

The Relationship between Family Support and Mental Health: A Cross-Sectional Study on Elderly in Aceh, Indonesia

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Abstract- Introduction: In the field of public health, mental health problem is considered as the main problem in elderly. This study aims to assess the relationship between family support variables and the mental health of the elderly. The forms of family support include emotional, appreciation, informational, and instrumental support. **Study design:** This study refers to a cross sectional design. Data collection is carried out through a survey started from June to October 2019. There are 483 participants aged 60 years or over who are involved in the study. Statistical analysis in this study uses SPSS version 21. **Results:** The result of the bivariate analysis through the chi square test shows that mental health is significantly associated with family support variables including emotional support ($p = <0.001$), appreciation ($p = <0.001$), informational ($p = <0.001$) and instrumental ($p = 0.009$). In the multivariate analysis stage that is conducted with a logistic regression test, it obtains that there are only three variables of family support that are significantly related to the mental health of the elderly, including emotional support ($p = <0.016$), appreciation ($p = <0.001$) and informational ($p = 0.033$). **Conclusion:** Good emotional, rewarding and informational support from the family can prevent and reduce mental health problems in the elderly. The awareness of family members needs to be created with promotional and educational approaches about the strategic role of the family in the form of support for the elderly.

Index Terms- Family Support, Mental Health, Elderly.

I. INTRODUCTION

Health status, good interpersonal relationship, increased productivity, and closer social networks are often associated with positive mental health.¹ However, there are mental health problems such as depression which are considered a major public health problem that is mostly experienced by elderly. This condition may be caused by decreasing in physical and cognitive functions in elderly² which leads to high discrimination and physical harassment.¹

In a community aged 60 years old, the prevalence of people experiencing mental health problems is higher occur in women than in men. According to WHO report, it estimates that the prevalence of depression in women is above 7% and above 5% in men, meanwhile in the level of anxiety, it shows that women are above 4.4% and in men are above 2.1%.³ A study in Indonesia that involved 2,929 people aged ≥ 60 years obtained that moderate and severe depression symptoms are about 16.14%.⁴

For parents in Aceh, children and grandchildren are not only considered as the successors of the family, but they are also a place that is expected to take care of them when they turn into elderly. Affection, love, and attention from children and grandchildren as family members are something that the elderly expect. It is proved by NG et. al that this can be seen from the frequency of quality time spent by the elderly with family members⁵ as well as their spouses. A number of studies conducted by experts have shown the association of family support with mental health problems (e.g., depression).^{6,7,8}

Based on the prior elaboration, researchers conducted a study that aims to assess the relationship between family support, (emotional support, appreciation, informational and instrumental) and mental health of elderly people. This study is conducted due to there are fewer studies on the relationship between those two variables, which involve the elderly in Aceh, thus it may answer the hypothesis.

II. METHODS

2.1. Study design and study population

This study is conducted using a cross sectional design approach that takes people aged 60 years or over in Aceh as the population and 483 elderly as the samples. Data collection is carried out on elderly people who live in West Aceh Regency for four months, from June to October 2019.

2.2. Measurement of family support

Family support is assessed through four variables, including emotional support (three questions), appreciation (two questions), informational (three questions), and instrumental (three questions). The assessment uses a Likert scale which consists of “strongly disagree”; “disagree”; “agree”; and “totally agree”. Before the questionnaire is given to the research respondents, it is first conducted a questionnaire test to 30 people. The result of the questionnaire test shows that the score of r count questions about family support is higher than the score of r table (0.361).

2.3. Measurement of mental health

For mental health measurements, this study uses Geriatric Depression Scale (GDS) instrument developed by Sheikh and Yesavage. The GDS has been made into the Indonesian version issued by the Ministry of Health of the Republic of Indonesia.⁹ There are 15 questions with two answer choices for each item, “yes” or “no”.

2.4. Data analysis

To conduct statistical analysis, researchers use bivariate analysis through the chi square test. The test aims to assess the relationship between variables of family support and mental health. Furthermore, multivariate analysis is carried out through logistic regression tests. This test aims to prove which family support that is most significantly related to the mental health of the elderly. Researchers use SPSS version 21 tool to simplify the statistical analysis of the two tests.

III. RESULTS

Table 1: Relationship between family support and mental health variables

Independent Variable	P value	OR	95% Confidence interval	
			Lower	Upper
Emotional Support	0.000*	2.866	1.702	4.827
Appreciation Support	0.000*	3.814	2.532	5.746
Informational Support	0.000*	2.607	1.752	3.879
Instrumental Support	0.009*	1.935	1.201	3.118

Abbreviations: * = significant *p* value, OR= Odds Ratio

The results of the bivariate test using the chi square test as Table 1 show that emotional support ($p = <0.001$), appreciation support ($p = <0.001$), informational support ($p = <0.001$) and instrumental support ($p = 0.009$) are significantly associated with mental health. These results can be concluded that all variables of family support, referring to the chi square results, are significantly related to mental health.

