



New Trends
in Psychology

The Importance of Personality Development in Caregivers Children, Adults with Disabilities

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Abstract: Care can include emotional and social support, help with household tasks, cooking, shopping, medical care and transportation. Previous studies suggest that the heterogeneity of caregiving experiences is associated with caregiver personality. There is variability in caregiving experiences, and not all caregivers are equally at risk of adverse health outcomes. For example, some caregivers feel more willing and confident in managing caregiving demands and experience less emotional stress and burden than others. Intensive family care can also mean that the wage carer reduces working hours, leading to loss. And as we learned above, the emotional consequences of caregiving include depression as well as anxiety. Depression, not surprisingly, tends to be particularly high in family caregivers. The authors point out that one of the reasons why personality traits affect health is that these traits strongly influence caregivers' perceptions of their ability to successfully manage the daily challenges they face.

Keywords: caregiver personality traits; impairment; family; health

1. Introduction

Caregivers are people who provide care for a family member or friend with a chronic illness, disability or other long-term care needs. It is estimated that caregivers provide up to 80% of the care for people with long-term care needs (Hoffmann & Rodrigues, 2012).

Care can include emotional and social support, help with household tasks, cooking, shopping, medical care and transportation. Caregivers can experience both positive

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and negative effects as a result of their caregiving responsibilities. Positive aspects of caregiving can include feelings of personal growth, satisfaction and an overall rewarding experience. Simply put, caring is an act of love. And when the person being cared for is a spouse, parent, other family member, or close friend, this action can be deeply meaningful.

However, being a carer can take a considerable mental and physical toll. *Sometimes carers can feel “swallowed up” by their role and responsibilities as a carer.*

In fact, evidence suggests that many caregivers report high levels of burden, depression and anxiety (Faronbi et al., 2019). Also, some caregivers may feel that caring for their loved one is emotionally difficult or that they cannot easily manage the daily tasks and stressors of caring for the disabled person.

However, there is *variability in caregiving experiences, and not all caregivers are equally at risk for adverse health outcomes.* For example, some caregivers feel more willing and confident in managing caregiving demands and experience less emotional stress and burden than others.

2. Dimensions of Personality

Previous studies suggest that the heterogeneity of caregiving experiences is associated with caregiver personality.

The most widely accepted theory of personality supported by psychologists today is the five factor model, often referred to as the “*big 5 personality traits*”. According to this theory, personality consists of openness, conscientiousness, extraversion, agreeableness, and neuroticism. Each trait represents a spectrum, and individuals can fall anywhere on the spectrum of each of the five traits:

- **Openness** refers to openness to experience, a person’s tendency to consider new ideas and think abstractly.
- **Conscientiousness** describes the extent to which a person is organized, self-disciplined and determined.
- **Extraversion** is characterized by sociability, communicativeness and the tendency to be sociable and energetic in social situations.
- **Agreeableness** reflects how cooperative, warm, caring and helpful an individual is.

- **Neuroticism** describes the extent to which an individual responds to various stressors with negative emotions, including anxiety, fear, guilt, or shame.

3. Does Personality Play a Role in the Caregiving Experience? Yes.

Studies have shown that how individuals cope with caregiving is related to their personality characteristics.

Neuroticism is the personality dimension that has received the most attention. Among caregivers, high levels of this trait have been found to be related to greater sensitivity to caregiving stressors, increased levels of depression, anxiety, and caregiver burden. This may be because caregivers high in neuroticism tend to feel more anxious about caregiving demands and to appraise the caregiving situation more negatively. In addition, there is some evidence that caregivers high in neuroticism acquire fewer benefits or rewards and enjoy caring for their loved one less.

Conversely, caregivers high in extraversion tend to be more positive in their appraisals of the caregiving situation. This could be explained by the fact that extraverts maintain a more optimistic outlook during difficult caregiving challenges and are better able to maintain their social life and leisure activities even when daily caregiving tasks are increased.

Similarly, high levels of caregiver conscientiousness are associated with more adaptive coping strategies, lower sensitivity to caregiving stressors, and a better relationship with the care recipient. Conscientiousness, defined as qualities that include high levels of goal-oriented thinking and behaviors, can enable caregivers to achieve a sense of satisfaction in their role and protect them from feeling overwhelmed when faced with the daily stressors of caregiving.

