Stress, Depression, Anxiety Experienced and Coping Strategies Adopted by the Spouses of Alcohol Use Disorder Admitted in Selected Hospitals of Sikkim

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Abstract

Introduction: Alcoholism is a foremost public health problem afflicting people all over the world resulting in misery and untold sufferings to the family of the alcoholic very especially to the spouse. Alcohol use disorder seem to be an incapacitate sickness which manifests itself as a disorder of conduct. Spouses feel difficult to manage married life and feel stress. This study delineates how wives in Sikkim cope with their alcoholic husbands, and what motivates them to carry on in spite of the surrender of the husbands to the addiction. Methods: This study is a descriptive co-relational, conducted in in patient department of District Hospitals of Sikkim among 60 spouses of alcohol use disorder were AUDIT scale was used to assess the pattern of alcohol used by husband and the spouses were selected through purposive sampling technique. The data was collected through standardized DASS scale to assess the stress, depression anxiety experienced by the spouses of alcohol use disorder and structured coping scale was to used to find out the positive and negative coping strategies adopted by them for which the validity and reliability was established by the panel of experts. Data analysis was done using SPSS version 15 applying descriptive and inferential statistical methods. Results: The Findings of the study revealed that among 60 spouses, 41.67% had experience severe stress, 33% moderate depression and 38.33% had moderate anxiety. The findings also revealed that majority of the spouses reported significantly more familial and social focused negative coping strategies, such as distancing, self-controlling and anger displacement when they are frightened and when they do not wish to confront the situation in order to avoid conflict with the stressful situation. It was also seen that stress and depression is depend upon the factors like type of marriage, type of family, habit of alcoholism before marriage among husband, and family history of alcoholism among spouses of alcohol use disorder (p < 0.05). Discussion and conclusion: The study concludes that spouses of alcohol use disorder are severely stressed which hampered their marital life, caring of children, negative attitude towards husband, loss of respect and dignity.

Keywords: AUDIT scale; Stress; Depression; Anxiety; Coping strategies.

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Introduction

The use of alcohol had traced back to the Neolithic age. Beer & wine are known to been used around 6400BC. Early Egyptian and Greek writings made several references to alcohol. Hippocrates recognized many of the medical complications of excessive drinking.¹

The magnitude of the problem of alcohol dependence in India can be gauged by the fact that 33% of its population consumes alcohol with an annual rise in consumption. Besides the numerous chronic and acute health effects, alcohol consumption are also associated with widespread social, mental and emotional consequences. These are reflected, for example, as absenteeism or abuse in workplaces and in relationships.²

Stress is the emotional and physical strain caused as a result of response to what happens around and in individual. It is an inborn instinct helping the person to deal with everyday difficulties. But, if it goes for too long, it can harm the physical as well as psychological health, making it difficult to handle day to day living.³ Level of stress are dependent upon the extent to which the alcoholic and their spouse hold dissimilar perceptions about problems, the links between the drinker's own concerns and the pressure exerted by the spouse particularly troublesome when the individual's own evaluation is not supported by the partner.⁴

An alcoholic can totally disrupt family life and cause harmful effects that can last a lifetime. Alcohol related problem affects the wellbeing of one's spouse and the family. All women in that situation face domestic violence and threats of violence, emotional and sexual abuse, lack of confiding relationships, social isolation due to humiliation, financial hardships, chronic psychiatric or physical problems of the drinking husband directly related to alcohol abuse or secondary to alcohol abuse (e.g. depression), and marital disharmony leading to perpetual psychological distress, and a risk of developing depression which in unhappily married women is 25 times than in happily married women.⁵

A prolonged increase in marital arguments is the most frequent life-event reported as preceding the onset of depression in married women. According to recent study conducted in India 43% of spouses of men with alcohol related problem had major depressive disorder (MDD) and the depression had significant correlation with the severity of the alcohol related problem measured by alcohol dependence data and an inventory of consequences.⁶

Campbell identifies depression and posttraumatic stress disorder as the major psychiatric morbidities in the victimized women, the risk of depression being even higher than among the victims of childhood sexual abuse.⁷ Similarly, Medina-Mora reports a prevalence of depression 8% among wives of alcoholic partners, which further increased to 25% when the women were victims of domestic violence.⁸ Alcoholism puts strains on marriage. Long-term alcohol abuse can have dangerous physical and emotional effects. Alcoholism puts financial strains on marriage. The money being spent on alcohol cause problems and the strains among alcoholics wives.⁹

