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# Quality Of Life And Burnout: A Study On Caregivers Of Elderly

Pooja Jain

Student, Amity Institute of Psychology and Allied Sciences, Amity University, Uttar Pradesh

pooja.jain1703@gmail.com

## ABSTRACT

The study aims to investigate the relationship between quality of life (QoL) and burnout in caregivers of the elderly. It focuses on assessing the relationship between domains of quality of life such as physical, psychological, social relationships and environmental well-being with burnout among caregivers of the elderly. It also investigates the predictors of burnout among caregivers including emotional strain and self-care practices. The study uses the quantitative approach, making use of The World Health Organization Quality of Life Scale (WHOQOL-BREF) and Zarit Caregiver Burden Assessment to measure the QoL and burnout, respectively. The study was conducted on a population of 120 people aged between 25-55 years which comprised 62 females (51.7%) and 58 males (48.3%). Participants completed the QoL scale and Zairt Burden Scale to assess the correlation between QoL and burnout among caregivers of the elderly. A correlational study was used to analyze the correlation between QoL and burnout among caregivers of the elderly. Analysis revealed a significant negative correlation between QoL and burnout. The Pearson's correlation coefficient between the physical domain

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of QoL and burnout was found to be negative (r= -.417, p< 0.01), between the psychological domain of QoL and burnout was found to be negative (r= -.396, p< 0.01), between social relationship and burnout was found to be negative (r= -.372, p< 0.01) and between environmental well-being and burnout found to be negative (r= -0363, p< 0.01).The findings provide insights into the impact of caregiving on the QoL and burnout levels of caregivers, focusing on the need to provide interventions to the targeted population thus enhancing the overall QoL and well-being in this population.

**Keywords**: *Quality of Life, Burnout, Caregiver burden, Caregivers of elderly*

## INTRODUCTION

Informal care is frequently given by those who are close to the dependent person—most often, family members or those with whom the dependent person has a strong emotional connection. Caregivers provide a range of services without any kind of compensation or training. Women and people in their middle years typically fill the job of informal caregivers.

Though it can be immensely fulfilling, caring for a loved one comes with a lot of worry. Furthermore, the emotional toll can mount over time because providing care is frequently a lifelong endeavor. The caregiving obligations may last for years or even decades. Experiencing a sense of overwhelm, losing faith that your loved one will recover, or seeing their condition steadily worsen despite your best attempts can be especially depressing.

The study focuses on the relationship between burnout and quality of life of caregivers of the elderly, aiming to shed light on the underlying dynamics and provide insight into possible paths for support and intervention. The well-being of caregivers, who manage the difficulties and complexities included in their caregiving jobs is at the core of this study. Numerous obstacles that informal caregivers face on a personal, professional, and social level make the

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occupation stressful. This stress manifests itself in physical and mental health issues as well as poor quality of life. High levels of sadness, a heavier financial load, greater physiological impact, a decline in the quality of life and interpersonal connections, and an increase in burnout are all linked to being a caregiver.

**Quality of Life**

Quality of Life (QoL) is defined by the World Health Organization as "an individual's perception of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards and concerns”

The caregiving role, while fulfilling, can also be highly demanding and stressful, impacting various aspects of caregivers' lives, including their physical health, emotional well-being, social relationships, and overall quality of life (Pearlin et al., 1990; Roth et al., 2015).

Quality of life, a multidimensional construct encompassing subjective evaluations of one's physical health, psychological well-being, social relationships, and environmental factors (World Health Organization, 1997), is a crucial aspect of caregivers' experiences.

According to research, people who look after the elderly tend to have lower quality of life than people who do not provide care, and they also have greater rates of physical health issues, anxiety, and depression (Pinquart & Sörensen, 2003; Schulz & Sherwood, 2008). Caretakers may experience stress and strain due to the responsibilities of caregiving, which include handling complicated medical problems, navigating healthcare systems, and offering both practical and emotional assistance (Yin et al., 2020).

Meanwhile, one can consider the theory of quality of life (Ferrans et al., 2005). This model considers not only physical health but also life's entire dimensions, integrating

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sociological and biomedical viewpoints. The biological processes, symptoms, functional status, health perception, personal and environmental variables, and their causal relationships are taken into consideration while evaluating the quality of life elements.

Therefore, this study incorporated fatigue as a component in the biological function, functional status, and overall health perception of caregivers based on research results linked to the quality of life of caregivers of the elderly and the aforementioned model. The majority of symptoms are reflected by the depression variable, which is more prevalent in women.