Furthermore, caregivers who score high on openness to experience report better quality of life and greater life satisfaction. Turiano, Spiro, and Mroczek (2012) argue that people who are more open to new experiences are better able to adapt to potential stressors because they fear change less and are more willing to try new approaches to coping stress. Therefore, openness to experience may be beneficial to caregivers' quality of life by making it easier to manage stress arising from caregiving demands.

Finally, caregivers with high levels of agreeableness are more likely to recognize the benefits of caregiving and achieve a variety of gains. *Defined by characteristics such*

as warmth and caring, agreeableness allows caregivers to feel more “at home” when caring for a loved one and thus find more benefit in providing care compared to caregivers who are more distant. emotional.

4. The Role of Personality in Caregiving Stress

Caring for a family member can be exhausting and with negative consequences.

For example, the average amount of time a family caregiver attends to another person's needs is four hours a day if the caregiver has cognitive impairment, nine hours a day if the care recipient has dementia, and both types of caregivers experience similar physical and emotional stresses such as poor health and depression.

Support for family carers should therefore not only target those who provide care for family members with dementia; carers of family members without dementia but with other diseases and impairments. A variety of support services for carers such as local support groups, magazines, newsletters and conferences can be extremely helpful.

Many family caregivers have to work to get paid outside the home and/or care for their children. These responsibilities, in addition to family care, can leave little time for caregivers to pay attention to their own health and well-being, with consequences affecting their ability to sleep, exercise and cook healthy meals.

Intensive family care can also mean that the carer reduces their working hours, resulting in lost wages. And as we learned above, the emotional consequences of caregiving include depression as well as anxiety. Depression, not surprisingly, tends to be particularly high in family caregivers.

The consequences associated with the caregiver posture are related to the caregivers' personality. Caregivers who are *extraverted and conscientious tend to show more signs of physical and mental health*, while caregivers who are neurotic tend to show worse signs of physical and mental health. And when asked to report on their own physical and mental health, caregivers who are open and agreeable tend to report the highest levels.

Depression, in particular, is worse for neurotic caregivers and less problematic for extraverted caregivers. So personality is clearly associated with the stress of being a family caregiver. Anxiety levels are related to the ways in which caregivers cope

with the seemingly never-ending burden imposed by the needs of an ill or impaired family member.

Coping strategies take many forms, and three common types are described below:

- Focused on emotions (eg social support, humor and finding meaning in the situation);
- Problem-focused (eg help from others, advice and planning);
- Dysfunctional (eg, denial and substance abuse).

Problem-focused strategy helps individuals feel in control of a stressful situation, but unfortunately, research indicates that neurotic caregivers are less likely to engage in this type of problem-solving strategy.

Longitudinal research reveals that anxiety does not increase over time for caregivers who use positive emotion-focused coping strategies, which are also used less frequently by neurotic caregivers.

So, caregivers may want to change how they deal with the stressors of caring for a loved one, for the sake of the family member's well-being as well as their own.

5. How Can Personality Assessments Help us Support Caregivers at Risk?

Understanding the personality of caregivers can lead to the design of more effective caregiver support programs. *Because personality is relatively stable over time, personality assessments can help practitioners and psychologists identify at-risk caregivers early.* However, most caregiver programs today have focused on one-size-fits-all solutions rather than the unique *individual profile of caregivers.*

Personality-based programs should be developed to support the psychological health of caregivers. But how might these individualized programs help caregivers? For example, *extroverts may benefit more from group-based programs, while introverts may find group settings very uncomfortable, preferring individual interventions. Similarly, caregivers who are less open to new experiences and who enjoy trying new things less are likely to benefit most from traditional one-on-one programs.*

Coping-focused interventions could be designed using information about caregivers' personality characteristics. For example, neuroticism is the trait most strongly

associated with a negative coping response to caregiver stressors. Thus, a caregiver with a high level of neuroticism is particularly at risk of experiencing greater stress. *Coping skills training programs could assist such caregivers in using problem-focused coping strategies to reduce stress and derive meaning and growth from stressful caregiving situations.*

Finally, we must not forget that our behavior is the result of a complex interaction between our personality, the sociocultural context and the environment in which we live. *The exact situation in which caregivers find themselves plays a critical role in their caregiving experiences and how they respond to various stressors.* The role of caregiver is an ever-changing journey based on many factors such as our personality characteristics, culture, socioeconomic status, health status, and relationship with the person receiving care.

