

# Group Work Interventions for Family Caregivers of Elderly Persons with Mental Health Problems

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## ABSTRACT

**Introduction:** Geriatric mental health is the foundation for the wellness and optimum functioning of an elderly person. Physical, psychological, social, cultural and spiritual factors are interrelated with mental health in elderly. Loneliness, disability, family structure, support system, social security and resilience factors influences and encounters the essence of psychosocial interventions to enhance the psychological and social well-being of the elderly persons. Family caregivers of elderly persons with mental health problems face various adversities in their life due to the nature of symptoms and associated psychosocial issues such as caregiver burden, lack of information about the illness, inadequate social support, delay in seeking treatment and poor quality of life. Hence, psychosocial interventions are important to empower the family caregivers of elderly persons with mental health problems. **Aim:** This study aims to to understand the multifactorial aspects of psychosocial interventions and to present themes noted in reducing caregiver burden, ensuring treatment adherence, accessing social support and improving the quality of life in geriatric mental health. **Methodology:** The study focuses on review of comprehensive group work care interventions offered for elderly persons with mental health problems and their family caregivers who accessed a Geriatric Clinic at a tertiary care center in a cosmopolitan city of India starting from January 2022 to June 2023. **Results:** Elderly persons with mental health problems and their family caregivers were provided group work session of psychosocial support ranging from psychoeducation, supportive work, home care strategies, home visits, psychosocial follow up, welfare benefits, alternative care options such as day care, formal home-care, institutionalization, palliative care and unique case-based queries including bank and legal aid. Time-bound brief-psychosocial interventions were offered. Further results will be presented. **Conclusion:** This study can help the fellow researchers and academicians gain the summary of psychosocial interventions provided in a lower- and middle-income country such as India. It highlights the role of a multidisciplinary team in holistic-care for persons with mental health problems and their families. It attempts to review what has worked as well as the areas that need more attention. It provides the insights and initiates the discussion over inclusion of psychosocial interventions as part of regular clinical services across all settings including private hospitals and multi-speciality care facilities. **Conclusion:** Psychosocial needs of the persons with mental health problems and their families are varied and cannot be addressed by one intervention package. Hence, augmenting the psychosocial interventions would enable the caregivers to provide better care, enhance the well-being, manage behavioral issues and decrease the burden of care. In short, psychosocial interventions would enhance the quality of life for family caregivers of persons with mental health problems.

**Keywords:** Elder, Family caregivers, Group work, Psychosocial, Mental Health, Quality of Life

## INTRODUCTION

Ageing is Later part of life. Elderly are those persons who are older or higher in rank than oneself. An aged person or an influential member of a tribe or community. A person aged 60 years and above is a senior citizen (United Nations Organisation, The National Policy on Older Persons, Maintenance and Welfare of Parents and Senior Citizen Act 2007). Ageing includes aspects or issues related to Physical such as Medical comorbidity, Mobility Issues or Hospitalisation; Economical such as Superannuation, Financial Dependency, Insecurity; Environmental such as Poor Accessibility, Lack of Support, Stereotypes or Myths; Psychological such as Loss, Grief Guilt; and Sociological such as Loneliness, Isolation or Grievance. Geriatric mental health is the basis for the wellness and optimum functioning of an elderly person. Physical, psychological, social, cultural and spiritual factors are all interrelated with mental health in elderly. Loneliness, disability, family structure, support system, social security and resilience factors influence and encounter the essence of psychosocial interventions to enhance the psychological and social well-being of the elderly persons. Family caregivers of elderly persons with mental health problems (FCEPwMHP) experience various adversities in their life due to the nature of symptoms and associated psychosocial issues such as caregiver burden, lack of information about the illness, inadequate social support, delay in seeking treatment and poor quality of life. Hence, psychosocial interventions are important to empower the family caregivers of elderly persons with mental health problems. As the United Nations Organisation recognises the importance of Sustainable Development Goals (SDGs) to be targeted the elderly community and the stakeholders inclusively to achieve the goal of healthy ageing decade 2021-30, Group work interventions enable the family caregivers of elderly community who are seeking the psychosocial consultation as well as the mental health care to achieve the healthy ageing and sustainable development goals with the support of group work therapists, peer group having wisdom and experienced in handling the care needs, resource persons, group leaders, members who provides cohesion and other influential stakeholders. SDGs and Healthy Ageing Decade have similar frameworks and to be achieved by 2030. SDGs have seventeen targeted goals which are interconnected as complementary and interdependent with each other. SDGs can be contextualised for the promotion of healthy ageing by inclusion of geriatric community to achieve the sustainable development in elderly persons with mental health problems and their family well-being. Group work as an important primary method of professional social work with the various group work models and approaches as well as specialised skills, tools and techniques, supports the effective implementation of the SDGs and Healthy Aging framework for the optimum care elderly population, family caregivers and targeted stakeholders for the promotion mental health including psycho-social care.