These are the obvious marital problems alcoholism causes, but there are many other issues that are faced and must be dealt with, by the women who are the wives of alcoholics. For example, some women blame themselves for their husband drinking. They worry thinking that they haven't done enough to make their husbands happy or that something they've done (or didn't do) led to their husbands' drinking. These feeling of guilt caused wives to feel stressed, anxious, or depressed. Other people also blame wife for her husband's drinking, which feeds into the feelings of guilt she already had.¹⁰

Identity of alcoholics spouse seems to lie solely in their status as wives of alcoholics. They had to endure years of isolation, blame of relatives, lack of friends, little money, violence, unsatisfactory sexual relations. The spouses of drinkers suffer from elevated rates of depression, anxiety and somatic complaints, report low levels of relationship satisfaction, and often subjected to verbal and physical abuse.¹¹

Problem statement

Stress, Depression, Anxiety experienced and coping strategies adopted by the spouses of alcohol use disorder admitted in selected hospitals of Sikkim.

Objectives

- 1. To assess the level of Stress, Depression and Anxiety experienced by the spouses of alcohol use disorder admitted in selected hospitals.
- 2. To find out the coping strategies adopted by the spouses of alcohol use disorder admitted in selected hospital.
- To find out the correlation between Stress, Depression and Anxiety experienced by the spouses of alcohol use disorder and coping strategies adopted by them.
- 4. To find out the association between Stress, Depression and Anxiety experienced by the spouses of alcohol use disorder admitted in selected hospitals with selected variables.

Hypothesis

 H_{I} : There is significant association between the level of stress, depression and anxiety of spouses of alcohol use disorder with their selected variables at 0.05 level of significance.

Materials and Methods

Non experimental survey approach with Descriptive Co-relational designwas used to quantify the spouses stress, depression and anxiety of alcohol use disorder and coping strategies adopted by the spouses of alcohol use disorder admitted in selected hospitals of Sikkim. The research was conducted among all spouses of alcoholic admitted in the Psychiatric ward and Medical ward of Central referral hospital, Sikkim. Purposive sampling technique was used were 60 Married couple whose husband was admitted in the psychiatric and medical wards with alcohol dependence related condition, within the age range of wives 18-60 years and who were willing to participate in the study The purpose of the study was to identify the alcohol use disorder and to assess the Stress, Depression, Anxiety experienced and coping strategies adopted by the spouses of alcohol use disorder admitted in selected hospitals.

Five tools was prepared to measure Stress, Depression, Anxiety experienced and coping strategies adopted by the spouses of alcohol from selected hospitals of Sikkim. Tool I was based on AUDIT (Alcohol use disorder identification test), Tool II consists of Two sections, Section A: consists of Background information and Section B: consists of Standardized four point rating scale on Stress, Tool III consists of Standardized four point rating scale on Depression and Tool IV consists of Standardized four point rating scale on Anxiety experienced by spouses of alcohol use disorder. Ethical permission was taken from the Institutional Review Committee of Sikkim Manipal University. Written consent was obtained from the respondent prior to the administration of the questionnaire. The finding was presented for both descriptive and inferential statistics.

The face validity of Standardized tool on AUDIT (Alcohol use disorder identification test), Depression, Anxiety and Stress experienced by spouses of alcohol use disorder and the content validity of structured interview schedule on coping mechanism adopted by spouses of alcohol use disorder was done by 7 experts from the field of Psychiatric, Medicine and Faculty members of Sikkim Manipal College of Nursing. The experts were chosen based on their clinical experience,

expertise and interest in the problem area. The reliability of AUDIT, Depression, Anxiety and Stress (DASS) was tested by Cronbach's Alpha (r = 0.7-0.8) and coping mechanism adopted by spouses of alcohol use disorder by split half method, for which the value was found 0.89 and socio demographic profile by intra-rater method.

Results

Findings related to AUDIT scale to identify alcohol use disorder

The Alcoholic husband's who consumed alcohol was taken as the criteria for defining alcohol use which was evaluated by AUDIT questionnaire to assess the pattern of alcohol use. Therefore, all the 60 samples, falls under the score range between 8–19 was recommended as indicators of hazardous and harmful alcohol use as well as alcohol dependence and included as subjects (Table 1).

Table 1: Frequency distribution of AUDIT scale. N=60

Sl. No	AUDIT total score	Frequency	Percentage
1	0-7	0	0%
2	8-15	46	76%
3	16-19	14	24%
4	20 or more	0	0%

Table 2: Findings related to demographic data of spouses of Alcohol use disorder N=60

Variables	X ²	df	p-Value
Stress			
Type of marriage	43.7	8	(p<0.05)
Type of family	16.7	4	(p<0.05)
Habit of alcoholism before marriage among husband	16.4	4	(p<0.05)
Family history of alcoholism	25.2	12	(p<0.05)
Depression			
Family history of alcoholism	23.5	12	(p<0.05)
Anxiety			
Type of family	7.45	9.49	(p<0.05)
Income of family	15.71	15.51	(p<0.05)

Majority of the spouses belong to the age group of 27–40 years & were married for more than 4 years. Majority of the spouses had love marriage, belong to joint family with family income between Rs.5000 –15000/month. 63% of spouses reported habit of alcoholism among their husband before marriage and only 30% of the spouses were engaged in the habit of alcoholism before marriage. Habit of alcoholism before marriage in wife was; 30% had the habit whereas 70% didn't have any habit of alcoholism before marriage (Table 2).

