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Research Article

**BURNOUT AMONG HOME CAREGIVERS  
OF PSYCHIATRIC PATIENTS**Darya Khan Laghari<sup>1</sup>, Kazi Humayun Rashid<sup>2</sup>, Hassaan Shaikh<sup>3</sup>

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**Abstract:**

**Background:** Care of psychiatric patients is a testing job and with the lack of expert care facilities in the resource stricken developing world, the task is left for the families and homes of the patients to perform. The home caregivers of individuals suffering from psychiatric illness are thus at a constant risk of being subjected to mental health consequences such as burnout.

**Objective:** To determine the incidence of burnout among home caregivers of psychiatric patients presenting to the study setting.

**Methodology:** This observational – cross-sectional analysis was conducted upon a sample of 400 home-caregivers accompanying their patients for regular outpatient department visits at Sir Cowasjee Jehnagir Institute of Psychiatry & the Dept. of Psychiatry – Liaquat University of Medical & Health Sciences, Jamshoro from January 2018 to June 2019. No gender or age bias was observed. Basic bio-data, brief details of the sociodemographic background of the patients and caregivers long with disease particulars of the patients were obtained and recorded onto a structured questionnaire. Maslach Burnout Inventory was used to look for burnout. The data obtained was analyzed using SPSS v.22 & Microsoft Excel 360.

**Results:** Among, the 400 home caregivers of psychiatric patients interviewed, 29% were females while the remaining 71% were males. The mean age of the sample stood at 41 (SD ± 8). The incidence burnout among the respondents was noted to be 58%. Burnout was more common among caregivers of patients that were socioeconomically poor, at extremes of age and belonged to the female gender. Severity of psychiatric illness too correlated with greater probability of burnout.

**Conclusion:** After careful consideration, it can be concluded that burnout among home caregivers of psychiatric patients is widespread and a real threat to not just the wellbeing and sanity of the caregivers but the patients as well since burnout impairs the caregivers ability to cater to the needs of the highly dependent and vulnerable psychiatric patients.

**Keywords:** Psychiatric Illness, Home Caregiver, Burnout, Gender, Age.

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**INTRODUCTION:**

Among medical diseases, psychiatric disorders have a high prevalence and are a significant burden. According to the most recent meta-analysis, the average prevalence of mental disorders in the world is 13.4%, [1] and 30–50% of psychiatric patients experience relapse of symptoms in the first 6 months and 50–70% in the first 5 years after discharge from the hospital. [2-4]

Due to de-institutionalization of the treatment and care of, the role of family caregivers of these patients is important in reducing the number of hospital admissions. [5] Family caregivers of psychiatric patients while being able to manage and control the patient and their disease play a vital role in maintenance and rehabilitation of patients. [6]

Thus, family caregivers of psychiatric patients suffer great pressure physically, mentally, and socially in the course of care and control of the sick members of the family. [7, 8] In fact, patients and their families are constantly affected by the changes resulting from the disease and its treatment. These changes gradually reduce the levels of performance and the ability of family members, destruction of emotional system and communication structures of family, ineffective relationships among members, emergence of financial and economic problems, reduced social interactions of the family, changes in roles, reduced life expectancy, and emergence of symptoms such as anger, feeling guilty, grief, and even denial. [9, 10]

Overall, mental burden of care for a psychiatric patient while reducing the quality of life of caregivers can jeopardize their physical and mental health, and ultimately lead to poor care, leaving the treatment, or violent behavior with patients and these problems can exacerbate disorder in patients. [5, 11]

Thus, if caregivers are left without adequate social support, they can also be considered as hidden patients. [12] Studies show that the status of caregivers

of patients with mental disorders has been neglected in some countries. Although some of the needs and challenges for caregivers and family members of patients may be common with the patients, they have unique needs with many uncertainties. [13]

On the other hand, many doctors and health care workers, particularly psychiatric nurses, often focus their care more on the patient and ignore the family and main caregivers of the patient. These doctors and nurses exclude them from the disease, treatment, and decision-making processes and do not consider their needs; hence, families do not have a chance to express their concerns and needs and are at a risk of serious problems. [14]

By identifying the problems and challenges of the caregivers of the patients, effective strategies can be devised to counter the situation. This research thus hoped to determine the incidence of burnout among home caregivers of psychiatric patients presenting to the study setting.

