

STRESS LEVELS AND QUALITY OF LIFE OF FAMILIES CARING FOR PEOPLE WITH MENTAL DISORDERS: LITERATURE REVIEW

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ABSTRACT

The family is the main support system for individuals suffering from mental disorders to maintain their health. However, this responsibility can cause psychological reactions to the family, some of which are stress on the family and of course will have an impact on the quality of life that the family has. The aim of this study was to identify stress level and the quality of life of families caring for people with mental disorders. The method of the research used the literature study. The analysis material consists of fourteen articles in Indonesian and English, research published within a period of 5 years (2018-2023), research journal whose respondents are mental disorder families, full-text with the Google Scholar database, Science Direct, Pubmed, Researchgate, Garuda, Scopus, Springerlink, ristekbrin.go.id, Accademia Edu, and Proquest using keyword “tingkat stres keluarga ODGJ”, “kualitas hidup keluarga ODGJ”, “keluarga skizofrenia”, “stress level” AND “schizophrenia family”, “quality of life” AND “mental illness family”, “schizophrenia family”, “caregiver schizophrenia”. Article quality assessment using tables critical appraisal duffy’s. The result analysis of 7 articles related to the stress levels of families caring for patients with mental disorders that have been carried out show that there were 3 articles with mild stress levels, 2 articles with heavy stress, and 1 article with normal stress, and 2 articles with no stress. The results analysis of 7 articles of quality of life on families caring patients with mental disorders showed that families experienced high quality of life in 3 articles, moderate in 2 articles, while low quality of life in 2 articles. Based on the 14 article, it can be concluded that families caring patients with mental disorders experienced stress and have problems in quality of life. For further study, it is hoped adding the article more and review related to risk factor or interventions on stress and quality of life among families caring mental disorder’s patients

Keywords: family; mental disorders; stress level; quality of life

INTRODUCTION

Mental disorders are brain disorders characterized by disturbances in emotions, thought processes, behavior and perception (perception of the five senses). According to Stuart & Sundeen (2008) in Imelisa et al (2021), this mental disorder causes stress and suffering for sufferers and their families. The prevalence of mental disorders is quite high with 350 million people worldwide experiencing them and is ranked 4th in the world (WHO, 2020). The World Health Organization also stated that 3 per mile of the 32 million people in Central Java suffer from madness, another 19 per mile suffer from stress, the prevalence rate of mental health problems such as depression and anxiety in Indonesia reaches around 11.60 percent of the total population, or around 24,708 ,000 people. Meanwhile, the prevalence of more serious mental disorders such as psychosis is estimated to be only around 0.46 percent of Indonesia's total population, or around 1,065,000 people. Regarding this data, the Indonesian Ministry of Health in Indonesian Ministry of Health (2018) stated that the prevalence was 4.4 percent of the total population in Central Java.

The family is the main support system for individuals suffering from mental disorders to maintain their health. The family's duties in caring for patients with mental disorders include maintaining, developing and strengthening mental health, anticipating social and economic changes, providing motivation, and facilitating the patient's spiritual needs. However, when it comes to caring for family members who experience mental disorders, the family will definitely experience various psychological problems such as stress. Basic Health Research (Indonesian Ministry of Health, 2018) reported that the prevalence of schizophrenia/psychotic mental disorders among household members was 6.7 per million, which is equivalent to 282,654 people. Of this number, 85% or 240,256 people have undergone treatment at their homes (Ministry of Health of the Republic of Indonesia, 2018). Families are always faced with the behavior of mental disorder patients which takes up quite a lot of time, energy and thought. This often has an impact on the family (caregiver) making them vulnerable to psychological problems, one of which is stress in the family (Hadi et al., 2020).

Stress is a condition where individuals experience excessive pressure, which is felt as a burden. This usually occurs when a person's needs or desires are out of balance. (Ambarwati et al., 2019). Stress can be felt by anyone and anywhere, whether experienced by individuals, families or groups. Families dealing with mental disorders experience changes in rest time, appetite, interest in entertainment that was previously enjoyable, and disturbances in carrying out religious services. (Tololiu et al., 2019). Many factors cause mental disorders families to experience stress. Short-term stress can serve as a trigger for change and progress, therefore it can be seen as a positive thing. However, if stress persists continuously for more than two weeks, it can cause decreased attention and concentration, decreased life satisfaction, physical illness, and poor health behavior, melancholicism, to the point of loss of hope (Julaeha, 2019), will also have an effect. about important aspects of his life.