In parallel, caregivers play a vital role in supporting the aging population, but their work often comes with difficulties and stress. The need for caregiving services is increasing due to the world's aging population, which emphasizes the urgent need to assess the wellbeing of people who take on this role.

**Burnout**

Burnout, a condition marked by depersonalization, diminished personal accomplishment, and psychological fatigue, is one of the most urgent issues in the context of caregiving (Maslach et al., 1986). American Psychological Association defines burnout as, ‘physical, emotional, or mental exhaustion accompanied by decreased motivation, lowered performance, and negative attitudes toward oneself and others. It results from performing at a high level until stress and tension, especially from extreme and prolonged physical or mental exertion or an overburdening workload, take their toll.’

Elderly caregivers have a wide range of duties and responsibilities, such as monitoring medical treatment, and assisting with everyday tasks, while offering emotional support. Long-term exposure to these demands can be adverse to the mental and emotional well-being of caregivers, increasing the risk of burnout and its aftereffects. Even though burnout is common

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and significant among elderly caregivers, an in-depth study of this problem is still necessary, given its complexity and the effects it has on both caregivers and care recipients (Roth et al., 2015).

Numerous studies have shown that burnout is common among elderly caregivers and that it negatively impacts both the caregivers' well-being and the standard of care given to the elderly. In this context, a meta-analysis by Pinquart & Sörensen (2003) revealed that caregivers of elderly experienced higher levels of burnout than non-caregivers, which had serious consequences for their mental and physical well-being.

Likewise, Roth et al. (2015) examined the correlation between middle-aged and older individuals' emotional strain and family caring, emphasizing the negative effects of burnout on caregivers' quality of life. In addition, negative consequences include higher rates of anxiety, sadness, and physical health issues due to burnout among caregivers (Schulz & Sherwood, 2008).

According to Maslach et al. (2001) burnout-affected caregivers may also show less empathy and compassion for the people they are caring for, which could lower the standard of care and increase caregiver distress.

**Quality of Life and Burnout**

The complex and multidimensional relationship between caregivers' quality of life and burnout is impacted by a range of factors including individual characteristics, external support networks, and duties as caregivers. Gaining an understanding of this relationship is crucial for developing interventions that support caregivers' well-being and improve the standard of care given to recipients of care. According to Stewart and Yuen (2011), several factors, including social support, coping mechanisms, and the burden of caregiving, may play a significant role

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in determining the experiences and results of caregivers and in influencing how they perceive their resilience and well-being in the face of caregiving difficulties.

Research on the effects of caregiving on caregivers' well-being is already extensive, but studies that explicitly look at the correlation between burnout and quality of life among caregivers of the elderly are still limited. In order to close this gap, this study uses theoretical frameworks from sociology, psychology, and healthcare to conduct an in-depth study of these constructs within the context of caregiving.

## Review Of Literature

***Effect of Laughter Therapy on Mood Disturbances, Pain, and Burnout in Terminally Ill Cancer Patients and Family Caregivers (Moon et al., 2024)*** The purpose of this study was to investigate the impact of spontaneous laughing therapy on pain, mood disorders, and burnout levels in family caregivers as well as in terminally ill cancer patients. There were significant decreases in mood disturbances in the patients ($P < .001$) and family caregivers ($P < .001$), pain in the patients ($P < .001$), and levels of burnout in the caregivers ($P < .001$) in the intervention group.

***Psychological capital, quality of life and well-being in mother caregivers of individuals with down syndrome (Chiracu et al., 2023).*** The purpose of this study is to examine the connection between the psychological capital, quality of life, and wellbeing of those who provide care for people with Down syndrome (DS). Participants included 98 mothers ($M = 52.13$, $SD = 11.39$) who looked after people with Down syndrome. The Psychological Capital Questionnaire, Quality of Life Questionnaire, and Psychological Wellbeing Scale were the tools utilized to examine the following aspects: personal development, autonomy, environmental mastery, self-acceptance, positive interpersonal relationships, and purpose in life. According to the study,

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optimism is favorably correlated with well-being, while self-efficacy, hope, and resilience are positively correlated with quality of life. The QoL acts as a mediator in the relationship between psychological capital and well-being, with psychological capital having overall positive and significant effects on well-being.

