

# Self-Esteem as a Predictor of Caregiving: A Longitudinal Study of Hospice Patients and Informal Caregivers

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## Introduction

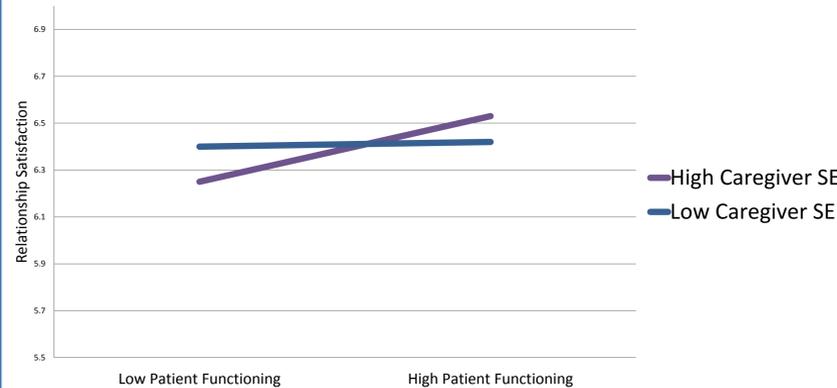
- Many people find themselves in a caregiving role when a loved one becomes sick or injured. Though this is a common occurrence, the transition into the role of informal caregiver is not simple for a person to do (Ironson, 2007). Caregivers experiencing stress in this transition may find it hard to focus on improving the situation that their loved one is in.
- In Hospice care settings, caregivers may be especially distracted by the imminent loss of their loved one. Informal caregivers are usually not trained in handling emotional burdens of providing care, and can find it difficult to watch a patient's health decline (Jo, Brazil, Lohfeld, & Willison, 2007).
- As a loved patient's symptoms worsen, some caregivers may shift their focus to self-preservation due to feelings of premature bereavement, failure, and grief. They may decrease their devotion to the patient to buffer stress with feelings of security, harming the quality of the relationship (Amirkhanyan & Wolf, 2003). However, other caregivers may react to the decline in health of their loved one by focusing more attention on them, bolstering the relationship. Self-esteem has been linked to caregiver's reactions to threatening events such as this (Nijboer et. al., 1999)
- In past work on romantic relationships, there is strong evidence in support of self-esteem as a variable that partially decides how a partner reacts during a situation that is threatening to the relationship (Murray, 2005).
- Though romantic relationships and patient-caregiver relationships can be quite different, the same underlying principle may drive individuals' reactions to unwanted relationship threats, such as the decline in a loved one's functioning.
- Hypotheses:
  - Caregivers who meet criteria for high self esteem will report and provide higher relationship satisfaction than caregivers with low self-esteem.
  - An interaction will be seen between caregiver self-esteem and patient relationship quality such that, among caregivers in the high self-esteem group, relationship quality will significantly increase as a patient's functioning decreases. In comparison, among caregivers with low self-esteem, quality of care will decrease as physical health decreases.

## Participants and Procedure

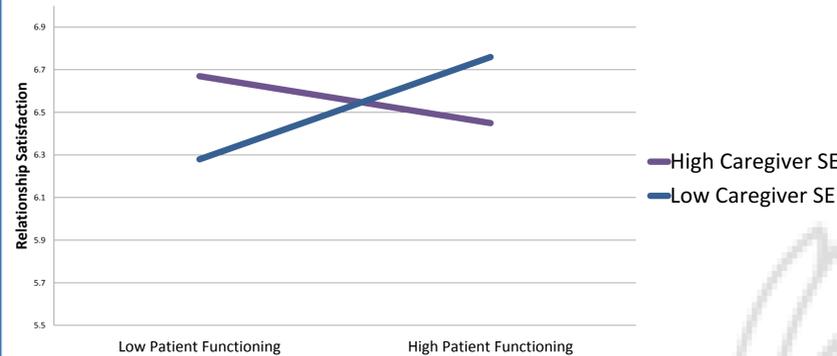
- Participants for this study were derived from patients and their caregivers in the Hospice Buffalo program. There were a total of 20 patients and 23 caregivers that completed all of the required measures and participated in at least one follow-up session.
- Participants first completed an in-home intake evaluation and series of questionnaires, and then had follow-up surveys every two weeks for three months, or until withdrawal (between 1 and 6 follow-up sessions)
- Participants were part of a larger cooperative study between the University of Buffalo and Hospice Buffalo.
- Participants were not compensated for this study, but many were happy to help better the understanding of caregiver-patient relationships.
- Measures:
  - patient physical functioning: Missoula/VITAS Quality of Life Scale, symptom dimension (Byock & Merricman, 1995)
  - Caregiver self-esteem: Single-Item Self Esteem questionnaire (Robins, Hendin, & Trzesniewski, 2001)
  - Patient relationship quality (four item questionnaire: Murray, Holmes, & Griffin, 1996)
  - Caregiver relationship quality (four item questionnaire: Murray, Holmes, & Griffin, 1996 )

