

**Research article****A study to assess the stress level and quality of life among the relatives of women suffering from chronic diseases in selected hospitals of Pune city****Veena Sakhardande and Sneha Pitre**

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**Abstract**

**Objectives:** To assess the stress level and quality of life among relatives of women suffering from selected chronic diseases, to associate stress level with quality life among relatives of women suffering from selected chronic diseases, to associate stress level and quality life among relatives of women with selected demographic variables.

**Method:** This was a quantitative descriptive survey study of 80 relatives of women suffering from selected chronic diseases, aged between 30-60 years, relatives staying with women more than six months at home and hospital, relatives of women with chronic diseases like chronic renal disease, breast cancer and osteoarthritis of selected hospitals of Pune during 6th June 2015 to 19th March 2016. The assessment of the stress level and quality of life were done from relatives by self reporting and structured interview and in depth information collected according data collection tool. **Results:** The findings of stress level revealed that majority i.e. 53.8% of the relatives of women suffering from selected chronic diseases had severe stress level, 38.8% of them had moderate stress level and 7.5% of them had mild stress. The finding of quality of life revealed that 67.5% of the relatives of women suffering from chronic diseases had average quality of life, 23.8% of them had good quality of life and 8.8% of them had poor quality of life. **Conclusion:** The assessment of the stress level will help to know current psychology and the stress level among relatives of women suffering from chronic diseases and how to reduce stress level and will help to improve quality of life of relatives.

**Key words:** Stress, Quality of life, chronic diseases

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**1. Introduction**

The stressful event, the body's way to respond to stress is by sympathetic nervous system activation which results in the fight -or-flight response. Stress typically describes a negative condition or a positive condition that can have an impact on a person's mental and physical wellbeing. According to WHO the important aspects of health are physical, mental, social, spiritual and sexual health as whole. If any one aspect is imbalance it affects on our normal psychology. If relatives of women are not able to cope with all these stressful disease situations then ultimately it will have an effect on her quality life [1,2].

An exploratory study was conducted on 120 female relatives of women suffering from breast cancer by

Tata Memorial Hospital, Mumbai European , Organization to identify the physical and psychological distress experienced by relatives and identify life style changes, family disturbances with the help of symptoms distress scale and psychiatric status schedule and quality of life. The finding showed that insomnia, headache, fatigue was highest distressful physical symptoms which changed in the role performance and daily activity was decreased among the relatives of patients [3].

Quality life is broad multidimensional concept that includes subjective evaluations of both positive and negative aspects of life. Health is important domains of overall quality life. There are other domains like jobs, housing, schools, relationships and the neighborhood,

culture, values, and spirituality which are also key aspects of overall quality life [4,5].

A study conducted on quality life on 189 females with chronic breast cancer and end stage renal failure on dialysis and their family members. Patients reported significant impairments in physical, functional, and emotional function. Even it was shown that self efficiency, social support and family hardiness had positive effects on quality of life, where as symptom like distress, hopelessness seen as negative effect on quality of life [6,7].

The three are major diseases among woman like breast cancer, chronic renal failure and osteoarthritis which are chronic and requires long term treatment. The relative staying with women in hospital, at home have impact on their day today life, economical conditions, family harmony, and disturbance in children's life style.

## 2. Method and material:

From 6<sup>th</sup> June 2015 to 19<sup>th</sup> March 2016, 80 relatives of women suffering from chronic diseases like chronic renal disease, breast cancer and osteoarthritis of selected hospitals of Pune participated in present study. The study population was determined by based on inclusion criteria were relatives of patient with chronic renal disease, breast cancer and osteoarthritis, relatives staying with women more than six months in home and hospital, relatives with women in hospital, age group 30-60 years. Data were recorded in a questionnaire divided in to three parts.

The first part covered with demographic information including age, education, occupation, place of residence, marital status, type of family, expenses for treatment, duration of stay with patient in home and hospital, second part consisted of assessment of Physical, Mental, Emotional and Behavioral symptoms of stress with scoring of no stress, mild stress, moderate stress and severe stress and third part consisted of assessment of quality of life with poor quality life, average quality life, good quality life.

### Statistics:

Data were statistically analyzed using percentage and frequency to stress level and quality of life and Fishers extract test to evaluate the association with stress level and quality of life and chronic diseases with demographic data, a P value of less than 0.05 was considered significant.

## 3. Results:

### 1. Demographic variables:

The relatives of women suffering from Chronic diseases had age 41-50 yrs (25 %), 51-60 yrs (32.5%) and 31-40 yrs (42.5%). Education range of relatives, 36.3% of them had primary education, 27.5% of them

were illiterates. Secondary education 17.5%, any another 10 % and higher secondary education 8.8%, services of relatives i.e. 37.5% were housewives, 27.5%, farmer. 10% laborers, 10% unemployed, 7.5% of them had private, 5.0% self-employed, and 2.5% government service. 52% from rural place, 25% from urban place and 22.5% of them were residing in suburban place. Majority of 80% of them were married, 15% widow and 5% of them were divorced. 83.8% of them had joint family and 16.3% of them had nuclear family. 62.5% of had monthly family income between Rs.10001-15000, below Rs. 5000 had in 26.3% relatives. 41.3% relatives had duration of stay with women in home and hospital 6 months to 1 year, 40.0% stayed more than 2 years and 1year to 2 years 18.8%.