6. Personality Traits of Caregivers Affect Mental and Physical Health

“Personality accounted for about a quarter of the variance in caregivers’ mental health and about 10 percent of the variance in their physical health,” said lead author Corinna Loeckenhoff, assistant professor of human development in Cornell’s College of Human Ecology. after conducting a research study. The authors analyzed data on more than 500 informal caregivers of older adults with multiple disabilities in New York, Ohio, and West Virginia. Of the caregivers, 98 percent were white and 72 percent were female; their average age was 63.

The researchers analyzed the links between caregivers’ personality traits; self-reported health status; *two factors thought to affect health - caregiver stress (feeling overwhelmed, worried) and self-efficacy (feeling confident in one’s own abilities).*

They measured five basic personality traits to assess caregivers’ tendency to be negative/anxious (neuroticism), energetic/extroverted (extraversion), inventive/curious (openness), friendly/compassionate (agreeableness), and efficient/organized (conscientiousness).

As expected, the team found links between personality and health. Extraversion was positively associated with mental and physical health, while neuroticism was negatively associated with mental and physical health. *The researchers also found that both caregiver stress and self-efficacy played a role in this association between personality and health.*

The authors point out that one of the reasons why personality traits affect health is that these traits strongly influence caregivers' perceptions of their ability to successfully manage the daily challenges they face.

"Our findings tie into the recent literature on resilience," Loeckenhoff said. They suggest that caregiver support initiatives might usefully *include measures of personality traits to identify caregiver strengths and weaknesses and the most exposed to risk*. Interventions could also target self-efficacy beliefs because, while personality traits are relatively stable over time, self-efficacy beliefs can change as a result of verbal instruction, personal experience, and observation of role models."

7. Qualities of Family Caregivers

To be a good family caregiver, it is important to have as many of the following traits as possible.

1. Empathy

The ability to put yourself in another person's shoes and understand what they are going through. Family caregivers need empathy to handle delicate situations with family members.

2. Reliability

Reliable caregivers are always there when they say they will be. A good family caregiver will not shy away from caring responsibilities and will not be easily distracted by more enjoyable activities.

3. Creativity

The ability to think outside the box and find effective solutions to difficult situations is a valuable trait for a family caregiver. A creative caregiver can come up with unique ideas to take better care of a loved one.

4. Patience

It is important for any type of caregiver to be calm and patient when providing care to someone. Caregivers must be able to remain patient even when past family grudges and dramas are brought up.

5. Flexibility

Strong organizational skills are always great in a caregiver, but the ability to be flexible even when the schedule changes is even more important. Caring for a human being is an unpredictable and surprising task, so family caregivers need to be able to go with the flow and not let small changes upset them.

6. Confidence

Trusted caregivers will not take money from their senior parents or other family members for their own benefit and will not use their position to unduly influence affected loved ones.

7. Caution

A family caregiver's primary responsibility is to attend to the needs of their affected family member. A caregiver who has the ability to notice minor changes in the daily habits, mood, and health of a disabled person will be excellent at managing their overall well-being.

8. The ability to love

The ability to love and appreciate a disabled member even during difficult times can help a family caregiver provide the best possible care.

8. Research Studies

1. The Influence of Personality on the Care Experience

113 caregivers of persons with Alzheimer's disease completed the Clinical Rating Scales of Personality (NEO PI-R) and various aspects of the caregiving experience: difficulties, satisfactions, and strategies.

Results:

Neuroticism influences the emotional aspects of the helper's experience, both in terms of the difficulties to which this person is sensitive and the satisfactions he will obtain, but also the strategies that will be used.

The high need for strong sensations and positive emotions associated with **Extraversion** does not fit well with a situation in which the person is required to adjust their pace to that of the patient.

Openness to experience, on the other hand, has a protective effect with respect to several difficulties likely to be encountered by the helper.

Agreeableness is related to the ability to experience satisfaction.