Majority of the spouses of alcohol use disorder were having the family history of alcoholism

especially among the bothers (55%) and father (20%) (Fig. 1).



 $\textbf{Fig. 1:} \ \ \text{Distribution of spouses of alcohol use disorder in terms of habit of alcoholism in family}$

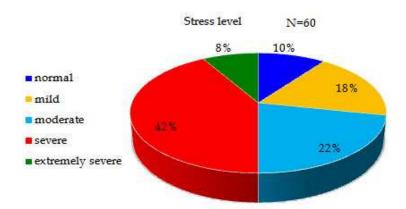


Fig. 2: Findings related to level of stress experienced by spouses of alcohol use disorder

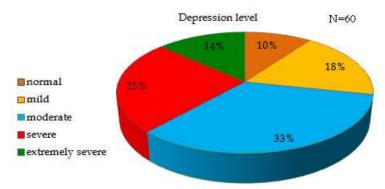


Fig. 3: Findings related to level of depression experienced by spouses of alcohol use disorder

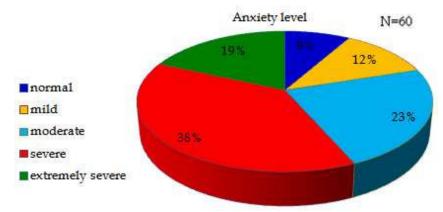


Fig. 4: Findings related to level of anxiety experienced by the spouses of alcohol use disorder

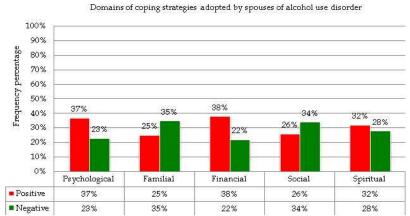


Fig. 5: Findings related to coping strategies adopted by the spouses of alcohol use disorder

Table 3: Findings related to correlation between coping strategies adopted by the spouses of alcohol use disorder and stress experience N=60

Variables	Mean	Standard Deviation	Correlation
Coping strategy	56.66	4.75	r =0.7
Stress	16.08	9. 37	r -0.7

The coping strategy adopted by the spouses of alcohol use disorder had a correlation coefficient value of 0.7 which showed a moderately positive correlation between the coping strategy and stress experienced by spouses of alcohol use disorder (Table 3).

Table 4: Findings related to correlation between coping strategies adopted by the spouses of alcohol use disorder and depression experienced N=60

Variables	Mean	Standard Deviation Correlation	n
Coping strategy	56.66	4.75	
Depression	17.76	6.50 r =0.4	

The coping strategy adopted by the spouses of alcohol use disorder showed a poorly positive correlation between the coping strategy and depression experienced by spouses of alcohol use disorder (Table 4).

Table 5: Mean, standard deviation and correlation adopted by the spouses of alcohol use disorder and anxiety experienced

N=60

Variables	Mean	Standard Deviation	Correlation
Coping strategy	56.66	4.75	
Anxiety	15. 1	5. 10	r = 0.4

The coping strategy adopted by the spouses of alcohol use disorder showed a poorly positive correlation between the coping strategy and anxiety experienced by spouses of alcohol use disorder (Table 5).

Discussion

The findings of the present study reveal that Alcoholic husband's who consumed alcohol was taken as the criteria for defining alcohol use which was evaluated by AUDIT questionnaire to assess the pattern of alcohol use. Therefore, all the 60 samples,

was recommended as indicators of hazardous and harmful alcohol use as well as alcohol dependence. The findings of the present study are consistent with the findings of Alok Tyagi, Shubham Mehta¹² which was used to grade the severity of alcohol identification through AUDIT scale. In this study, the majorities of the participants were categorized as risky or harmful and were likely to be alcohol dependent.

The findings of the present study reveal that 41.67% spouses of alcoholic husbands experience severe stress. The findings of the present studywasconsistent with the findings of Nisha S. Naik¹³ which shows that the spouses of alcoholics had severe stress i.e. 88% The findings of the present study was also consistent with the findings of Savita *et al.*¹⁴ which shows that the spouses of alcoholic husbands had 68% severe stress.