***The distinctive role of grounded optimism and resilience for predicting burnout and work engagement: A study in professional caregivers of older adults (Nieto et al., 2022).*** The main aim of this study was to compare the differential significance of resilience and optimism, on the prediction of burnout and work engagement. A sample of 265 professional caregivers of dependent older adults was assessed using an extensive standardized protocol. The results showed that more than half (51%) variance in resilience was accounted by grounded optimism scores. These findings support distinctive role resilience and optimism, two closely related psychological constructs, for promoting work engagement and reducing burnout in professional caregivers of older adults.

***Burden of care and quality of life in caregivers of children and adolescents with autism spectrum disorder (Patel et al., 2022)*** A cross-sectional survey carried out in a government facility in northern India that provides outpatient services for child and adolescent psychiatry. Forty parents of autistic children made up the sample. The caregivers' average age was 34.72 ± 6.32 years. The WHOQOL-BREF and BAS questionnaires were utilized. The average care load on BAS was 71.73 ± 8.62, suggesting a significant level of stress for those who look after people with ASD. Caregivers of children aged 6 to 12 as well as those from low-income households reported a much higher hardship. The amount of care that caregivers must provide and the severity of autism have been found to positively correlate. The study also discovered that the caregiver's quality of life deteriorates as symptom intensity rises.

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***Quality of Life and Burden of Caregiving among the Primary Caregivers of Children with Disability in Rural Karnataka (Sakthi & Shanbhag, 2021).*** A cross-sectional study was done among 100 children with disability and their primary caregivers. Interview schedule including socio-demography, WHOQOL-BREF, ZBI and WHODAS was used. Mean age of caregivers was 36.38 of which 97% were women and 82% were mothers of children with disability. Mean age of children was 11.43 years, 56% males and most common diagnosis was multiple disabilities (38%). Caregiver QOL is overall poor but it was the lowest in the physical domain and higher in psychological domain. Caregiver burden scores were high and depends on the type of disability. Importance should be given to the care of the caregivers. Basic Psychological Needs in the Reduction of Caregiving Burnout.

***Caregiving burnout of community-dwelling people with dementia in Honk-Kong and New Zealand (Chan et al., 2021).*** A cross-sectional study with a representative sample helps to understand how caregivers experience burnout throughout this region. The study explored the prevalence and contributing factors of burnout of caregivers of community-dwelling older people with dementia in Hong Kong (HK), China, and New Zealand (NZ) in this study. In HK and NZ, caregiver burnout affected 15.5% and 13.9% of the sample, respectively. There are cross-regional variations in the elements that lead to burnout. In New Zealand, the primary caregiver's age was found to be a significant contributing factor, but in Hong Kong, the primary caregiver's history of falls and cohabitation with the care recipient were important contributing variables.

***A Harmful Care: The Association of Informal Caregiver Burnout With Depression, Subjective Health, and Violence (Gérain & Zech, 2021).*** A sample of 499 informal caregivers answered questions about violence, depression, burnout, and subjective health in order to look into these relationships. The possible relationship between burnout and these possible outcomes was examined using hierarchical regression models, which also controlled for

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received violence and sociodemographic variables. The findings demonstrate a significant correlation between burnout, particularly emotional tiredness, and depression, bad subjective health, and physical violence, but not psychological violence.

***The burden of care and burnout syndrome in caregivers of an Egyptian sample of schizophrenia patients (Khalil et al., 2021).*** To assess the burden of care and burn out syndrome in the caregivers of schizophrenia patients and its sociodemographic and clinical correlates. The result of studies shows that the levels of burnout syndrome and burden of care is high in caregivers of schizophrenia patients, caring for caregivers is very important for providing better mental health services, but more research is still needed in this field.

***Posttraumatic stress symptoms, quality of life, and stree burden in caregivers of patients with severe mental health illness (Rady et al., 2021).*** The prevalence of PTSD symptoms, quality of life, and stress burden among patients' caregivers who have severe mental illness were all examined in this study. From university hospital outpatient facilities, a total of 70 carers of patients with severe mental illness and 70 control individuals who were caretakers of patients with a chronic debilitating medical condition (cardiovascular disease) were recruited. We used the ZBI, QoL questionnaire, and PDS to assess both groups. As compared to 0% of caregivers of patients with physical illnesses, the results showed that 37.14% (n = 26) of caregivers of patients with severe mental illness displayed PTS symptoms, and 15.17% (n = 11) matched the diagnostic criteria for PTSD. Compared to the control group, caregivers of patients with serious mental illness reported higher stress burden and lower QoL scores ($p < 0.05$). The significance of offering psychological help to patients who are carers of severely mentally ill patients is underscored by our data, which show that this group has a significant stress burden that can result in PTSD.