Conscientiousness facilitates the use of a variety of strategies.

9. Conclusions

Depending on their personality, all individuals are not at risk of being weakened by these same difficulties encountered in the caregiving experience, nor will they use all the same strategies or obtain the same secondary benefits. These inter-individual differences inherent in the caregiving experience should be taken into account in studies evaluating the impact of various “caregiver assistance” programs

2. *The influence of caregiver personality on the burden of family caregivers of terminal cancer patients*

A wide range of factors related to the patient-family caregiver dyad in a palliative care setting were investigated using a cross-sectional design. Caregiver burden was assessed using the short seven-item version of the Zarit Burden Interview (ZBI-7). Caregiver personality was assessed using the 10-item short version of the Big Five Inventory (BFI-10). Patient- and caregiver-related sociodemographic and psychological factors were included in the analysis because of their potential association with caregiver burden.

Results:

227 patient-family caregiver dyads were analyzed. Multivariate analysis showed that caregiver *extroversion* was protective against caregiver burden, whereas *depressive symptoms in caregivers* were related to increased burden. Neuroticism was positively correlated with *caregiver burden*, but this relationship was nonsignificant after adjustment for depressive symptoms. Patient-related factors were not significantly associated with caregiver burden.

Significance of Results: Assessing the personality traits of caregivers could facilitate the identification of individuals at higher risk of high burden. Furthermore, depression screening and treatment programs for caregivers in palliative care are needed to decrease caregiver burden.

3. *The influence of personality on depression, burden and health-related quality of life in family caregivers of people with dementia*

Data from a large nationwide clinic-based study in South Korea, Caregivers of Alzheimer's Disease Research (CARE), (N = 476) were analyzed. A path analysis was conducted to explore the association between family caregivers' personality traits and HRQoL. With depression and burden as mediating factors, direct and indirect associations between five personality traits and family caregivers' HRQoL were examined.

Results: The results demonstrated the mediating role of caregiver burden and depression in the correlation of two personality traits (neuroticism and extraversion) and HRQoL. Neuroticism and extraversion directly and indirectly influenced caregivers' mental HRQoL. Neuroticism and extraversion only indirectly influenced their physical HRQoL. *Neuroticism increased caregiver depression, while extraversion decreased it.* Only neuroticism was mediated by burden to influence depression and mental and physical HRQoL.

4. Personality metatraits predict resilience among family caregivers managing a young chronic respiratory addict

Family caregivers of children and youth with severe neurological disabilities who require chronic respiratory management often report a compromised quality of life. In this cross-sectional study, DeYoung's test conceptualization of two personality metatraits, Alpha and Beta, was used to test their theoretical role in facilitating resilience among these family caregivers. We expected that higher Alpha and Beta would exhibit direct, beneficial effects on caregivers' mental and physical quality of life (QoL) and operate through resilience and coping.

Family caregivers of children and youth at an outpatient chronic respiratory management clinic were informed about the study. Of the 68 who consented, 61 provided complete data on measures of personality traits, coping styles, and QoL related to physical and mental health. Factor analysis techniques verified the two personality metatraits, consistent with the DeYoung model. Metatraits were then used as predictor variables in a path model to predict QoL related to physical and mental health. Self-reported resilience and a coping variable were examined as possible mediators of the personality-QoL relationship.

Result

Correlational analyzes isolated a coping variable that met the criteria as a possible mediator. The path model showed a good fit to the data.

Metatrait Alpha—characterized by emotional stability, self-regulation, persistence, and intrinsic motivation—was directly predictive of caregiver mental health. Metatrait Beta, which reflects a disposition for adaptive flexibility, responsiveness, and interpersonal initiative, demonstrated significant indirect effects for physical and mental health through its positive association with coping efforts to maintain social support and a sense of self.

Conclusions

Consistent with DeYoung's conceptualization, higher Alpha and Beta predicted caregiver resilience, albeit through different pathways. Emotional stability, perseverance, and emotional regulation associated with Alpha likely explained its positive association with caregiver mental health. Betas, on the other hand, can work through their adaptive flexibility, personal resourcefulness, and social engagement to enhance coping efforts that involve others and support family activities, which in turn promote their own physical and mental health.

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