The findings of the present study reveal that 33% spouses of alcoholic's husbands experience moderate depression. The findings of the present study are consistent with the finding of C.P Sedain¹⁵ which shows that 28.26% developed depressivedisorder. The findings of the present study are consistent with the finding of M. Kishor *et al.*¹⁶ which shows that 43% spouses of alcoholic's husbands experience severe depression.

The findings of the present study reveal that 38.33% spouses of alcoholics husbands experience anxiety. The findings of the present study are consistent with the findings related which was conducted by Nirmala, RKR. Esther Amutha¹⁷ which shows that 65% experience mild anxiety. The findings of the present study are consistent with the study findings conducted by Rakesh. R. Gandhi¹⁸ which shows that 59% spouses of Alcoholics husbands experience severe anxiety.

The findings of the present study reveals that psychological/personal, financial, spiritual domain the spouses of alcohol use disorder used positive coping strategies to minimize the significance of the situation whereas based on familial and social domain the spouses of alcohol use disorder used negative coping strategies and do not wish to confront the situation in order to avoid the conflict with the stressful situation. This result is similar with a descriptive study conducted by Judith Lewis¹⁹ to assess the ways of coping strategies adopted by the spouses of alcohol use disorder. Every family has its own problems which affects the family as an entire. In such cases the family life is described by disorder and inconsistency where the wives of alcoholics suffer and the children of alcoholics grow emotionally depresses, confused by the behavior of the parents resulting in separations and causing emotional hardship to the family. Therefore based on familial and social domain they adopt negative strategies to handle the situation.

This result is similar with a descriptive study conducted by Nitasha Sharma²⁰ that is living with an alcoholic partner: coping strategies used by wives of alcoholic husband. The findings revealed the problems faced by alcoholics wives in domains i.e psychological, social, physical. The psychological problems faced by the wives of alcoholics often set in motion an array of physical problems as well. Therefore they were able to handle the situation by talking about the present situation and finding a solution to it. Socially, the family members of alcoholics often feel estranged ad about 50 samples reported feeling ashamed in the society. This leads to marked reduction in social engagements. The wives of alcoholic clients also report general social dysfunction.

The finding of the present study reveals that there is a moderately positive correlation between coping strategy and stress experienced by the spouses of alcohol use disorder. The findings of the present study are consistent with the findings related to the study conducted by Abhijit Nadkarni²¹ which reveals that there is a correlation between coping strategy ad stress experienced.

The findings of the present study reveal that there is a positive correlation between coping strategy and depression experienced by the spouses of alcohol use disorder. The findings of the present study are consistent with the findings related to the study conducted by C.P Sedain¹⁵ there is a strong relationship between stress and coping. Therefore alcohol consumption and heavy drinking has been shown associated with aggression and violence.

The findings of the present study reveal that there is a positive correlation between coping strategy and anxiety experienced by the spouses of alcohol use disorder. It reports that wives of alcoholics have unhappy feelings. The findings of the present study are consistent with the findings related to the study conducted by Alok Tyagi¹² which identified the correlation between coping ad anxiety among the wives of alcoholics.

Conclusion

The problems faced by the alcoholics have often wedged the attention in society yet finding and applying effective interventions to reduce the pain and suffering of being a partner of alcoholic. Alcoholism is considered as a major health as well as a social problem. The problem of alcoholism though defined in context of an individual affects the family as a whole. When the head of the family abuse alcohol, it causes disruption and disharmony within the family and thus every member suffers.

The family members of alcoholic often report various negative emotional states ranging from guilt, shame, anger, fear, grief. Among all members the wives of alcoholic are mostly affected. Based on the findings of the present study it shows that the wives of the alcoholics experience stress, depression and anxiety. When there is mental break down, the human being grasps ways of coping to handle the situation

Coping strategies used by the wives of alcoholics are the concerned efforts both behavioral as well as psychological which are employed by them to master, tolerate, reduce or minimize the stress associated with their husband's drinking. Based on the present study findings it reveals that the wives use coping measures to alleviate stressful circumstances and the emotion focused coping involves the efforts to regulate the emotional consequences of stressful events.

However, it is worth mentioning the fact that the study has some limiting factors and there must have been some confounding factors like pattern and duration of drinking of spouse and timely availability of facilities that can actually be offered to spouses or alcoholics when asked for, but ultimately reflecting the nursing care, as they are the end providers in any hospital setup. The investigators recommend the study to be replicated involving a larger sample size and incorporation of randomization with a consideration of removing the confounding factors.

Acknowledgment

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Conflict of interest: The authors declare no conflicts of interest

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