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***Needs, Aggravation, and Degree of Burnout in Informal Caregivers of Patients with Chronic Cardiovascular Disease (Czyczerska et al., 2020).*** This study is a cross-sectional observational study. This study is part of a broader study to identify indicators that determine the effectiveness of home care for patients with chronic CVD, and to identify variables that determine effective support systems for their home caregivers. The study involved 350 patients with CVD. In order to define indicators specific to home care, 193 patients remained in the home under the care of primary care family nurses, while 157 patients went out to see their GP for follow-up visits. The study also included caregivers of patients under home care of primary care family nurses. The study involved 161 caregivers.

***Quality of Life in Nursing Professionals: Burnout, Fatigue, and Compassion Satisfaction (Fernández et al., 2020).*** The objective of this study was to analyze how nursing professionals' quality of life relates to sociodemographic factors and the workplace environment. A descriptive, cross-sectional, multi-center design was employed. 1521 nurses employed by the Andalusian Public Health System (APHS) in Spain were given questionnaires. An assessment of the professional quality of life (ProQOL v. IV) and a number of sociodemographic and occupational variables were conducted. In order to do this, many exploratory studies as well as a descriptive analysis were carried out. Burnout (BO) and compassion fatigue (CF) were seen in higher amounts. Compassion satisfaction (CS) was not at the anticipated mean level.

***The role of self-compassion, concern for others, and basic psychological needs in the reduction of caregiving burnout (Gerber & Anaki, 2020).*** The study aims to investigate the theoretically motivated mediation model that posits various fundamental psychological needs, as described in the self-determination theory, as the mediating factors in the relationship between burnout and compassion for oneself and others. Results showed that lower degrees of burnout were linked to self-compassion and care for others. A three-layered model of (a) compassion and self-compassion, (b) fundamental psychological needs, and (c) burnout was

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supported by the fact that each of these barriers to burnout was mediated by a distinct psychological need.

***Burnout, Compassion Fatigue, and Secondary Trauma in Nurses (Kelly, 2020).*** This study outlines the shift from seeing burnout as a personal issue to seeing it as a phenomenon that affects workers, while also emphasizing the significant role that secondary trauma plays in causing compassion fatigue. As a result, there are many different facets and intricate solutions when it comes to treating burnout. The external burden of providing care for patients as well as organizational policies and practices—such as unhealthful work conditions, inadequate communication, stigma, and more—are the main causes of burnout.

***Exploration of the relationship between stigma and burnout among Greek nurses in Dementia care (Mantzorou et al., 2020).*** The aim of the study is to study the possible correlations between stigma and burnout of nurses and non-graduate professional caregivers of elderly with dementia in nursing homes. This cross-sectional study involved a convenience sample of 171 nurses and other professional caregivers in 16 Greek elderly care units who responded to Maslah Burnout Inventory (MBI) as well as the Family Stigma in Alzheimer's Disease Scale (FS-ADS). In order to find adjusted associations between independent variables and the stigma and burnout of professional caregivers, multiple linear regression analysis was used. Cognitive, emotional and behavioural attributions of the three dimensions of stigma were found to be independent predictive factors of burnout's dimensions which indicate that stigma nurses deposit on patients, contributes towards their burnout.

***Relationship between education, personal and social competences and quality of life of adult family caregivers (Santos et al., 2020).*** The aim of the research was to assess the quality of life (QoL) of family caregivers of adults with disabilities or intellectual disabilities by determining which WHOQOL-Bref domains and facets were most impacted. Additionally, the study sought

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to determine the degree of correlation between certain care delivery-related variables and the QoL of family caregivers. N=30, ages 20–57. The findings of this study show that there is no discernible impact on the WHOQOL-Bref domains. It was also confirmed that the quality of life (QoL) of family caregivers is negatively correlated with both objective and subjective burnout. But there is a negative correlation between QoL and the measure of personal growth. This study emphasizes the value of leadership development for family caregivers in terms of their social skill development and personal growth.

***The effect of caregiver on formal caregiver's quality of life: a mixed methods study (Kalanlar & Alici, 2019).*** This study is a comprehensive assessment of the effects of formal caregivers' care burden on the quality of their working lives. Descriptive statistics were used for quantitative analysis and thematic statistics for qualitative analysis. The quantitative and qualitative data were merged and integrated for a mixed-method analysis. The relationship between the quality of working life and care burden was statistically significant for the formal caregivers. The results of the interviews supported this relationship. Four themes emerged from the interviews: the effects of caregiving on care staff, the effects of caregiving on caregivers' daily lives, the requirements for providing better care and caregivers' description of caregiving in a few words.

