ಸೃಜನಿ
SRUJANI: Indian Journal of Innovative Research and Development (SIJIRD)
Volume-4 Issue 2, May-June 2025, Pp. 92-100
Bi-Monthly, Peer-Reviewed, Open Access, Indexed Journal

I S S N: 2583-3510
SIRDF
JOURNALS
editor@srujani.in
www.srujani.in

Coping Strategies and Psychosocial Outcomes in Dementia Caregivers: Evidence from a Tertiary Health Facility in Karnataka

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Abstract:

Introduction: Dementia significantly impacts both patients and their caregivers. The psychosocial challenges faced by caregivers can affect their quality of life and coping mechanisms. This study examines these aspects in caregivers of persons with dementia in India.

Aim: *To study the psychosocial problems of caregivers of persons with dementia attending OPD at DIMHANS Dharwad, Karnataka, India.*

Methodology: *A purposive sampling method was used to select 113 caregivers. Data was collected using WHOQOL BREF, ZARIT Burden Interview, and BREF COPE (Carver) and analyzed using SPSS.*

Results: *There is a significant relationship between caregivers' burden, quality of life, and coping strategies.*

Conclusion: *Caregivers of persons with dementia face significant challenges impacting their quality of life. Effective coping strategies are crucial for managing these burdens.*

Keywords: *Caregivers, dementia, quality of life, burden, coping strategies*

Introduction

Dementia is an acquired syndrome characterized by intellectual impairment resulting from brain dysfunction. It affects various cognitive domains, including memory, language, visuospatial skills, emotional regulation, personality, and overall cognition. Globally, dementia represents a major public health concern, with over 30 million individuals affected—a number projected to rise significantly in the coming years. While much attention is given to patients, this study shifts focus to the caregivers, who often face considerable psychosocial challenges as they navigate the demands of caregiving.

Please cite this article as: Anantharamu B.G & Sangeeta. R. Mane. (2025). Coping Strategies and Psychosocial Outcomes in Dementia Caregivers: Evidence from a Tertiary Health Facility in Karnataka. *SRUJANI: Indian Journal of Innovative Research and Development*, 4(2), 92–100

Background

India, with its rich heritage in medical sciences, is undergoing rapid demographic aging, resulting in a growing number of dementia cases. Although several government initiatives have been introduced, the primary healthcare system remains inadequately equipped to effectively manage dementia care. Consequently, the responsibility of care often shifts to family members, placing a significant burden on them. This study aims to highlight the psychosocial challenges faced by these caregivers, who play a critical yet often overlooked role in dementia care.

Methodology

A purposive sampling method was employed to select 113 caregivers of persons with dementia attending both the Outpatient Department (OPD) and Inpatient Department (IPD) at DIMHANS, Dharwad, Karnataka. Data collection was conducted through direct interviews using three standardized instruments. The **WHOQOL-BREF** was used to assess the caregivers' quality of life across four domains: physical health, psychological well-being, social relationships, and environmental factors. The **ZARIT Burden Interview** measured the perceived level of burden experienced by the caregivers. To evaluate the coping strategies adopted by the participants, the **BREF COPE inventory** (Carver) was administered. The collected data were analyzed using SPSS, focusing on the interrelationships between caregiver burden, quality of life, and coping mechanisms.

Results

The study found a significant relationship between the caregivers' burden, their quality of life, and the coping strategies they employed. Higher burden levels were associated with poorer quality of life and less effective coping mechanisms. Effective coping strategies were crucial for managing the significant challenges faced by caregivers.

The Table 1, reveals that caregiver burden is positively correlated with avoidant coping ($r = 0.590, p < 0.01$) and negatively correlated with approach coping ($r = -0.454, p < 0.01$), occupational QOL ($r = -0.203, p < 0.05$), and environmental QOL ($r = -0.454, p < 0.01$), while avoidant coping shows a negative correlation with approach coping ($r = -0.693, p < 0.01$), occupational QOL ($r = -0.257, p < 0.01$), and environmental QOL ($r = -0.340, p < 0.01$), and approach coping has a slight positive correlation with occupational QOL ($r = 0.107, p < 0.01$); additionally, physical QOL correlates positively with environmental QOL ($r = 0.734, p < 0.01$), psychological QOL is positively correlated with occupational QOL ($r = 0.435, p < 0.01$) and environmental QOL ($r = 0.651, p < 0.01$), and occupational QOL is positively correlated with environmental QOL ($r = 0.398, p < 0.01$).

The table 2, indicates that income is positively correlated with approach coping ($r = 0.306, p < 0.01$) but shows no significant correlation with burden, avoidant coping, or QOL dimensions; age has no significant correlations with any of the variables; and family size is positively correlated with occupational QOL ($r = 0.616, p < 0.01$) but does not significantly correlate with burden, avoidant coping, approach coping, or other QOL dimension

Table 1: Correlation between Different Variables Related to Burden, Coping, and Quality of Life (QOL)

