Assessment of Self-Esteem and Depression in Burn Afflicted Women

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Abstract

Burn is a severe trauma and affected the lives of many. Burn is twice as likely to affect the women as compared to men. Burn afflicted women not only suffer from psychological as well as physical problems. This study is conducted to examine the frequency of burns, level of self-esteem and depression among burn afflicted women and to identify the effects of burns on the lives of burn victims. A cross-sectional study is conducted among 105 young women of age 18 and above, assessment instruments included Beck Depression Inventory (BDI) and Rosenberg Self-Esteem Scale (RSE). Variables were analyzed using descriptive statistics whereas the relationships between different variables were observed using spearman rank correlation and chi square test respectively. Regression analysis is also applied to predict the factors affecting self-esteem and depression among burn afflicted women. The study depicted that majority of women were of age more than 32 years, majority has reported that they have received help and support from their families. This study revealed that majority of the burn victims were burnt accidentally whereas it was explored that 35% women have low, 63% women have moderate and only about 2% women have high self-esteem. It was also observed that 20% women have minimal, 36% women have mild, 29% have moderate and only 15% women have severe depression. It is concluded that self-esteem is associated with family support and type of burn whereas there is a significant relationship between depression, age, family support and type of burn respectively. The results concluded that depression is dependent on burn status, religion, age and marital status whereas self-esteem is dependent on burn status.

Keywords: Burn afflicted; Self-esteem; Depression

Introduction

Burn is the most common injury in most of the developing and under developed countries. Many people severely burnt every year in the world which leads towards psychological and physical disabilities [1-10]. Burn is an injury to skin affected by heat, electricity and chemicals, burn afflicted victims suffer from psychological and physical problems such as depression, self-esteem, isolation and others. The physical and psychological scars are long lasting and often lead to chronic disability [11-16]. With advances in medical sciences, the rate of survival of burn patients is increased but less attention is paid to the social well-being of the burn victims as they find difficulties in their normal routine life matters [4,8]. Pre-morbid characteristics of people who sustain severe burn injuries, their psychological reactions during their stay in hospitals and long-term adjustment are also discussed by many authors [10,11]. Less attention is paid on the emotional needs of patients with burns as compared to their survival from burns. Patients undergo various stages of adjustment and face emotional challenges during various stages of physical recovery [15]. Burns are physically, psychologically and economically challenging injuries and there are many factors that lead to the burns [10,13]. Burns affect the burn victims in many ways, it not only affect their physical appearance rather it has been shown to affect the psychological well-being of the burn victims [2,7]. Psychological and physical problems after burn injuries lead to depression, anxiety, fear of social life and physical discomfort and pain among burn afflicted people [11,15]. Depressive symptoms are common in burn patients and are twice as common among women. Some authors have discussed that psychological interventions along with the medical therapy should be provided to these patients [1,3]. Presence of depression is observed in all the patients, with more females in the moderate and severe group of depression and more males in the mild group of depression [1,7]. Self-esteem scale of burn victims with facial injury was found to be low with 66% of subjects presenting below average scores as compared to 34% with above average scores. Significant association was observed between facial burns and lower self-esteem [5,6]. Patients with a burn injury perceived low social support from society, which negatively affects their health outcomes whereas their resilience levels were not significantly different from their healthy counterparts [14]. Depression and self-esteem were more significant in participants who were not able to work and/or go to school [9,11]. Burn victims perceiving more social support had more positive body images, greater self-esteem and less depression [9,14].

Materials and Methods

This study is a cross-sectional study undertaken at two tertiary care private hospitals in an urban metropolitan area of Pakistan. Both outpatient and inpatient burn units were part of the study. A total of 150 patients were screened out whereas 100 patients approved the inclusion criteria were taken along. The inclusion criteria included female burn injury patients aged between 18-55 years, admitted or followed up, have not diagnosed of depression and/or anxiety before the incident and have shown consent to participate in the study were included. Informed consent was taken from the participants and ethical considerations were taken into account.