### **Group Work Purpose (*Committee on Practice of the Group Work Section of the National Association of Social Workers, 1964*)**

- Corrective/treatment
- Prevention
- Normal social growth and development
- Personal enhancement
- Citizenship indoctrination (Training, Teaching & Education)

### **Group Work Models includes:**

- ❖ Social Goals/ Skills Model
- ❖ Remedial Model
- ❖ Reciprocal Model
- ❖ Kurt Lewin's Model
- ❖ Tubbs Model
- ❖ Fishers Model
- ❖ Tuckman's Model
- ❖ Poole's Model
- ❖ Guided Group Interaction Model
- ❖ Problem Centred / Task Centred

A group is defined as two or more individuals interacting and interdependent on each other who have come together to achieve particular objectives. Social group work is a psycho-social process which is concerned no less with developing leadership ability and cooperation than with building on the interests of the group for a social purpose (Hamilton, 1949). The group worker strives towards the group development with the support of group work therapists, peer group having wisdom and experience in handling the care needs, resource persons, group leaders, members who provide cohesion and other influential stakeholders. By 2050, 2/3 of the world's population over 60 years will live in low- and middle-income countries (United Nation). According to Census 2011, India has 104 million older people (60+years), Constituting 8.6% of total population. Amongst the elderly (60+), females outnumber males. It is the basis for the wellness and optimum functioning of an elderly person and family. Physical, psychological, social, cultural and spiritual factors are all interrelated with mental health in elderly and family. Loneliness, disability, family structure, support system, social security and resilience factors influence and encounter the essence of psychosocial interventions to enhance the psychological and social well-being of the elderly persons and family

### **METHODOLOGY**

It focuses on review of comprehensive group work care interventions offered for elderly persons with mental health problems and their family caregivers who accessed a Geriatric Clinic and Services Unit at a tertiary care centre in a cosmopolitan city of India starting from January 2022 to June 2023. Group work themes were decided at the beginning based on the review of literature and discussion with the subject experts such as sleep hygiene and its importance in geriatric mental health, explanatory model of caregiving burden and relaxation techniques, Caregiving issues and problem solving or behavioural management techniques, home based intervention strategies for FCEPwMHP, awareness and sensitization on geriatric social welfare benefits, IEC on geriatric care services, knowledge, attitude and practices (KAP), myths and facts on geriatric mental health. Inclusion criteria was based on the compatibility of the languages known by the members and the therapists involved in the group intervention. Individual sessions were planned and provided for the members who expressed to the therapists for the additional, specialised and unique psycho-social consultations outside the group work session. Group work process, outcome, challenges and related findings documented in a soft copy of worksheets by the therapist systematically followed by the group work interventions.