Mental disorders are chronic disorders that require long-term treatment and rehabilitation through the transition from hospital-based care to community-based care. Family caregivers certainly play a more important role in the rehabilitation of people with mental disorders, with an important role of course the burden of responsibility that will be supported. getting bigger and affecting the quality of life of the caregiver's family (Meng et al., 2021). Quality of life is a subjective way of assessing physical conditions (including physical, psychological, social and environmental health). Apart from that, quality of life also reflects the level of prosperity of an individual who enjoys everything in life, so that they feel they can manage, control and control their life in all existing situations (Yunita et al., 2021). Personal quality attributes that will falter include statements of satisfaction with one's life, one's physical, mental and social status, as well as an objective assessment that one's current condition is safe or under threat (Alfiyanti, 2019).

In line with that, obtained from the results of research by Purbasari et al (2021) of 160 respondents who are families who care for mental disorders, in general, the majority have a low standard of quality of life, with 41.3% experiencing poor quality of life and another 41.3% experiencing poor quality of life. quality of life is very poor. However, there is also a small number of people - as many as 28 people (17.5%) - who have a medium quality of life standard. From these results, in the research discussion, it is also explained that the quality of life of mental disorders families is influenced by many factors, namely, age, gender, occupation, income, family

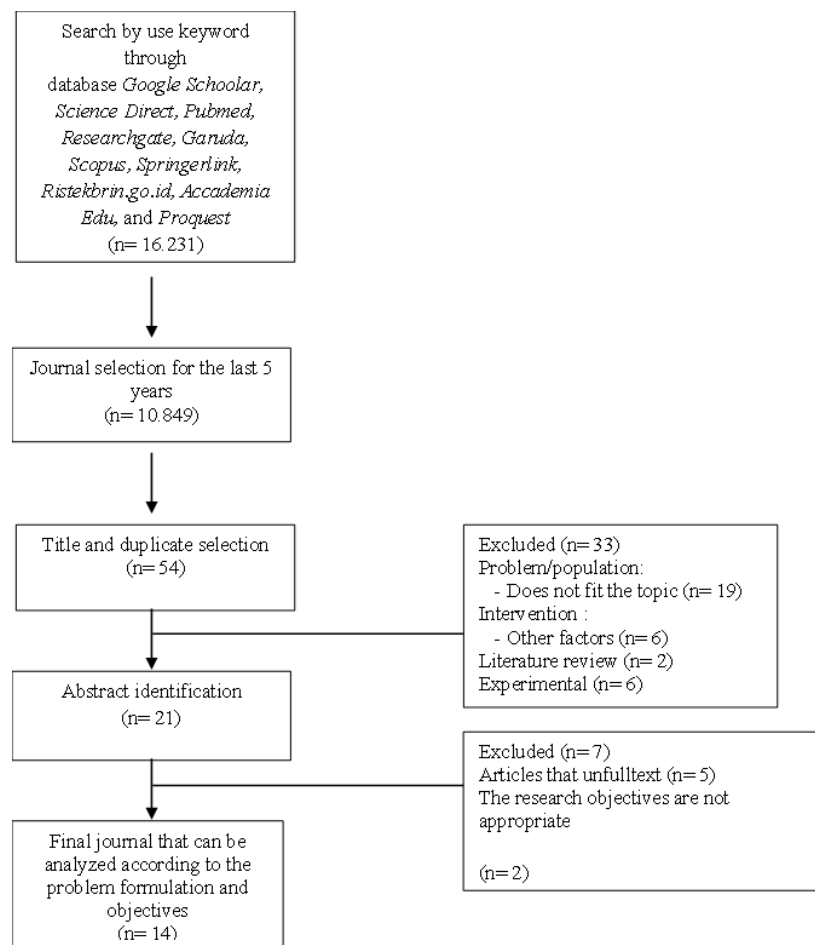
knowledge/education, the patient's relationship with the family, and the length of care, this also proves that the family caring for clients >3 years, the quality of life is much better than families caring for <3 years, because in the not too distant future a family adaptation process will occur. Another influencing factor is the burden borne by the family, the less the burden borne, the smaller the possibility of stress on the family, the smaller the impact on the family's quality of life (Purbasari, 2021). It can be assumed that the quality of family life will increase if the family stress burden is not large.

