

Beyond Caregiving: Unveiling the Relationship between Caregiving Dynamics and Psychological Well-being

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ABSTRACT

Informal caregivers play a crucial role in the care of older persons, providing essential support that significantly influences the well-being and functioning of this population. However, caregiver characteristics, such as mental health and adaptability to caregiving stress, can impact the quality of care provided. This study investigates the unique contributions of care willingness and competency on the psychological well-being of informal caregivers of older persons. A total of 228 caregivers (165 females, 63 males), mean age = 248.89, SD = 12.10, aged between 21 and up to 75 years participated in the study. The information regarding willingness to care, care competency and psychological distress using Depression, Anxiety and Stress (DASS-21) were examined. Participants were provided four response options: 0=never, 1=sometimes, 2=a lot of the time, 3=most or all the time. Total scores for each sub-scale are multiplied by two to interpret scores on the same scale as the DASS-41. Higher response values and higher scores indicate higher levels of experiencing the condition measured. Analysis using Spearman Rho correlation revealed that the willingness to care and perceived competency to care are negatively associated with psychological distress. In conclusion, this study highlights the complex interplay between caregiving competency, willingness to provide care, and psychological distress among informal caregivers. Supporting caregivers' skills and well-being is crucial for sustaining high-quality care for older adults. The findings suggest that

competency and willingness to provide care is a potential protective factors for the mental health of caregivers and should be a focal point for interventions aimed at improving the quality of care for older persons.

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INTRODUCTION

The aging population is rapidly increasing globally, leading to a growing demand for caregiving support for older adults. Informal caregivers, often family members or friends, play a pivotal role in providing this essential care. While caregiving can be a fulfilling experience, it often comes with significant challenges that can impact the caregiver's mental health and overall well-being. Understanding the dynamics between caregivers' willingness to provide care, their perceived competency in caregiving, and the psychological distress they may experience is crucial for developing effective support systems. Willingness to provide care encompasses a caregiver's motivation and readiness to engage in caregiving activities. As noted, willingness can be influenced by various factors, including personal values, emotional bonds, and the perceived demands of caregiving.

According to Meyer et al. (2022), care competency refers to a caregiver's confidence and ability to perform caregiving tasks effectively. High levels of perceived competency may enhance a caregiver's sense of control and self-efficacy, potentially mitigating feelings of distress (Bergstrom et al., 2023). Psychological distress among informal caregivers can manifest as anxiety, depression, and feelings of overwhelm, which can adversely affect both the caregiver's and the care recipient's quality of life (Engel et al., 2022). Research has shown that caregivers who feel less competent in their caregiving roles are more likely to experience higher levels of psychological distress. However, the relationship between willingness to provide care and care competency, and how these factors collectively influence psychological distress, remains underexplored.

This study aims to investigate the intricate relationships between the willingness to provide care, care competency, and psychological distress among informal caregivers of older adults. By examining these relationships, we hope to identify potential areas for intervention that can enhance caregiver well-being and improve the quality of care provided to older adults. Ultimately, fostering a supportive environment for informal caregivers is essential for addressing the challenges they face and ensuring the sustainability of informal caregiving in the context of an aging society.

A recent review indicates a complex interplay between willingness to provide care, perceived care competency, and psychological distress among informal caregivers (Zimami, & Darwish, 2024). As the demand for informal caregiving continues to grow, understanding these relationships is crucial for developing effective support systems that enhance caregiver resilience and improve the quality of care for older adults. Future research should explore targeted interventions that address the unique challenges faced by informal caregivers, ultimately fostering a healthier caregiving environment.

MATERIALS AND METHODS

A cross-sectional survey involved a sample of informal caregivers of older people. Caregiver burden and psychological manifestations were measured using previously

translated DASS-21 questionnaires. Two hundred thirty-seven samples were selected for analysis. The inclusion criteria for this study were (i) being the primary caregiver. The primary caregivers were individuals whom the patient felt most involved in the caregiving process, (ii) caregivers who are ≥ 18 years old, and (iii) able to understand English or Malay language. The exclusion criteria were (i) caregivers who were mentally challenged, which is associated with loss of a sense of reality (schizophrenia, bipolar disorder, acute psychosis or dementia), (ii) caregivers to patients who are institutionalized. The information regarding willingness to care, care competency and psychological distress using Depression, Anxiety and Stress (DASS-21) were examined. Participants were provided four response options: 0=never, 1=sometimes, 2=a lot of the time, 3=most or all the time (Lovibond & Lovibond, 1995).

RESULTS

A total of 228 caregivers (165 females, 63 males, mean age = 48.86, SD = 12.10) aged between 21 and 75 years participated in the study. As referred to Table 1, the majority of caregivers were women, Malays, mean age of 49 years old, still married, and had received secondary education, and with a mean monthly income of approximately MYR5300.

Table 1
Sociodemographic characteristics of the study participants (n=237)

Sociodemographic Characteristics	n (%)	Mean (SD)
Age in years		48.89 (12.1) †
Sex		
Male	63 (26.6)	
Female	174 (73.4)	
Race		
Malay	192 (81.0)	
Chinese	22 (9.3)	
Indian	17 (7.2)	
Others	6 (2.5)	
Marital status		
Single	44 (18.6)	
Married	171 (72.2)	
Widowed	72 (19.0)	
Divorced	9 (3.8)	
Education level		
Secondary school	55 (23.2)	
Tertiary	149 (39.4)	
Living at home with whom		
Living alone	55 (23.2)	
Living with others	182 (76.8)	

One third of caregivers perceive themselves as competent to take care of their care recipients. Present finding shows that the majority (more than 80%) of caregivers had normal scores for depression, anxiety and stress as shown in Table 2. Spearman Rho correlation analysis revealed that the willingness to care and perceived competency to care are negatively associated with psychological distress.

Table 2
Prevalence of depression, anxiety, and stress among study participants (n=237)

	Depression (%)	Anxiety (%)	Stress (%)
Normal	88.6	88.2%	95.4
Moderate	7.9	10.3	3.6
Severe	3.5	1.5	1.0

DISCUSSION AND CONCLUSION

Present findings show that the negative association between the willingness to care, perceived competency to care, and psychological distress has meaningful implications. The findings suggest that individuals who are more willing and feel more competent in providing care tend to experience lower levels of psychological distress. This inverse relationship highlights two key factors: emotional readiness and a sense of efficacy in caregiving. On the other hand, when caregivers are confident in their ability to manage care tasks, they may feel more empowered and less overwhelmed, reducing the mental and emotional strain (Dombestein et al., 2020; Pizzol et al., 2024). This perceived competency likely fosters resilience, helping caregivers better navigate challenges without experiencing severe distress. Price et al. (2020) examined the support needs of informal caregivers, particularly those caring for individuals with multimorbidity. The findings revealed that caregivers often experience high levels of psychological distress due to the complexities of managing multiple health conditions. Moreover, a higher willingness to care may be rooted in intrinsic motivation, which provides emotional fulfilment and a sense of purpose, further buffering against psychological challenges. Additionally, a high willingness to care might overshadow personal boundaries, causing caregivers to neglect their self-care needs, ultimately contributing to longer-term psychological or physical health issues.

In summary, the results suggest that strengthening caregivers’ willingness and competency can be protective against psychological distress. However, ensuring a balance between caregiving duties and self-care is essential to prevent potential negative outcomes such as burnout.

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