

Research Article

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A Comparative Study on Perceived Stress among Patients with Chronic Mental Illness, Caregivers of the Patients, and Normal Control

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1. Introduction

Chronic mental illness refers to persistent mental health conditions that typically last for an extended period, often for a year or longer, and can significantly impact an individual's daily functioning, well-being, and overall quality of life. Unlike acute conditions that may have a more temporary and episodic nature, chronic mental illnesses require ongoing management, treatment, and support. Chronic mental illness can have a wide range of consequences, affecting various aspects of an individual's life. The impact can be profound, not only on the person directly experiencing the mental illness but also on their relationships, work, and overall quality of life. Perceived stress is one of the most frequently reported in persons with chronic mental illness. Therefore, we compared the degree of perceived stress in patients, caregivers, and normal controls.

2. Materials and Methods

2.1 Design

This study was cross-sectional and aimed to examine the perceived stress of persons with chronic mental illness, their caregivers, and normal controls. This study was conducted in Phulo-Jhano Medical College and Hospital, Dumka, India. Research samples were recruited in the form of purposive sampling. The samples consisted of 50 patients with chronic mental illness (duration of illness more than 5 years) who have established diagnosis according to ICD-10, 50 caregivers of the patients, and 50 normal control individuals. Age, education, and economic status will be matched between the caregivers and the normal controls.

2.2 Participants

The sample included 50 patients with chronic mental illness, 50 caregivers, and 50 normal control individuals.

2.3 Procedures

Patients with chronic mental illness, their caregivers, and normal individuals were informed of the purpose of the study after written consent was obtained for data instruments specially designed socio-demographic data sheet. The Perceived Stress Scale was applied to all participants. GHQ-12 was used and a person who scored less than three points in GHQ-12 was included in the study.

2.4 Measures

The measures used in the present study included a sociodemographic data sheet, Perceived Stress Scale and General Health Questionnaire 12(GHQ-12) [1,2]. The Perceived Stress Scale 10(PSS-10) is a self-report instrument consisting of 10 items purported to assess "how unpredictable, uncontrollable and overloader respondents find their lives". Each of the items on the PSS-10 is rated on a 5-point Likert scale, ranging from 0 (never) to 4 (very often). The PSS-10 consisted of six positive (items 1,2,3,6,9 and 10: Positive factors) and four Negative (items 4,5,7, and 8: Negative factors) worded items, negatively worded items were re-recorded during the analysis. Total score ranges from 0-40 with higher scores indicating a higher level of perceived stress. Scores ranging from 0-13 would be considered low stress, 14-26 moderate, and 27-40 high stress.

The GHQ-12 is a measure of current mental health introduced by Goldberg and Williams in 1988. It is a self-administered test that detects the presence of psychiatric disorders in people presenting in psychiatric care settings and non-psychiatric clinical settings. GHQ-12 is not designed to detect symptoms of certain mental illnesses such as mental disorders, instead providing a measure of overall mental health or well-being.

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3. Statistical Analysis

Statistical analysis was done with the help of SPSS. Descriptive statistics (mean and standard deviation) were used to describe sample characteristics. Inferential statistics such as the Chi-square and One-way ANOVA were used to compare the perceived stress of persons with chronic mental illness, their caregivers, and normal controls.

SN			PATIENTS	CAREGIVERS	CONTROLS	X ²	p
1	Sex	Male Female	39 11	32 18	37 13	2.579	0.275
2	Family Type	Joint Nuclear	36 14	-	31 19	1.549	0.461
3	Employment	Employed Unemployed	36 14	43 7	34 16	4.807	0.090
4	Domicile	Rural Urban	46 4	-	41 9	2.843	0.584
5	Religion	Hindu Muslim Others	21 3 26	-	26 5 19	0.997	0.608

Table 1: Sociodemographic Profile of the total sample population (N=150): (Categorical variables)

Variable	Patients ^a	Caregivers ^b	Controls ^c	F	p	post-hoc
Perceived	24.64±5.56	19.50±4.59	7.70 ± 2.83	188.560	0.000**	a>c
stress score						b>c
						a=b

Table 2: Comparison of Perceived Stress scores of the total sample population (N=150): (post-hoc comparison)

The mean difference is significant at the 0.01 level (**p<0.01)

4. Results

Table 1 shows the sociodemographic variable of the sample population which indicates that there is no significant difference concerning sex, family type, employment, domicile, and religion.

Table 2 shows a comparison of perceived stress in the patients, their caregivers, and the normal controls which indicates that there is a higher level of perceived stress in patients and their caregivers as compared to the normal controls.

5. Discussion

This study aimed to examine the perceived stress in patients with chronic mental illness, their caregivers, and normal controls. Our findings in this study show that the patients with chronic mental illness and their caregivers have higher perceived stress than the normal control individuals. Similar finding was found in a previous study on family members of individuals with Schizophrenia [3]. Another study on homeless adults with mental illness have similar findings on PPS score with our current study [4]. Patients with chronic mental illness often face enduring challenges that contribute to high levels of perceived stress [5,6]. These individuals contend with symptoms of their condition, medication side effects, social stigma, and difficulties in accessing adequate healthcare services. Moreover, the chronic nature of their illness can lead to feelings of hopelessness, frustration, and uncertainty about the future. The

unpredictability of symptom exacerbations and the impact on daily functioning further exacerbate stress levels.

Caregivers of individuals with chronic mental illness often experience significant stress due to the demanding nature of their role. They may face challenges such as managing the practical aspects of care, navigating complex healthcare systems, and coping with the emotional strain of supporting a loved one with mental illness [7]. The constant vigilance required to ensure the safety and well-being of the patient can lead to chronic stress and feelings of burnout among caregivers.

While individuals without chronic mental illness may not face the same level of stressors as patients and caregivers, they are not immune to stress. Everyday stressors such as work pressures, financial concerns, relationship difficulties, and societal expectations can contribute to elevated levels of perceived stress [8].

6. Limitations

Due to time constraints, sampling was relatively small and could affect the generalizability of findings in the future. Other limitations of our study owe to drawbacks related to self-report measures like social desirability, memory constraints, and so on. However, we have tried to minimize these by putting post-scale introspective

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questions that support participant's responses. Subjects were recruited at a tertiary care hospital, and predictors of perceived stress may differ between this population and the community population. This is a cross-sectional study; we were unable to confirm the causal relationship between the variables. Therefore, a long-term study is necessary to confirm the relationship between stress and chronic mental illness in patients as well as caregivers.

7. Conclusion

In conclusion, perceived stress is a significant concern for patients with chronic mental illness, their caregivers, and individuals without mental health conditions and this can differ in nature and intensity. By acknowledging the unique stressors faced by each group and implementing targeted interventions, we can work towards reducing the burden of stress and promoting holistic wellbeing for all individuals, regardless of their mental health status.

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