Caring for an Elderly, Sick Spouse Sometimes Has Positive Elements

ScienceDaily (June 23, 2010) — Although long-term care of sick or disabled loved ones is widely recognized as a threat to the caregiver's health and quality of life, a new study led by University at Buffalo psychologist Michael Poulin, PhD, finds that in some contexts, helping valued loved ones may promote the well being of helpers.

"Does a Helping Hand Mean a Heavy Heart?" published in the journal Psychology and Aging (2010, Vol. 25., No. 1), reports on a study by Poulin and five co-authors from the University of Michigan Department of Internal Medicine, which closely analyzed helping behavior and well-being among 73 spousal caregivers, many of them elderly.

Poulin, an assistant professor of psychology, says the study team wanted to learn if there were some positive aspects of caregiving, aspects that did not provoke the burnout, high stress and poor health associated with being a caregiver. If so, they wanted to know why these aspects had a positive effect.

They learned that despite the burdensome nature of their role, caregivers experience more positive emotions and fewer negative emotions when they engage in "active care" like feeding, bathing, toileting and otherwise physically caring for the spouse.

"Our data don't tell us exactly what psychological processes are responsible," he says, "but we hypothesize that people may be hardwired so that actively attending to the concrete needs and feelings of others reduces our personal anxiety."

The study found that passive care, on the other hand, which requires the spouse to simply be nearby in case anything should go wrong, provokes negative emotions in the caretaker, and leads to fewer positive emotions.

The study involved 73 subjects (mean age was 71.5 years, age range was 35-89 years) who were providing full-time home care to an ailing spouse. Participants carried Palm Pilots that beeped randomly to signal them to report how much time they had spent actively helping and/or being on call since the last beep, the activities they actually engaged in and their emotional state at that moment.

The researchers found no moderating effects of age on the association between helping and well-being. In other words, helping predicted positive and negative effects similarly for adults of all ages. One variable that did affect outcome was the level of perceived interdependence with the spouse experienced by the caregiver -- that is, the extent to which caregivers viewed themselves as sharing a mutually beneficial relationship with their spouse.

"For interdependent couples, the positive effects of active care were particularly strong," Poulin says, adding that this outcome supports the prediction that "individuals should derive the greatest satisfaction out of helping those with whom they perceive a shared physical or emotional fate."
Poulin says study findings have broad implications for research on caregiving and for research on helping behavior more generally, especially in the aging context.

"Overall," he says, "we wouldn't say that caring for an ailing loved one is going to be good for you or healthy for you, but certain activities may be beneficial, especially in high-quality relationships."

Researchers and social scientists want government or other agencies to provide respite for caregivers, which would be a good thing, Poulin says, "but as this study demonstrates, it is extremely important that caretakers receive the right kind of relief at the right time -- perhaps less time off from active care duties, and more time off from the onerous task of passively monitoring an ailing loved one."

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