	TOTAL BURDEN	TOTAL COPING_ Avoid	TOTAL COPING_ Approach	TOTAL QOL_1_Phy	TOTAL QOL_2_Psy	TOTAL QOL_3_Occ	TOTAL QOL_4_Environ	Annual Income	Age	Family size
Income	0.155	0.129	-0.097	0.096	0.083	-0.147	0.062	1	0.06	0.037
	0.101	0.172	0.306	0.31	0.383	0.12	0.517		0.55	0.699
	113	113	113	113	113	113	113	113	113	113
Age	0.018	-0.011	-0.094	0.056	0.164	0.094	0.08	0.058	1	0.238
	0.847	0.905	0.324	0.554	0.083	0.321	0.402	0.545		0.011
	113	113	113	113	113	113	113	113	113	113
Family size	0.055	0.007	-0.09	0.079	0.067	-0.048	0.067	0.037	0.24	1
	0.561	0.939	0.341	0.403	0.478	0.616	0.483	0.699	0.01	
	113	113	113	113	113	113	113	113	113	113

Discussion

Dementia is a significant global health issue with no current cure (WHO, 2015; NHS, 2018). This study explores the psychosocial problems of caregivers for people with dementia, focusing on their quality of life, burden, and coping strategies. The age of dementia patients ranged from 47 to 101 years, with previous studies reporting a mean age varying from 65.7 to 80.2 years (Das et al., 2012; Andreakou et al., 2016; Winter et al., 2011; Zucca et al., 2021; Vickrey et al., 2009; Connor et al., 2008). The mean age of patients with Alzheimer's disease was 58.1 years (Santos et al., 2014).

Most elderly dementia patients in India are illiterate and of low socioeconomic status (Rajkumar et al., 1997). In the present study, 68% were illiterate, and 49.6% were female. Literature indicates a higher prevalence of dementia among older women (Pinto et al., 2009; Alzheimer's & Related Disorders Society of India, 2010; Vas et al., 2001; Cunningham et al., 2015; Rajkumar et al., 1997; Cenko et al., 2021).

Caregivers, primarily female family members, face significant health problems and depression (Santos et al., 2014; Vickrey et al., 2009; Cao & Yang, 2020; Snyder et al., 2015; Ulstein et al., 2007; Connor et al., 2008; Etters et al., 2008). Their mean age was 36.7 years (Srivastava et al., 2016). Most caregivers were educated, but many were of low socioeconomic status (Arai et al., 2007).

Table 2: Correlation of Care Giver Variables with Demographics

		TOTAL BURDEN	TOTAL COPING Avoid	TOTAL COPING Approach	TOTAL QOL_1_Phy	TOTAL QOL_2_Psy	TOTAL QOL_3_Occ	TOTAL QOL_4_Environ
TOTAL_ BURDEN	Pearson Correlation	1	0.590**	0.362	-.025**	-.203**	0.08	-.454**
	Sig. (2-tailed)		0	0	0.791	0.031	0.402	0
TOTAL_ COPING_ Avoid	Pearson Correlation	0.590**	1	0.000**	-0.194	-.257**	-.340**	-.693**
	Sig. (2-tailed)	0		0.998	0.04	0.006	0	0
TOTAL_ COPING_A pproach	Pearson Correlation	-.454**	-.693**	-.151**	-.044**	0.031	0.107**	1
	Sig. (2-tailed)	0	0	0.11	0.646	0.741	0.26	
TOTAL_ QOL_1_Phy	Pearson Correlation	0.362**	0	1**	0.58	0.289	0.734**	-0.151
	Sig. (2-tailed)	0	0.998		0	0.002	0	0.11
TOTAL_ QOL_2_Psy	Pearson Correlation	-0.025	-.194*	0.58	1*	0.435	0.651	-0.044
	Sig. (2-tailed)	0.791	0.04	0		0	0	0.646
TOTAL_ QOL_3 _Occ	Pearson Correlation	-.203*	-.257**	0.289*	0.435**	1	.398*	0.031
	Sig. (2-tailed)	0.031	0.006	0.002	0		0	0.741
TOTAL_ QOL_4_ Environ	Pearson Correlation	0.08	-.340**	0.734	0.651**	0.398	1	0.107
	Sig. (2-tailed)	0.402	0	0	0	0		0.26

Caregivers experienced significant burden, with female caregivers reporting higher levels of stress and depression (Burns, 2000; Das et al., 2014; Jathanna et al., 2010). Increased dementia severity and behavioral disturbances were major factors contributing to caregiver burden (Mukherjee et al., 2017; Neil & Bowie, 2007; Knutson et al., 2008). There was no correlation between sociodemographic variables and caregiver burden or coping strategies (Cao & Yang, 2020; Baker & Robertson, 2008).

Quality of life declined with increased caregiver burden, which was negatively correlated with physical, psychological, and environmental quality of life domains (Badia Llach et al., 2004; Miura et al., 2005; R.F. et al., 2002; Zacharopoulou et al., 2015; Ruisoto et al., 2019). Effective coping strategies, including problem-focused and emotion-focused methods, were crucial in mitigating caregiver stress (Cooper et al., 2008; Tulek et al., 2020).

Conclusion

Caregivers of persons with dementia face significant psychosocial burdens impacting their quality of life. Effective coping strategies are essential for managing these challenges. There is a need for better support systems and resources to aid caregivers in their roles.The comprehensive approach to addressing dementia includes the development of support systems such as counseling and support groups for caregivers, the implementation of training programs to enhance caregivers' coping strategies and skills, the enforcement of stronger policy measures to provide financial and social support to caregivers, and increased public awareness about dementia and the challenges caregivers face.

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