Caregiver Stress, Perceived Stigma and Mental Health in Female Family Members of Drug Addicts: Correlational Study
Maryam Rafiq, Riffat Sadiq

Abstract
Objective: To investigate the relationship of caregiver stress and perceived stigma with mental health in female family members of drug addicts.
Method: The correlational study was conducted in Lahore, Pakistan, from February to August 2017, and comprised female family members of drug addicts from various rehabilitation and health facilities of the city. A brief interview form along with Perceived Stigma of Substance Abuse Scale, Kingston Caregiver Stress Scale and Mental Health Inventory was used for data collection. SPSS 20 was used for data analysis.
Results: Of the 200 subjects, 66 (33%) were daughters, 66 (33%) were sisters and 68 (34%) were wives of drug addicts. The overall mean age was 30.57±8.07 years (range: 21-55 years). Perceived stigma and caregiver stress were significant predictors of mental health of the subjects (p<0.05 each). Moreover, daughters, sisters and wives of drug addicts did not significantly differ with respect to perceived stigma, caregiver stress and mental health (p>0.05).
Conclusion: Perceived stigma and caregiver stress were found to be significant predictors of mental health of female family members of drug addicts.
Keywords: Stigma, Caregiver stress, Mental health, Drug addicts, Female. (JPMA 69: 1303; 2019)

Introduction
Drug addiction is a chronic and relapsing brain disorder that encompasses repetitive and compulsive act of taking drugs in spite of its dire consequences on health.1 Drug is known to change the structure and functions of a brain, resulting in damage and self-destructive behaviours. Usually, addictive behaviour gets out of control, leading to physical, emotional and social problems for addicts and their families. For this reason, drug addiction is not only harmful for the individual, but it also makes the entire family sick.

Researchers have described drug addiction as one of the significant causes of family destruction and disturbed relationship.2 Family relationships are at risk owing to drug abuse and associated hazards. Researches addressing the health issues of families have reported numerous mental health problems among children and spouses of drug addicts. A study3 has depicted children of substance addict fathers experiencing depression, anxiety and hypomania. Children of drug users also suffered from different internalised and externalised problems.4

It is a hard reality that females are directly affected by drug abuse problems in men. A drug addict spends huge money to buy drugs, resulting in poverty and economic instability of the entire family. Due to financial constraints, females step in to handle family matters besides taking care of their male addicts. Despite contributing a lot, females are wounded by social criticism, neglect and stigma. Researches highlighted that stigma exacerbates nearly all domains of life.5 The community blames drug addicts for their addictive behaviour.6 In such a situation, females are required to give care and attention to their male patients. As a result, they themselves fall victim to depression, anxiety, guilt feelings, isolation and suicidal thoughts.7 A study has shown wives of substance abusers suffering from anger, social dysfunction, anxiety, depression and hostility.8 Domestic violence is the most common issue of an addict’s family.9 Drug addicts are the cause of pressure and violence.10 Due to violent behaviour and delusional jealousy in drug users, their spouses were found to be attempting suicides.11 Spouse of drug abusers seemed to use avoidance and withdrawal as coping strategies in problematic situation.12

A detailed review of above mentioned previous researches
has raised the issue of addressing the mental health of female family members of drug addicts. Most of the studies\textsuperscript{13,14} have dealt with the psychological health status of wives of people of drug users. Rest of the female family members, like sisters and daughters, have not been given sufficient attention. The current study was planned to address the factors predicting mental health of wives, sisters and daughters of drug addicts. It was postulated that perceived stigma and caregiver stress were significant predictors of the mental health of the subjects.

**Subjects and Methods**

The correlational study was conducted in Lahore, Pakistan, from February to August 2017, and comprised female family members of drug addicts from Fountain House, Mayo Hospital, Services Hospital, and Combined Military Hospital.

The sample size was calculated via post-hoc analysis using G-Power\textsuperscript{15} with a statistical power of 0.95 and effect size 0.15 at significance level of 0.05. Only one female relative - either wife, daughter or sister -- of individuals addicted to more than one drugs at least for last two years was recruited. Females who reported to be suffering from physical illnesses, like asthma, cardiac problems, hypertension, physical disability diabetes mellitus, etc., were excluded.

A brief interview form along with Perceived Stigma of Substance Abuse Scale (PSSAS), Kingston Caregiver Stress Scale (KCSS) and Mental Health Inventory-18 (MHI-18) was used for data collection. The interview form was designed in Urdu to gather demographic information as well as drug-related history of the patients. PSSAS measured substance abuse-related stigma perceived by the participants. It has 8 items to be scored on 4-point Likert scale ranging from 'Strongly disagree' = 1 to 'Strongly agree' = 4. It is reliable (\(\alpha=0.73\)) and moderately valid \((\alpha=0.48)\) research tool.\textsuperscript{16} The reliability of the Urdu version has been reported to \(\alpha=0.83.\textsuperscript{17}\)