## Graphs

Caregiver Relationship Satisfaction



Patient Relationship Satisfaction



## Results

A random effects regression with follow-up time points (1-6) nested within individuals tested caregiver self-esteem and patient relationship quality. Results indicated that patient symptoms over time significantly interacted with baseline caregiver distress to predict patient relationship satisfaction ( $B = -0.02$ , 95% C. I.  $-0.03$ ,  $-0.003$ ;  $p = .01$ ) For patients with low self-esteem caregivers, better physical health predicted better patient relationship satisfaction ( $B = 0.02$ , 95% C. I.  $0.003$ ,  $0.04$ ;  $p = .03$ ). By contrast, for patients with high self-esteem caregivers, better physical health predicted marginally poorer patient relationship satisfaction ( $B = -0.01$ , 95% C. I.  $-0.02$ ,  $0.0005$ ;  $p = .06$ )—or, in other words, for patients with high self-esteem caregivers, poorer physical health predicted better relationship satisfaction.

In addition, patient symptoms also interacted over time with baseline caregiver self-esteem to predict caregiver relationship satisfaction ( $B = 0.01$ , 95% C.I.  $0.001$ ,  $.02$ ;  $p = .04$ ). Results indicated that for low self-esteem caregivers, patient functioning did not have any effect on caregiver relationship satisfaction ( $B = 0.01$ , 95% C. I.  $-0.01$ ,  $0.01$ ;  $p = .74$ ). However, for high self-esteem caregivers, better patient functioning predicted significantly higher caregiver relationship satisfaction ( $B = 0.02$ , 95% C. I.  $0.01$ ,  $0.03$ ;  $p = .003$ ). Consequently, for caregivers with high self esteem, poorer patient health indicates poorer caregiver relationship satisfaction.

## Acknowledgements

Special thanks to Michael Poulin (Mentor) for all of his guidance, as well as Victoria Kent, Victoria Koch, Megan McCane, Samantha Wagner (Research Assistants) for their efforts and contributions. Thanks also to the team at Hospice Buffalo: Pei Grant, Jennifer Breier, David Byrwa, and the other research assistants.

## Discussion

- The overall results of the analyses demonstrate partial support for my initial hypotheses. As predicted, self-esteem does appear to have a significant effect on patient relationship satisfaction as a patient's health declines, such that low caregiver self-esteem predicts worsening patient satisfaction, while high caregiver self-esteem predicts increasing patient satisfaction.
- In contrast, though I predicted similar results for caregiver relationship satisfaction, the results of this study demonstrate the opposite outcome, where caregivers with high self esteem report decreasing relationship satisfaction as the patient's health declines.
- There are several potential explanations for this surprising finding. Past work on caregiver satisfaction has demonstrated a negative correlation between caregiver relationship satisfaction and burden (Steadman, Tremont, & Davis, 2007). These high self-esteem caregivers may react to the increased burden of worsening patient functioning by providing a higher quality relationship to the patients while sacrificing their own relationship satisfaction.
- Further research on the connection between self esteem and caregiver relationship satisfaction, as well as a larger sample size, would strengthen the findings of this study.

## References

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