Success in treating mental disorders is not only supported by drugs and medical care but also by family support. Therefore, this research was conducted with the title "Literature Review of Stress Levels and Quality of Life of Families Caring for Mental disorders". The data obtained in each literature can be used to determine the level of stress experienced by mental disorders families, as well as how likely it is that the family's quality of life will be disturbed/affected by the responsibility to care for family members who experience mental disorders. With this knowledge, it is hoped that it can later be used as a basis for providing solutions/interventions to reduce the psychological burden on families of mental disorders. So that treatment for mental disorders at home can run well and the family remains mentally healthy and can maintain a good quality of life.

METHOD

The type of this research was literature review or structured literature review method. The focus of this research is stress level and quality of life families caring for people with mental disorders. The samples used in this study were fourteen articles from national and international articles related to research titles that fit the inclusion and exclusion criteria. The inclusion criteria in this literature review were those published in 2018 to 2023 in the English version and Indonesia version with open access and complete access in original articles, full-text research articles whose respondents were families caring mental disorders patients. The exclusion criteria were book chapters, abstract proceedings, and posters. Journal quality assessment used Duffy's critical appraisal table. The search strategy was carried out on several journal databases including Google Scholar database, Science Direct, Pubmed, Researchgate, Garuda, Scopus, Springerlink, Ristekbrin.go.id, Accademia Edu, and Proquest using keyword “tingkat stres keluarga ODGJ”, “kualitas hidup keluarga ODGJ”, “keluarga skizofrenia”, “stress level” AND “schizophrenia family”, “quality of life” AND “mental illness family”, “schizophrenia family”, “caregiver schizophrenia”.

The authors conducted a process analysis of each article reviewed and extracted the detailed information needed to describe the effect of murottal Al-Qur'an therapy in caregiver/family or patients' stress levels. The selection process started with removing duplicates with articles titles that did not fit in the search for primary data using the Microsoft Excel application. The abstracts from the selected articles were further analyzed to ensure compliance with the inclusion criteria. In the second round of the article selection process, the author conducted a full-text review to prevent doubts about the selected article. Furthermore, the authors searched for and selected the studies that were considered the most relevant to be reviewed. All articles that met the inclusion criteria were thoroughly reviewed without a meta-analysis. Research quality or feasibility in this study is based on the inclusion and exclusion criteria of the study. All data in the form of research articles that comply with the eligibility criteria were reviewed and analyzed qualitatively. The overall results of the articles that meet the requirements for review are fourteen articles.



RESULTS AND DISCUSSION

Stress Levels in Families Caring for Mental Disorder Patients

Based on the results of the analysis carried out in the research articles Agustina & Aiyub (2018), Wulandari & Fitriani (2020), Nasriati (2020), Priyanti et al. (2021), Kirana et al. (2023), Yusuf et al. (2019), and research by Janah & Hargiana (2021) showed that there are psychological events in the form of stress in families caring for family members who suffer from mental disorders. Of the 7 articles, the majority of the results stated that there was a mild level of stress in respondents in 3 articles, then the level of severe stress there are two articles, while those who are not stressed are mentioned in the results of 2 articles, while the results that show normal stress levels are only 1 journal. The results of the research on the level of stress experienced by mental disorders families were measured using various instruments such as PSS-10 which was used in 2 research articles, DASS-42 which was used in two research articles, Kempe family inventory-10 was used in 1 journal, while the remaining 2. The journal uses survey sheets and questionnaires which are processed by researchers themselves and have been tested for validity and reliability. Different instruments will of course have different methods of assessment and results if applied to research on stress levels in different articles, in addition to the level of understanding of respondents, the intrinsic and extrinsic factors that existed when the research was conducted and the number of respondents in each research journal.

In the analysis of the research results of the 7 articles, it can be said that the level of stress experienced by families caring mental disorder patients is predominantly at a mild level, where it can be assumed that caring for family members who suffer from mental disorders at home by the family is considered safe for the family's psychology. Families can still overcome the stressors that arise with various efforts and efforts, the factors of the length of adaptation carried out by the family and good coping - family functions are certainly very helpful during these times. However, there is still a risk that the stress level will continue to increase and become a very heavy stress level, depending on the quantity of stressors the family faces. According to Nasriati (2020), stress in Families caring mental disorder patients is a form of reaction to the burden during treatment, for example in terms of materials that need to be prepared for treatment needs, emotions that arise when facing the sufferer's condition, as well as social burdens when facing people outside or around the residence, to the burden physically needing to work, take care of, and care for family members who experience mental disorders. In line with that, Rochmawati et al. (2022) concluded from the results of their research that the stress experienced by families caring for mental disorder patients causes certain biological responses in the body. When you feel threatened, stressed, or facing a big challenge, several stress hormones will be released throughout the body, so attention is needed to control and treat families who are currently or before experiencing serious impacts from the stress of caring for mental disorder patients. There are several efforts that can be made to prevent and overcome stress that occurs in Families caring mental disorder patients and this has been proven by research, such as family psychoeducation (FPE) in the research of Solehah et al. (2019), support group therapy in the research of Hadi et al. (2020), and it can also be done with complementary therapies, one of which is progressive muscle relaxation as in research (Zaini et al., 2018).