***Quality of Life of Caregivers of Individuals with Parkinson's Disease (Lee et al., 2019).*** The purpose of this research was to develop a structural equation model for predicting the quality of life of those who provide care for people with Parkinson's disease. Participants were adult children (45.2%) or spouses (46.2%) of Parkinson's disease patients. The average quality of life score for the caregiver was 40.94 ± 25.30. 67.0% of the variation in caregivers' quality of life could be explained by the predictors, which included social support, caregiving assessment, and needs for educational programs. For the purpose of creating resources for caretakers of

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Parkinson's disease patients, quality of life prediction is helpful. More research is required to fully understand the complex facets of caregivers' quality of life.

***Effects of mindfulness, coping styles and resilience on job retention and burnout in caregivers supporting aggressive adults with developmental disabilities (Nevill & Havercamp, 2019).*** The study aimed to investigate how coping style, resilience, and mindfulness affected a sample of direct support workers who worked with aggressive people who had developmental disabilities in terms of caregiver burnout and retention. Ninety-seven direct support professionals were surveyed to determine level of mindfulness, coping styles, resilience and burnout. Avoidance-focused and maladaptive coping appeared as risk factors, while problem-focused coping and the ability to describe one's surroundings objectively and mindfully emerged as protective factors against burnout. The only factor that could predict job retention was mindful openness.

***Work Environment and Elderly Abuse in Nursing Homes: The Mediating Role of Burnout (Andela et al., 2018).*** The study focuses on elder abuse in nursing homes by nurses and nurse assistants. The study took into account caregiver fatigue and the work environment of these professionals in an effort to gain a better understanding of abusive and neglectful behaviors. 481 nurses and health care helpers from various French nursing homes participated in the study. Analysis of mediation, multiple regressions, and correlations were carried out. Global results supported our theories. The most significant predictors of elder abuse, neglect, and caregiver burnout were emotional demands and low-quality interactions with coworkers and the team supervisor. Furthermore, by emphasizing the mediating role of burnout and raising possible implications for reducing elder abuse in nursing homes, the results added to the body of knowledge.

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***Initiative for Burnout of ICU Caregivers: Feasibility and Preliminary Results of Psychological Support. (Ricou et al., 2018).*** This is the first study aiming to assess the impact of a psychological intervention on the mental health of caregivers in intensive care units. It demonstrates a modified holistic approach to psychological assistance in the unique ICU setting. We proved that such a method is possible, despite the modest results regarding the short process duration and personnel turnover. To find out how these interventions affect ICU caregivers' mental health, more extensive and longer-term research is required.

***Exploring the association between optimism and quality of life among informal caregivers of persons with dementia (Ruisoto et al., 2018).*** In this cross-sectional study, a hierarchical multiple linear regression analysis was used to determine the association between optimism and caregiver's QoL after controlling the effect of different covariates, including burden. A sample of 130 PWD and their informal caregivers underwent a comprehensive protocol of assessment. QoL correlated positively with optimism and negatively with burden. Optimism predicted each dimension of QoL, even after controlling for the effect of sociodemographic, care-recipients' clinical covariates, and burden in all models.

***Quality of life of family caregivers of cancer patients in Singapore and globally (Lim et al., 2017).*** The findings of the concluded that the potential areas for supporting family caregivers of cancer patients and emphasize the need of balancing Singapore's cultural variety, beliefs, societal expectations, and demographics. Compared to their Western colleagues, caregivers in Singapore and Asia scored lower overall on the CQOLC. It was discovered that caregivers with lower quality of life were male, Chinese ethnic, and had a paternal relationship with the person they were caring for.

***Coping strategies and quality of life in caregivers of dependent elderly relatives. (Pérez et.al., 2017).*** A descriptive cross-sectional study was conducted on primary caregivers of dependent

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elderly relatives attended in an urban health center in Huelva (Southern Spain). After controlling the potential confounders, dysfunctional coping was related to worse quality of life in the psychological dimension, while emotion-focused and socially-supported coping was related to superior psychological and environmental dimensions of quality of life. The physical and relational dimensions of quality of life were not related to coping strategies.