Table no-1

2. Assessment of the stress level of among relatives of women suffering from

Chronic diseases

Stress level	Frequency	%
Mild stress	6	7.5%
Moderate stress	31	38.8%
Severe stress	43	53.8%

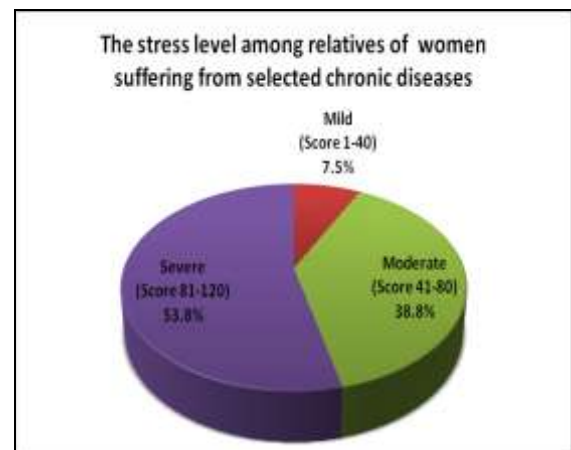


Figure no.1

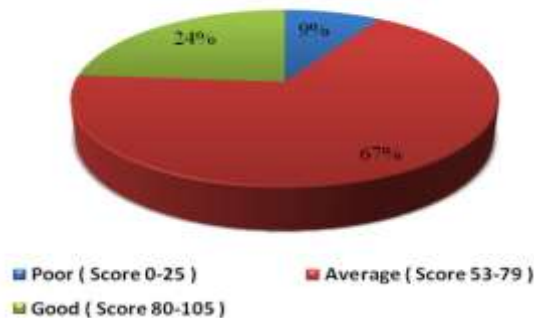
Table no 1 and figure no. 1 shows, majority i.e. 53.8% of the relatives of women suffering from selected chronic diseases had severe stress level, 38.8% of them had moderate stress level and 7.5% of them had mild stress.

Table no- 2

3. Assessment of the quality of life among relatives of women suffering from chronic diseases

Quality of life	Freq	%
Poor ( Score 0-25 )	7	8.8
Average ( Score 53-79 )	54	67.5
Good ( Score 80-105 )	19	23.8

**Quality of life among relatives of women suffering from chronic diseases**



**Figure no.2**

Table no 2 and figure no.2 shows, 67.5% of the relatives of women suffering from chronic diseases had average quality of life, 23.8% of them had good quality of life and 8.8% of them had poor quality of life

#### **4. Association of stress level and quality of life among relatives of women**

P-value was less than 0.05 so stress level and quality of life among relatives of women suffering from selected chronic diseases were found to have significant association.

#### **5. Association between stress level and quality of life with demographic variables:**

P-value was greater than 0.05, so stress level and quality of life among relatives of women suffering from selected chronic diseases were not found to have significant association.

#### **4. Discussion**

Majority i.e. 53.8% of the relatives of women suffering from selected chronic diseases had severe stress level, 38.8% of them had moderate stress level and 7.5% of them had mild stress. The above finding supported by the study on assessment of stress and coping among woman suffering from chronic diseases and how quality of life get disturbed and even the stress of students leads to decrease in performance [8].

The above finding also supports that the Indian Literature the woman suffering from chronic diseases will have high level of the stress which always reflect in family. Many times they will hide their problems, thinking not to disturb subjects and other family members. Relatives get relief from stress by coping mechanism, adjustment and patience, which we need to appreciate [9].

Further, 67.5% of the relatives of women suffering from chronic diseases had average quality of life, 23.8% of them had good quality of life and 8.8% of them had poor quality of life. The studies conducted in Chennai by group of hospital between 2003 and 2009 to see methodological quality of 10 selected studies among female chronic breast cancer and family attendant reported fair overall Quality life. The medical condition, social support and income were strong positive association with quality of life [10].

The findings of the present study indicate that assessing stress level will help to improve quality of life among relatives of women with chronic diseases. The result of this study confirmed stress level and quality of life among relatives of women suffering from chronic diseases like breast cancer, osteoarthritis. The present study will help to assess and minimize the severity of physical, mental, emotional and personal behavioural signs and symptoms of stress by promoting good coping among relatives of woman suffering from chronic diseases which is directly or indirectly connected with quality life. The nurses needs to educate themselves and initiate identification of the stress level relatives and woman with chronic diseases with the careful listening, communicating and guide the patient and the family members to adopt the coping strategies, to support their mental and emotional health and to change the perception for health coping. It should be routine in all clinical settings to improve the use of coping strategies and quality life. The result of present study can remind to clinical nurses to consider psychology of patient and relatives as important aspect of health which is always neglected or not prioritized.

#### **Conclusion:**

In conclusion it is thought that the current information of stress level and quality of life will assist in plan to for stress management and improve quality of life. Furthermore, it is also thought that it can add to the literature and increase understanding of relatives of women suffering from chronic diseases about stress and quality of life.

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