Assessment of Quality of Life of Spouse of Alcoholic Patients Attending Selected De-Addiction Centre, West Bengal

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Abstract: A descriptive study was conducted intends to focus on the assessment of quality of life of spouses of alcoholic patients. The objective of the study is to assess the quality of life of spouse of alcoholic patients and determine the association between quality of life of spouse of alcoholic patients with the selected demographic variables. Conceptual framework of the study is based on Roy's adaptation model. Descriptive survey research design was used. Total 200 participants were selected through non probability purposive sampling technique. The data were collected through interviewing technique using semi structured and WHOQOL - BREF tool. Data were analysed by calculating mean, median, SD and Chi - square for association. The result revealed that the respondents 198 (99%) had average quality of life and 2 (1%) had poor quality of life and none of the spouse were having excellent or good quality of life. In domain wise distribution shows that environmental domain was affected least and social domain was affected most. Chi - square test revealed that there is significant association between occupation (p < 0.05) and income of the family (p < 0.01) with quality of life.

Keywords: Quality of life, Spouse, Alcoholic patients

1. Introduction

"Life isn't about finding yourself. Life is about creating yourself."

- George Bernard Shaw

Health is a state of complete physical, mental and social well - being and not merely absence of disease or infirmity.1 But health status altered for inclusion of various unacceptable changes in life. Alcoholism is one of the major public health problems and world's third largest threat factor for complaint and disability.2Alcohol is a poisonous and psychoactive substance with dependence producing properties. In numerous of moment's societies, alcoholic potables are a routine part of the social geography for numerous in the population. This is particularly true for those in social surroundings with high visibility and societal influence, nationally and internationally, where alcohol constantly accompanies socializing. Alcohol consumption contributes to 3 million deaths each time encyclopedically as well as to the disabilities and poor health of millions of people. Overall, dangerous use of alcohol is responsible for 5.1% of the global burden of disease and also responsible for7.1% and2.2% of the global burden of complaint for males and females independently. Alcohol is the leading threat factor for unseasonable mortality and disability among those aged 15 to 49 times, counting for 10 percent of all deaths in this age group underprivileged and especially vulnerable populations have advanced rates of alcohol - related death and hospitalization.3 Alcoholism generally refers to an unbridled consumption of alcoholic potables to such an extent that it turns out mischievous to the drinkers health, the particular connections, and overall social functioning.4

Problem statement

Assessment of quality of life of spouse of alcoholic patients attending selected De - addiction Centre, West Bengal.

Objectives

To assess the quality of life of spouse of alcoholic patients.
 To determine the association between quality of life of spouse of alcoholic patients with the selected demographic variable

Methodology

Research approach

In this study survey research approach is used.

Research design

Descriptive survey research design.

Variables under study

Demographic variables are age, religion, education, occupation, income, type of family, no of family members, no. of children.

Research variables

Quality of life of spouse of alcoholic patients

Setting

Pilot Study - Aashroy (De - addiction, Rehabilitation, counselling centre) Burdwan. Final Study - Agrani Foundation, Ranaghat. Faith Foundation, Kalyani. Asthya welfare society, Kalyani.

Population

All spouse of alcoholic patients who attend in De - addiction centre.

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Sample

Spouse of alcoholic patients who attend selected De - addiction centre.

Sample size

Sample size of the study is 200 spouses of alcoholic patients.

Sampling Technique

Non - probability purposive sampling technique is used to select the sample.

Data collection tool and techniques

Semi - structured interview schedule for socio demographic variables and WHOQOL - BREF for assessment of quality of life was used.

2. Result/Discussion

Findings of Demographic Variables: 126 (63%) of respondents belonged to the age group of under and equal to 35 years and 74 (37%) respondents were in the age group of above 35 years.176 (88%) of the respondents belonged to Hindu religion and 24 (12%) belonged to Muslim religion. In the education it has been observed that 66 (33%) respondent were primary passed, 108 (54%) were secondary passed, 20 (10%) were higher secondary passed and 06 (3%) are graduate. It also interprets that 112 (56%) were worker and 88 (44%) were home maker, 129 (64.5%) spouses were having monthly family income below or equal to 10000 rupees and 71 (35.5%) participant having monthly family income above 10000 rupees. It also showed that 78 (39%) of respondents belonged to the nuclear family and 122 (61%) respondents belonged to the joint family, 69 (34.5%) had family members less or equal to 4 and 131 (65.5%) of the respondents family members are greater than 4. It also interpreted that 187 (93.5%) of the respondents had number of children less or equal to 2 and 13 (6.5%) of respondents had greater than 2.

Major findings related to quality of life of spouse of alcoholic patient: 198 (99%) were having average quality of life, 2 (1%) were having poor quality of life and none of the spouse were having excellent or good quality of life. It also can be inferred that quality of life better in environmental domain and poor in social domain.

3. Conclusion

From the above findings it can be concluded that most of the respondents (99%) had average quality of life and (1%) had poor quality of life and none of the spouse were having excellent or good quality of life. Domain wise distribution shows that environmental domain was affected least and social domain was affected most. There is significant association between quality of life with occupation and monthly family income.

4. Future Scope

This study can be implicated on several areas like nursing practice, nursing education, nursing administration and nursing research. Based on the findings further studies were recommended. This work will help to utilize the opportunity by giving prompt and adequate information regarding alcoholism and trigger factors that associated with it and its impact on health and family and measures should be taken by the nurse to motivate health personnel to maintain healthy environment in and around the community.

Literature Review

Literature review related to spouse of alcoholic patients and assessment of quality of life of alcoholic patients.

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