**Aim:** To understand the multifactorial aspects of psychosocial interventions for the family caregivers of elderly persons with mental health problems (FCEPwMHP)

**Objectives:**

- Designed to analyse the group work interventions which were carried out for the psychosocial consultation of FCEPwMHP
- Presents themes of the group work interventions noted in reducing caregiver burden, ensuring treatment adherence, accessing social support and improving the quality of life in geriatric mental health as well as family caregivers

**Inclusion criteria** was based on the compatibility of the languages known by the members and the therapists involved in the group intervention

**Individual sessions** were planned and provided for the members who expressed to the therapists for the additional, specialised and unique psycho-social consultations outside the group work session

**Group work process**, outcome, challenges and related findings documented in a soft copy of worksheets by the therapist systematically followed by the group work interventions

**Universe of the study** was the family caregivers of elderly persons with mental health problems and the population was those who took OPD & IP based consultation

**Sampling design** adopted the purposeful and convenient sampling method for involving the FCEPwMHP in group work intervention voluntarily and free to withdraw at any point of time

It was ensured to the group members to involve for psychosocial consultation with the **Standard Operating Procedure** to follow the group work principles and process

## RESULTS

Elderly persons with mental health problems and their family caregivers were provided group work session of psychosocial support ranging from psychoeducation, supportive work, home care strategies, home visits, psychosocial follow up, welfare benefits, alternative care options such as day care, formal home-care, institutionalisation, palliative care and unique case-based queries including bank and legal aid. Time-bound brief-psychosocial interventions were offered.

### Group Work session in Geriatric Clinic & Service OPD

- Dated b/w 4/1/2022 to 28.06.2023
- Time b/w 9:00 to 9:30 am
- Google Sheet is maintained for data recording

No of Groups Sessions	Period of the Study	Duration of the Session	Participants (1793)	Therapists Involved (311)	Type of Group Members
141	18 Months	15 - 30 Minutes	3-25 Members	1-4 Range	Caregivers Groups =11 Patient and Caregivers (Mixed) Groups = 130

### Group Work session in Geriatric Ward (P2) - 10 Bedded

- Dated b/w 11/11/2021 to 26.06.2023
- Time b/w 11:00 to 11:59 am
- Google Sheet is maintained for data recording

No of Groups Sessions	Period of the Study	Duration of the Session	Participants (405)	Therapists Involved (213)	Type of Group Members
84	18 Months	30 - 45 Minutes	3-10 Members	1-4 Range	Patients Groups = 02 Caregivers Groups =54 Mixed Groups = 28

**Group work themes** were decided at the beginning based on the review of literature and discussion with the subject experts such as

- Sleep hygiene and its importance in Geriatric Mental Health
- Explanatory model of caregiving burden and relaxation techniques
- Caregiving issues and problem solving or behavioural management techniques
- Home based intervention strategies
- Awareness and sensitization on geriatric social welfare benefits
- IEC on geriatric care services
- KAP, Myths and Facts on Geriatric Mental Health and so on



Challenges in Group Work Interventions	
Outpatient Group Setting	Inpatient Group Setting
<ul style="list-style-type: none"> <li>❖ Accountability</li> <li>❖ Cultural Disparities</li> <li>❖ Difficulty to maintain confidentiality</li> <li>❖ Lack of enough space</li> <li>❖ Communication barriers</li> <li>❖ Reflecting on progress</li> <li>❖ Time management</li> <li>❖ Ensuring consistency of participants</li> <li>❖ Addressing diverse needs within the group</li> </ul>	<ul style="list-style-type: none"> <li>❖ Balancing individualised treatment needs within a group setting</li> <li>❖ Managing diverse patient backgrounds and personalities</li> <li>❖ Addressing power dynamics within the group</li> <li>❖ Communication barrier</li> <li>❖ Varying members in the group</li> <li>❖ Having difficulty in making homogeneous group</li> </ul>

## DISCUSSION AND FURTHER RECOMMENDATION

This study can help the fellow researchers and academicians gain the summary of psychosocial interventions provided in a lower and middle income country such as India. It highlights the role

of a multidisciplinary team in holistic-care for persons with mental health problems and their families. It attempts to review what has worked as well as the areas that need more attention. It provides the insights and initiates the discussion over inclusion of psychosocial interventions as part of regular clinical services across all settings including private hospitals and multi-specialty care facilities.

## CONCLUSION

Psychosocial needs of the persons with mental health problems and their families are varied and cannot be addressed by one intervention package. Hence, augmenting the psychosocial interventions would enable the caregivers to provide better care, enhance the well-being, manage behavioural issues and decrease the burden of care. In short, psychosocial interventions would enhance the quality of life for family caregivers of persons with mental health problems.

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