**METHODOLOGY:**

This observational – cross-sectional analysis was conducted upon a sample of 400 home-caregivers accompanying their patients for regular outpatient department visits at Sir Cowasjee Jehangir Institute of Psychiatry & the Dept. of Psychiatry – Liaquat University of Medical & Health Sciences, Jamshoro from January 2018 to June 2019. No gender or age bias was observed. Basic bio-data, brief details of the sociodemographic background of the patients and caregivers long with disease particulars of the patients were obtained and recorded onto a structured questionnaire. Maslach Burnout Inventory was used to look for burnout. The data obtained was analyzed using SPSS v.22 & Microsoft Excel 360.

**RESULTS:**

Among, the 400 home caregivers of psychiatric patients interviewed, 29% were females while the remaining 71% were males. The mean age of the sample stood at 41 (SD ± 8).

Age Group	Females	Males
Up to 20 years	11	42
21 to 30 years	14	59
31 to 40 years	43	64
41 to 50 years	31	83
51 years or more	17	36

The incidence burnout among the respondents was noted to be 58%. Burnout was more common among caregivers of patients that were socioeconomically poor, at extremes of age and belonged to the female gender. Severity of psychiatric illness too correlated with greater probability of burnout.

Burnout	Gender		Socioeconomic Status			Age (years)		
	Male	Female	Low	Middle	High	≤ 20	31 - 50	≥ 51
Present	143	89	142	61	29	44	141	47
Absent	141	27	74	51	43	09	153	06

### DISCUSSION:

In our study we investigated the burnout in caregivers of psychiatric patients. We tried to determine the possible relationships between sociodemographic characteristics, symptomatology, and the burnout profile of the caregivers. While many different measures are utilized in burnout research, we could compare our results with the studies that used the MBI. The burnout scores of the caregivers in our study were higher than some other studies' scores as assessed by MBI. [15]

In one of them, 133 caregivers of patients with mental illnesses from a 2-year intervention program were evaluated. It included 94 caregivers of depressive patients. Depression in patients also causes burnout in caregivers, and the risk rises if the depression is challenging and resistant to treatment. Long term depression may disrupt the social interactions of patients and caregivers seriously. [16]

However, it is not as disruptive for caregivers during the remission periods, in contrast with schizophrenia. The core symptoms of schizophrenia remain constant in many cases, which prevents caregivers from relaxing for a while. It is the major difference between the caregivers of patients with schizophrenia and patients with depression regarding burnout and it supports our stance that more severe diseases bring about greater deal of burnout. [17]

In a previous study, burnout in 103 caregivers of patients with cancer and 88 caregivers of patients with multiple sclerosis was measured by MBI. As is well known, cancer is a wide group of diseases and its prognosis depends on the kind of cancer and the treatment given. Multiple sclerosis is a neurologic disease that damages the white matter of the brain and spinal cord. A wide variety of symptoms may be seen during the illness and multiple sclerosis usually presents with relapses and remissions. We compared the burnout scores of our study with other research. The interesting finding of comparison between the studies was the higher exhaustion but lower depersonalization scores in the caregivers of psychiatric patients. [18]

Psychiatric illness cause more disability in many social functions than cancer and multiple sclerosis. A state of complete well-being may be achieved during remission periods of these physical illnesses, while many executive function impairments remain in severe psychiatric illness. Therefore, higher emotional exhaustion in the caregivers of psychiatric patients was an expected outcome, in our opinion. [19]

Another concept of burnout measured by the MBI is personal accomplishment. In this study it was associated with higher family income, higher education level, living in a larger family (4 members or more), and marital status. Sociodemographic characteristics were found to influence the personal accomplishment scale much more within the 3 subscales. Accomplishment may be a more constant dimension of burnout in caregivers of patients with psychiatric illness. This finding should be supported with other studies. [20]

Younger caregivers usually feel more despair in the face of illness. The burnout scores of the female and male caregivers did differ significantly in our study. The effect of sex on burnout dimensions however is controversial. While some authors suggest that women are more prone to burnout, others suppose the opposite. [21, 22]

### CONCLUSION:

After careful consideration, it can be concluded that burnout among home caregivers of psychiatric patients is widespread and a real threat to not just the wellbeing and sanity of the caregivers but the patients as well since burnout impairs the caregivers ability to cater to the needs of the highly dependent and vulnerable psychiatric patients.

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