***Mental health among younger and older caregivers of dementia patients (Koyama et al., 2016).*** The study aimed to identify characteristics associated with mental health issues in younger and older caregivers, as well as to compare the mental health of dementia caregivers with that of community members. A multiple regression study showed that the declining mental quality of life of caregivers was linked to the behavioral and psychological symptoms of dementia in younger caregivers, as well as to the instrumental activities of daily living (ADL) and gender of the patients in older caregivers.

***Quality of life of caregivers of mentally ill patients in a tertiary care hospital (Basheer et al., 2015).*** This study aims to explore the QoL and its correlation with psychological, social demographic factors among caregivers of mentally ill patients. Of 100 caregivers, 66% were men, 47% were parents and 64% were literate. Caregivers of mentally ill patients have diminished QOL levels. Studies measuring QOL among caregivers can help initiate early intervention among vulnerable caregivers. This study helps in increasing the awareness among professional health care workers, to identify at-risk caregivers.

***The quality of life of female informal caregivers (Novi et al., 2015).*** This study analyzes the impact of the provision of care on the health and quality of life (QoL) of adult female informal caregivers using a representative sample drawn from the survey of health, aging, and retirement in Europe Scandinavia. According to the study, informal caregiving is a complicated phenomenon that can provide psychological benefits as well as distress to caregivers. This

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complexity, in addition to the geographic gradient, emphasizes how crucial it is to make sure that policies are tailored to meet the needs of specific caregivers in their unique geographic and cultural contexts.

***Factors influencing the quality of life of family caregivers of the elderly with dementia (Pereira & Soares, 2015).*** This study, an integrative review, aimed to examine the variables influencing family caregivers' quality of life when caring for elderly dementia patients. Articles from Lilacs, Medline, and the BDENF databases were searched, 477 studies were chosen, and 11 of those studies satisfied the inclusion requirements to make up the review's sample. It was discovered that the following variables affect caregivers' quality of life: depression; insufficient sleep; dementia type and neuropsychiatric symptoms; support, social support, and access to health services; leisure; pre-existing health issues; caregiver training interventions; and spirituality. In order to create care plans, it is advised that the nursing professional ascertain the needs of the caregivers.

***Caregiving burden and the quality of life of family caregivers of cancer patients: the relationship and correlates (Rha et al., 2015).*** A secondary data analysis of a cross-sectional descriptive study was conducted to describe the influence of caregiving burden on the QOL of family caregivers of cancer patients with consideration of correlates (N = 212). Taking care of others played a big role in quality of life (QOL), accounting for 30.3% of the- variation (β = -0.534, p < 0.001). Caregivers felt more- strain when patients lost ability to function. Those caring for hospitalize-d patients had lower QOL. The care-giver's education level significantly impacted their QOL.

***Health and Quality of life of family and professional caregivers of dependent elderly. (Flores et al., 2014)*** The study intends to compare and contrast the health and quality of life of family caregivers with those of professionals who provide care for elderly individuals who are

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dependent on them. The results, which were derived from the later evaluation of 600 caregivers—of whom 33.83% were family members and 66.17% were professionals. The findings suggest that the two caregiver groups differ from one another. Because of their responsibilities, family caregivers experience higher levels of stress and have worse physical and mental health. Professional caregivers report higher levels of contentment with their lives overall and with their families, careers, and other pursuits.

***Assessment of the Quality of Life of Caregivers's of Patients Suffering from Chronic Kidney Disease. (Gill et al., 2011).*** This prospective study was conducted on 68 caregivers of patients suffering from chronic kidney disease. The caregivers were divided into two groups. Group A volunteers were caregivers of patients on hemodialysis, whereas Group B were caregivers of patients not on hemodialysis. With a ZBI score of 30.24±17.15 and an average age of 41.6±15.9 years, 68 caregivers were enrolled in the study. There were 36 caregivers in Group A and 32 in Group B. The ZBI ratings showed that Group A had a significantly higher ($p<0.05$) burden than Group B. Group B exhibited considerably higher WHO-QOL-Bref scores across all four domains, indicating a better quality of life.

## Methodology

### Aim

To investigate the relationship between quality of life and burnout of caregiers of elderly.

### Objectives

- To assess the relationship between physical well-being domain of quality of life and burnout in caregivers of elderly.

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- To assess the relationship between psychological well-being domain of quality of life and burnout in caregivers of elderly.
- To assess the relationship between social concerns domain of quality of life and burnout in caregivers of elderly.
- To assess the relationship between environmental well-being domain of quality of life and burnout in caregivers of elderly.