Table 2: Results of logistic regression analysis in family support and mental health variables

Variables	B	SE	Wald	p-value	Adj OR	95%CI	
						Lower	Upper
Emotional Support	.695	.290	5.756	0.016*	2.004	1.136	3.537
Appreciation Support	1.048	.227	21.391	<0.001*	2.852	1.829	4.446
Informational Support	.428	.227	4.522	0.033*	1.620	1.039	2.527
Instrumental Support	.098	.273	.128	0.720	1.103	.645	1.885
Constant	-3.293	.530	38.643	<0.001	.037		

Abbreviations: B = Beta coefficient, SE = Standard Error, CI = Confidence Interval, Adj OR = Adjusted odds ratio, * = significant p-value

The result of the logistic regression test in Table 2 shows that there are three variables of family support that are significantly related to the mental health of the elderly, they are emotional support ($p = 0.016$), appreciation support ($p = 0.000$), and informational support ($p = 0.033$). Meanwhile, instrumental support ($p = 0.720$) shows an insignificant relationship with mental health.

IV. DISCUSSION

The harmful effect of depression and anxiety on a person is significant to create a poor quality of life¹⁰, especially the elderly. Therefore, preventing depression and anxiety or in other words maintaining the mental health of the elderly may turn into a major concern. One effort that can be done is providing support from family members as the closest people to the elderly, such as children, grandchildren, and spouses. This is necessary because mental health is directly affected by family support.⁸ The stress that occurs in the elderly can be reduced by the presence of people they can rely on. The result of this study also proves that family support such as emotional, appreciation, and informational support is significantly associated with positive mental health. Elderly people who get

better emotional, appreciation, and informational support from family have better mental health conditions than elderly people with lower emotional, appreciation, and informational support.

The phenomenon in the community shows that there are more elderly people in Aceh who live with their family members, while fewer elderly live alone. Even though they have been separated or abandoned (died) by their spouse, they will live together with their children or grandchildren. Children and their parents (elderly) cannot be separated from their relatives because they have a close relationship with each other. Elderly who live with family members will get attention, emotional connection, create feelings of love and self-esteem, and these give the elderly opportunity to have a happy and healthy life.¹¹ The psychological problem such as depression among the elderly can be reduced by creating feelings of a closer relationship with family members, such as providing more emotional support to the elderly.^{8, 12, 13}

Based on the logistic regression test, this study obtains that emotional, appreciation, and informational supports are associated with mental health in the elderly. From those three aspects, appreciation support can create a stronger relationship which is followed by emotional support. These results are supported by previous studies, which have proven a higher role of emotional support and family support of the elderly's psychology.⁶ Elderly who get better emotional support from family have a better sense of psychological well-being.¹³ In addition, there are a number of previous studies that show the correlation between family support and mental health in the elderly, for example, a study in China which involved 11,511 elderly people (aged ≥ 60 years), found that family support has a negative correlation with the level of depression. The elderly who get better support from family show less sign of depression.⁸ Another study also conducted in China showed that family support was an intermediate variable between marital status and depressive symptoms in the elderly.¹⁴ Meanwhile, in the USA, it was found that elderly who were suffering from arthritis and received higher family support showed a significant reduction in depression symptoms.¹⁵ Also, a study conducted by Galardo-Parelda on 493 (age ≥ 60 years) elderly people proved that support from children and other family members could prevent the development of depression in the elderly.¹⁶ It was found that the mental health of the elderly tended to be better in those who received better assistance from children.¹⁷

Appreciation support relates to respect for the elderly, asking for and listening to ideas/advice from them, communicating in polite language and etcetera. Emotional support focuses on giving sincere affection, being a listener about their feelings and complaints, and showing concern when the elderly have problems or unwell conditions. While the focus of informational support is problem solving, providing knowledge such as giving health information or other insights needed and enjoyed.

Referring to these findings, researchers suggest that there should be a program aimed at increasing knowledge and raising awareness of all family members who have elderly people. The main responsibility of this strategic role belongs to the organization of public health services.

V. CONCLUSION

The results of this study can be concluded that emotional support, appreciation, and informational support from the family can create a significant role in the mental health of the elderly. The program on family support needs to be implemented. This program is an effort that can be implemented by public health service organizations which aims at increasing knowledge and awareness of families about the importance of their contribution to the mental health of the elderly.

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