Data was collected from burn centers of various hospitals of Lahore whereas data collection instruments were Beck Depression Inventory (BDI) and Rosenberg Self-Esteem Scale (RSE). Beck Depression Inventory (BDI) is proved to be useful in assessing the depression. The questionnaire consists of 21-items, it is designed for individuals aged 13 and over, and is composed of items relating to symptoms of depression such as hopelessness and irritability, cognitions such as guilt or feelings of being punished, as well as physical symptoms such as fatigue and weight loss among others [17]. Rosenberg Self-Esteem

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Scale RSES is designed to assess the self-esteem; it is a 10-item, Likert-type scale with items scored on a 4-point scale, ranging from ‘strongly agree’ to ‘strongly disagree’. Five of the items have positively worded statements and 5 have negatively worded ones. The scale measures state of self-esteem by asking the respondents to reflect on their current feelings. The Rosenberg self-esteem scale is considered a reliable and valid quantitative tool for self-esteem assessment [18]. Statistical data analysis was carried out using Chi-square test, Spearman’s rank correlation and regression analysis techniques respectively. Data was coded and analyzed using SPSS 20.

Results

Demographic and Background factors are used to analyze the level of self-esteem and depression among burn afflicted women. Majority of women (34.3%) were of age more than 32 years whereas majority of women were educated whereas 83.8% of them were unemployed. Majority of women (94.3%) were from urban area and 59% of the women were married. 58.1% women were living in joint family system and 53.3% respondents belong to low socioeconomic status (family income below 30000 Pakistani rupees). About 89% of the respondents reported that the total expenditure incurred on their treatment was 20000 Pakistani rupees or below. The majority of women (82.9%) were burnt accidentally while main reasons of accidental burns were family conflicts, marriage proposal rejection and financial problems among others whereas about 70% women were suffering from burns for a period of less than two weeks. About 78% women reported that their legs, feet, hands and arms were more affected as compared to other body parts. Majority of women (94.3%) received social support from family whereas 53.3% women faced socialization problem after the burn incidence (Table 1).

It is observed that self-esteem is associated with social support received from family and type of burn i.e., how they were burnt (accidentally or non-accidentally). Whereas there is a significant relationship between depression, age, social support received from family and type of burn respectively. In this study, factor analysis was applied to assess the factors of self-esteem and depression, further regression analysis was applied to observe the significant predictors of depression and self-esteem respectively (Tables 2 and 3).

Discussion

Burns are common but every burn is not accidental as they may be homicidal or suicidal. In these incidences the most common reason of burn reported by their families are being caught fire while cooking and explosion due to gas leakage. Accidental burns are common among women that lead to various physical as well as psychological problems. In the developing countries, women face many problems such as lack of access to education, health and income/job opportunities among others. Women having scars of burns are exposed to many problems such as low self-esteem and depression. Current study revealed that there is a significant relationship between self-esteem and accidental burns which is in line with the study by Faisal, Amjad and Zehra. Present study revealed that mild and moderate depression is present in burn afflicted women which is in line with the study by Alvi, Misra and co-authors, Arfaie and Amiri and Jain and co-authors. Whereas current study is in contradiction with the studies by Orr and Teixeira which have suggested that there is less or no depression in burn-injured adolescents and young adults. This study correlates with the study of Waqas and co-authors that social support from family is a significant factor in healing the burns.

This study reported that burn afflicted women faced many problems such as marriage and lack of job opportunities but majority of burn afflicted women faced socialization problem after the burn incidence whereas the previous studies have not focused on the social problems faced by burnt women.

In current study, regression analysis is applied to predict self-esteem and depression among burn afflicted women. It is observed that depression is related to burn status, religion, age and marital status which confirms the findings of the study by Ashrari and co-authors whereas self-esteem is dependent on burn status i.e., the women who have suffered from non-accidental burns were have moderate to high self-esteem and the burn area that was more visible has strongly affected their self-esteem.

Conclusion

It is concluded that burnt women have low to moderate self-esteem and depression after the burn incidence. Burn afflicted women faced various problems such as isolation, marriage and lack of job opportunities. General awareness and proper execution of laws related to burn incidence is required to control the increasing burn rates.

References


