

# Death Anxiety, Depression, and Coping in Family Caregivers

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## Abstract

Previous research suggests a relationship between caregiving and depression associated with negative impact on the caregivers' health; however, there remains a gap regarding possible relationships among depression, death anxiety, and coping in family caregivers. In this quantitative study, participants included 46 family caregivers. Multiple regression analysis identified significant relationships between death anxiety, depression, coping, and duration of caregiver experience.

## Problem

Caregiving has been associated with negative physical and psychological impact on the caregivers' health, higher prevalence rates of depression, anxiety, weakened immune function, and higher risk of mortality.

- Between 40% and 70% of caregivers present with clinically significant depressive symptoms.
- Out of 65.7 million current caregivers - 26 to 45 million may be suffering from depression.

Hence, there is a need to understand the relationship between **depression**, **death anxiety**, and **coping** in family caregivers in order to identify what methods or interventions could provide for more efficient coping and alleviate depression and death anxiety.

## Purpose

The purposes of this quantitative, quasi-experimental study of a sample of adult family caregivers of adult patients were to examine

- if any of the demographic variables would be significant predictors of death anxiety
- if death anxiety would be significant predictor of depression and coping.

## Relevant Literature

### Theoretical Frameworks

- Transactional theory of stress (Lazarus & Folkman, 1984)
- Health belief model (Champion, 1984)
- Terror management theory (Pyszcznski, Greenberg & Solomon, 1999).

### Related Research

Literature review revealed

- substantial research on the relationship between caregiving and depression (Schulz & Beach, 1999; Rivera, 2009; Smith et al., 2011)
- limited research on relationship between depression and death anxiety (Barr & Cacciatore, 2008; Furer & Walker, 2008; Hintze et al., 1994; Neimeyer, Wittkowski & Moser, 2004; O'Gorman, 1998)
- complete gap in research on relationships among
  - a. depression
  - b. death anxiety
  - c. coping in family caregivers

## Research Questions

**RQ1:** How do scores on the Revised Collett-Lester Fear of Death and Dying Scale (RCL-FODADS; Lester, 1994) relate to participant demographics (age, gender, education level, number of children, relationship to patient, and duration of caregiver experience)?

**RQ2:** Can death anxiety predict depression and coping in family caregivers?

Responses collected from 46 participants

- Ages: 24-78,  $M = 56.43$ ,  $SD = 11.25$ .
- Gender: women = 41 and men = 5
- Patient's diagnoses: cancer = 12, Alzheimer's disease = 11, dementia = 4, renal failure = 2, traumatic brain injury = 1, and general aging = 1

Depression scores (CESD-R) ranged from 0-44,  $M = 20.43$ ,  $SD = 12.57$ ,  $\alpha = .93$

Coping scores (WCQ) ranged from 20-129,  $M = 72.28$ ,  $SD = 24.94$ ,  $\alpha = .90$

Death anxiety scores (RCL-FODADS) ranged from 45-141,  $M = 88.52$ ,  $SD = 24.89$ ,  $\alpha = .93$

Death anxiety was *positively* correlated with **caregiver experience** ( $r = .34$ ,  $p = .02$ ).

Death anxiety was *negatively* predictive of **depression** ( $\beta = -.33$ ,  $t = -2.33$ ,  $p = .024$ ) and of **coping** ( $\beta = -.35$ ,  $t = -2.40$ ,  $p = .016$ ).

## Procedures

### Sampling

Participants had to be currently (or in the last 5 years) involved in family caregiving of adult patients. Both patient and caregiver had to be over 18. Good reading knowledge of English was required.

### Instrumentation

- *Revised Collett-Lester Fear of Death and Dying Scale*
- *Center for Epidemiological Studies Depression Scale Revised*
- *Ways of Coping Questionnaire*
- *Demographic questionnaire.*

### Data Collection

Invitations to participate in the study posted on websites: caregiver.org (FCA), caring.com, Acor caregiver mailing list.

Study was hosted on surveymonkey.com

## Data Analysis

Analysis of relationship between independent and dependent variables with linear regression (Pearson  $r$ ) Associations analyzed with a hierarchical multiple regression to explain variance.

## Findings

## Limitations

Sample was mostly represented by U.S. caregivers and could be considered too small for generalizability of the results to caregivers worldwide.

Choice of death anxiety instrument because research on death anxiety is scarce.

## Conclusions

This study was the first to examine the relationship between death anxiety, depression, and coping in caregivers.

Raises awareness and provides education to all those dealing with family caregiving.

Focus of efforts to develop new assessments and interventions for caregivers.

Death anxiety needs to be assessed in caregivers and appropriate interventions developed to help reduce or eliminate the fear of death and dying.

Duration of caregiver experience is important to consider in assessment.

## Social Change Implications

This study findings suggest that the absence of depression in caregivers does not exclude caregiver strain, which may be predicted by death anxiety.

Furthermore, the duration of caregiver experience contributes to the increase of death anxiety.

Death anxiety and duration of caregiving – significant risk factors in caregiver coping.

Further research and investigation of factors contributing to caregiver burden are needed to help design interventions reducing negative impact of caregiving.

Results of this study to be disseminated to all professionals, practitioners, and support organizations involved in dealing with family caregivers.