## Hypothesis

- There would be significant relationship between physical well-being domain of quality of life and burnout in caregivers of elderly.
- There would be significant relationship between psychological well-being domain of quality of life and burnout in caregivers of elderly.
- There would be significat difference between social concerns domain of quality of life and burnout in caregivers of elderly.
- There would be significant difference between environmental well-being domain of quality of life and burnout in caregivers of elderly.

## Variables

Quality of life, burnout, caregivers of elderly.

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**Sample**

A sample of 120 caregivers aged between 25-55 was collected. The sample comprised of 62 females and 58 males. A random survey was used for the resolution of the sample.

**Measures**

**WHOQOL- BREF:** The WHOQOL- BREF is a self report measure of 26 itmes. Two questions are of general QoL questions and the remaining 24 represents domains of physical well-being (7 itmes) , psychological well-being (6 itmes), social concerns (3 items), and environmental well-being(8 itmes). It is a 5 point likert scale measure, whereby the higher score represents the better QoL. The scale do not provide any unique score of QoL, rather provide score for each domain. The test has goof internal consistency as Cronbach's alpha coefficient for the overall scale is 0.91 and validity results indicated the correlation coefficients values for all dimains is significantly correlated to alpha $< 0.01$.

**Zarit Burden Interview (ZBI):** Caregiver burden was assessed using ZBI. This scale has The Zarit Caregiver Burden Interview (ZBI) was created by Zarit et al. in 1980. It is a self-administered instrument composed of 22 items scored on a Likert-type scale with 5 response options: never (0 points), rarely (1 point), sometimes (2 points), quite often (3 points), and almost always (4 points). The ZBI assesses the impact of psychological well-being, financial situation, relationship of the caregiver and the elderly, and social life. Sufficient evidence of validity and reliability has been reported in different countries and languages.

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## Data Analysis

**Table 1**

*Descriptive Statistics*

| | N | Minimum | Maximum | Mean | Std. Deviation |
|---|---|---|---|---|---|
| **Burnout** | 120 | 5 | 88 | 35.43 | 15.936 |
| **Physical** | 120 | 19 | 100 | 59.99 | 16.112 |
| **Pyschological** | 120 | 25 | 100 | 59.11 | 14.670 |
| **Social relationship** | 120 | 19 | 100 | 64.30 | 19.882 |
| **Environmental** | 120 | 38 | 100 | 64.77 | 12.469 |
| **Valid N (listwise)** | 120 | | | | |

**Table 2**

*Correlations*

| | | Burnout Scale | Physical |
|---|---|---|---|
| **Burnout Scale** | Pearson Correlation | 1 | -.417** |
| | Sig. (2-tailed) | | .000 |
| | N | 120 | 120 |
| **Physical** | Pearson Correlation | -.417** | 1 |
| | Sig. (2-tailed) | .000 | |
| | N | 120 | 120 |

**. Correlation is significant at the 0.01 level (2-tailed).

**Table 3**

*Correlations*

| | | Burnout Scale | Psychological |
|---|---|---|---|
| **Burnout Scale** | Pearson Correlation | 1 | -.396** |
| | Sig. (2-tailed) | | .000 |
| | N | 120 | 120 |
| **Psychological** | Pearson Correlation | -.396** | 1 |
| | Sig. (2-tailed) | .000 | |
| | N | 120 | 120 |

**. Correlation is significant at the 0.01 level (2-tailed).

**Table 4**

*Correlations*

| | | Burnout Scale | Social Relationship |
|---|---|---|---|
| **Burnout Scale** | Pearson Correlation | 1 | -.372** |
| | Sig. (2-tailed) | | .000 |

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| | | | |
|---|---|---|---|
| | N | 120 | 120 |
| **Social Relationship** | Pearson Correlation | -.372** | 1 |
| | Sig. (2-tailed) | .000 | |
| | N | 120 | 120 |
| **. Correlation is significant at the 0.01 level (2-tailed). | | | |

**Table 5**

*Correlations*

| | | **Burnout Scale** | **Environmental** |
|---|---|---|---|
| **Burnout Scale** | Pearson Correlation | 1 | -.363** |
| | Sig. (2-tailed) | | .000 |
| | N | 120 | 120 |
| **Environmental** | Pearson Correlation | -.363** | 1 |
| | Sig. (2-tailed) | .000 | |
| | N | 120 | 120 |
| **. Correlation is significant at the 0.01 level (2-tailed). | | | |

## DISCUSSION

The study focuses on the relationship between burnout and quality of life of caregivers of the elderly, aiming to shed light on the underlying dynamics and provide insights into possible paths for support and intervention.