Quality of Life in Families Caring for Mental Disorders

Based on the results of the analysis carried out in the research journal Tristiana et al. (2019), Hsiao et al. (2020), Putra et al. (2020), Purbasari (2021), Kartika et al. (2023), Natasya (2020), and research by Sustrami et al. (2022) shows that there are problems with the quality of life in families who care for family members who suffer from mental disorders while living under the same roof. Based on the 7 articles, the majority of the results stated that there was a high quality of life in Families caring mental disorder patients in 3 articles, the results that showed families caring patients with mental disorders had a moderate quality of life were in 2 articles while there were 2 articles that stated low quality of life. The results of research on the quality of life experienced by families caring patients with mental disorders were analyzed from various instruments, in 7 research articles the majority used the schizophrenia caregiver quality of life questionnaire (S-CGQoL) in 4 articles, then the world health organization quality of life instrument was used. (WHO-QoL) - BREF has 2 research articles, while the one using the RYFF Psychological Wellbeing Scale (RPWS) is found in 1 research journal. Different instruments will of course have different methods of assessment and results if applied to research on stress levels in different articles, in addition to the level of understanding of respondents, the intrinsic and extrinsic factors that existed when the research was conducted and the number of respondents in each research journal.

In the analysis of the research results of the 7 articles, it can be said that the quality of life experienced by mental disorder families is predominantly a high quality of life, where it can be

assumed that caring for family members who experience mental disorder at home or independently is no longer something that is necessary, very burdensome for the family, this is influenced by the family's adaptive coping, the number of health facilities that help provide provisions for caregivers at home, and effective family functioning. However, this transition can still hurt the quality of life of the family if it is left without provisions and many underlying things, even though it is in the rehabilitation stage it will still affect the quality of life components in the family, because the family at home will always be faced with various situations and a sense of alertness even though they have adapted for a long time to the condition of the family members, such as troublesome situations, for example disturbing, strange or aggressive behavior as well as periods where economic problems and other factors influence the family's quality of life.

Poor quality of life among families caring for mental disorder patients can disrupt family functioning (for example decision making for therapy plans and emotional support). Research (Cheng et al., 2022) has investigated factors that could potentially explain this phenomenon and has reported that the quality of life of families caring for people with mental disorders is predicted by several factors that depend on the sufferer. For example, higher levels of illness severity, including more severe psychosis or mood symptoms and more distressing behaviors (i.e., aggressive behavior and suicide attempts), lead to a greater care burden and poorer quality of life among caregivers. . Apart from that, sociodemographic factors, psychological factors and intrinsic factors of the family itself also play a role in influencing the quality of life of families caring for people with mental disorders. Therefore, it is important to participate in efforts and strive to maintain a good quality of life for the family through various methods provided by health facilities, both in hospitals, health centers and mental communities. In connection with the research results and theories above, Natasya (2020) in her research regarding quality of life assumes that the quality of life of families (caregivers) of schizophrenia may be influenced by age, level of education, and the amount of time they spend caring for the patient. As age increases, the impact on quality of life decreases. Meanwhile, for the education level of schizophrenia families (caregivers) with a higher level of education may have easier access to the information needed and community resources for treatment. Meanwhile, depending on the length of time caring for, the longer the family cares, the more the family's quality of life will decrease.

CONCLUSION

Study found that 7 research articles related to stress levels, the majority had mild stress levels from the research results of 3 articles, severe stress levels were found in the research results of 2 articles, while those who were not stressed were mentioned in the results of 2 articles, while those that showed high level research results normal stress only has 1 journal. The majority of families caring mental disorder patients who were analyzed from 7 research articles related to quality of life experienced high quality of life from the research results of 3 articles, followed by moderate quality of life of 2 articles and low quality of life were in 2 articles. Researchers recommended for further research, it is hoped develop research related to risk factors or interventions on stress level and quality of life among families caring mental disorder patients.

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