.45. These study findings were consistent with the findings of (Shinde ND, et al. 2019) A Descriptive study was conducted to assess the level of stress among and coping strategies parents of neonates and to co-relate stress and coping strategies among parents of neonate. 28(70%) majority of mothers had moderate stress and 12 (30%) had severe stress. While assessing the stress level of mothers in neonates. While 35 (87.50%) mothers of neonates were in average coping and 5(12.5%) were in good coping. The main outcome of the study that mother always in stress because of babies admission in NICU.

In present study association of variable was evaluated by using chi square and it had revealed that only coping strategies are associated with occupation (P= .032) at the level of 0.05.

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ETHICAL CONSIDERATION Ethical approval to conduct the study was obtained from Institutional Ethical Committee of adesh University, Bathinda. Written informed

consent was obtained from the study subjects regarding their willingness to participate in the research project.

CONFLICT OF INTEREST:-

There is no conflict of interest.

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