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The objective of the study is to assess the relationship between different four domains of quality of life and burnout of caregivers of the elderly, who are dependent on their caregivers for their day-to-day activities. The four domains are physical well-being, psychological well-being, social concerns, and environmental well-being.

Table 1 analyses the descriptive data of each domain of QoL and caregiver burden. The mean of caregiver burden is 35.43 which represents the higher caregiver burden. Physical domain mean is 59.99 which shows moderately good physical health, psychological domain mean is 59.11 which shows good psychological health, social concerns mean is 64.30 which shows good social relationships and environmental well-being mean is 64.77 which shows good environmental weel-being.

By analysing the data, it was found that the burnout was slightly high in caregivers of elderly and their quality of life was good on the whole. The correlation between burnout and quality of life of caregivers of elderly indicates an overall negative relationship.

The findings were partially supported by another study which stated that high levels of caregiver burnout are significantly associated with bad quality of life (Choi et al., 2021) More specifically, it was found that higher levels of burnout were significantly correlated with worse psychological, environmental, social relationships, and physical quality of life (Lee & Lee 2021). These findings suggest that burnout has a pervasive impact on caregivers' quality of life, affecting multiple domains of their lives.

Additionally, a moderately negative correlation between the physical domain of quality of life and burnout was found which suggests that there is a significant impact of burnout on the physical health and well-being of an individual. Previous research has shown that informal caregivers of elderly often experience physical health problems, such as chronic pain, physical exhaustion and sleep disturbances (Gaspar et al., 2023).

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A negative correlation between the psychological domain of quality of life and burnout suggested that there is a significant correlation between psychological health and burnout in a caregiver of the elderly. The psychological health can be related to the low mood, anxious feeling, and sadness. The results are also consistent with the previous findings that increased burnout levels were associated with increased derpressive symptoms and low quality of life (Takai et al., 2009)

A moderately negative correlation between social concerns and burnout was found to be a significant factor in the ability to maintain social connections and relationships. Social support from friends and family plays a vital role in well-being of caregivers of elderly. Previous studies have shown that burnout has been associated with reduced social support, and impaired social relationships, which have a negative impact quality of life and well-being of the caregivers ( Linley et al., 2016)

Similarly, a significant negative correlation between burnout and environmental quality of life suggests that caregivers burnout is also associated with their ability to create a supportive environment for themselves and their care recipients. Previous research has shown that caregiver's environmental resources, such as access to transport and satisfactory healthcare services can play an important role in eliminating the negative effects of caregiving (Savage et al., 2023).

## Implications

The moderately negative correlation between the physical domain of quality of life and burnout indicates that as burnout increases, the physical well-being and health of an individual decreases. The implications suggest that possible interventions like providing caregivers with

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training on self-care techniques, relaxation techniques and stress management must be introduced.

Simirarly, the negative correlation between psychological well being and burnout implies that high level of burnout leads to poor psychological and mental health. The possible intervention could be to take breaks between caregiving which can help in reducing burnout.

A study published in BMC Public Health (2024) found that caregiver burden significantly impacts the psychological well-being and quality of life of family members. The study also found that family resilience may function as a moderating factor in this relationship, suggesting that interventions aimed at enhancing family resilience could also be beneficial.

Similarly, the negative correlation between social concerns and environmental well-being with burnout also leads to high levels of burnout and poor quality of life. The findings of this study have implications for the development of interventions aimed at improving caregivers environmental resources such as access to better transportation services and easy access to health care services. Regarding, social concerns, the study suggests that interventions aimed at improving caregivers social support networks may also help to reduce burnout and improve quality of life.

Previous research has shown that social support can be an important factor for caregivers well-being. A study published in the Journal of Gerontological Nursing (Savundranayagam & Shaji, 2023) found that caregivers who reported higher levels of environmental resources, such as access to support services and care reported lower level of burnout and better quality of life.

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## CONCLUSION

The study concluded that there is an association between QoL and burnout in caregivers of elderly. The sample represents overall good QoL but poor level of burnout. The correlation between all the four domains of QoL and caregiver burnout turns out to be negative. These results highlight the significance of identifying and resolving the caregiver burden and poor QoL experienced by the caregivers of elderly, ultimately assisting in the creation of more potemt methods for fostering well-being of informal caregivers of elderly.

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