The KCSS is a 10-item scale in which each item is responded on a 5-point Likert scale ranging from 'No pressure' = 1 to 'Extraordinary pressure' = 5. It is a valid \((\alpha=0.82)\) and reliable \((\alpha=0.85)\) tool.\textsuperscript{18} Reported reliability of the Urdu version is \(\alpha=0.78.\textsuperscript{19}\)

For MHI-18, all items are scored on 6 points of continuum: 'All of them' = 1, 'Most of the time' = 2, 'Good bit of time' = 3, 'Some of the time' = 4, 'A little of the time' = 5, and 'None of the time' = 6. The reliability of the full scale in both English\textsuperscript{20} and Urdu versions has been reported to be \(\alpha=0.93.\textsuperscript{21}\)

Prior to data collection, permission was obtained from the respective administrations, and informed consent was taken from all the subjects. Data was analysed using SPSS 20. Data was subjected to Shapiro-Wilk normality test, multiple regression analysis and one-way analysis of variance.

**Results**

Of the 200 subjects, 66(33\%) were daughters, 66(33\%) were sisters and 68(34\%) were wives of drug addicts. The overall mean age was 30.57±8.07 years (range: 21-55 years).

<table>
<thead>
<tr>
<th>Table-1: Summary of demographic characteristics of participants (N = 200).</th>
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</thead>
<tbody>
<tr>
<td><strong>Variables</strong></td>
</tr>
<tr>
<td>Perceived Stigma</td>
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<tr>
<td>Caregiver Stress</td>
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<tr>
<td>Mental Health</td>
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<th>Table-2: Summary of Multiple Regression Analysis.</th>
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<tr>
<td><strong>Predictor Variable</strong></td>
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<td>Perceived Stigma</td>
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<tr>
<td>Caregiver Stress</td>
</tr>
<tr>
<td>R\textsuperscript{2}</td>
</tr>
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</table>

a. Dependent variable: Mental health
All socio-demographic details were noted (Table-1). Data of only one measure (Mental health inventory) was normally distributed (Table-2). Perceived stigma and caregiver stress were significant predictors of mental health of the subjects (Table-3). Also, daughters, sisters and wives of drug addicts did not significantly differ with respect to perceived stigma, caregiver stress and mental health (Table-4).

**Discussions**

Results showed the significant predictive role of perceived stigma in mental health of female family members of drug addicts. Previous studies have also shown a significant relation of stigma with mental health. Stigmatising drug abuse is common in the general public. Stigma encompasses embarrassment and discrimination. Family’s reputation is at risk due to drug-related criminal activities such as theft, snatching, robbery, drug peddling and so on. Drug users also get involved in illicit sexual behaviour. All these factors bring defame to the family’s reputation. Clan members of drug addicts encounter regret, emotional detachment and disgrace. Feelings of shame and guilt are developed in response to perceived discrimination and blame because substance abuse is strongly deemed as a moralised behaviour instead of a health disease. As found by the current study, caregiver stress and health conditions were also found earlier to be associated with each other. Drug addicts do not accept their social obligations, leading tension, depression, nervousness and aggression in spouses. Males are supposed to take care of their female family members, but the addicts are unable to fulfill their responsibilities, and, instead, become dependent on the family. Resultantly, children have to work at an early age at the expense of their education. Females in the household need finance, time and energy in order to get their patients rehabilitated. In doing so, they are overwhelmed by mental health problems like anger, depression, preoccupation, blaming, denying and co-dependency.

In the current study, wives, daughters and sisters of drug addicts did not significantly differ with respect to perceived stigma, caregiving stress and mental health. Previous studies demonstrated that cultural factors determine stigma. People do not like to get married with the sister or daughter of an addict. Females encounter rejection, avoidance and vilification at the social level. In South Asian societies, female are also blamed for the misfortune of male members, specially related to money and children. Wives of drug addicts are frequently considered responsible if their husbands could not get rid of their addictions. Consequently, they become co-dependent and suffer from various physical and mental health problems, such as chronic cough, weight loss, aches, irritability, anxiety and depression.

In terms of limitations, the current study did not analyse the role of demographics in determining the mental health of female family members of the addicts. Moreover, it could not address the impact of single drug on patients and their family members. Also, the sample was not randomly selected. Despite the limitations, the study has implications for health and rehabilitations professionals, the government and the community at large.

**Conclusion**

Perceived stigma and caregiver stress were found to be significant predictors of the mental health of female family members of drug addicts. Also, all females, irrespective of their relation with the addicts, equally perceived stigma and experienced caregiver stress. As such, the consequences for their mental health were the same.

**Disclaimer:** The study is part of an M. Phil thesis. The Title has been amended to some extent and the term ‘poly drug user’ has been replaced with ‘drug addicts’ to avoid plagiarism.

**Conflict of Interest:** None.

**Source of Funding:** None.

**References**


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<thead>
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<th>Variables</th>
<th>Groups</th>
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<th>Mean square</th>
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<td>Within group</td>
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<td>Caregiver stress</td>
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Table-4: Summary of one way analysis of variance (ANOVA).


