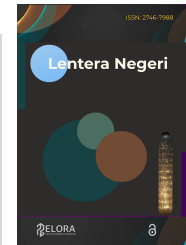




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Family support in caring for family members with mental disorders and its impact on family life

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ABSTRACT

This study examines the role of family support in caring for members with mental disorders and its impact on overall family life. The research addresses the challenges families face, including emotional fatigue, financial strain, and role conflicts, while highlighting the critical role of emotional, informational, and instrumental support in patient care and family cohesion. The study employs a literature-based methodology, analyzing primary and secondary data from books, journals, articles, and reports relevant to the phenomenon of family caregiving. Findings indicate that families provide multidimensional support that enhances patient recovery, treatment adherence, and family resilience, while coping strategies, social networks, and cultural context significantly influence caregiving effectiveness. The study concludes that family support is essential for both patient well-being and family stability, emphasizing the need for culturally sensitive, comprehensive, and collaborative approaches to strengthen caregiving practices and improve the quality of family life.



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Introduction

Mental health is an essential component of an individual's overall well-being, significantly influencing emotional stability, social interactions, and quality of life. Despite its critical importance, mental health issues remain largely underrecognized within family contexts, particularly in societies where mental disorders are heavily stigmatized or misunderstood. Families frequently face complex challenges when caring for a member with a mental disorder, which may include managing unpredictable behaviors, coping with emotional strain, and addressing financial burdens associated with long-term care. These challenges are compounded by a lack of formal support systems, limited access to mental health services, and pervasive social stigma, which often isolates families and increases feelings of helplessness and frustration. Studies indicate that a majority of care for individuals with mental disorders, especially in developing countries, occurs within the home by family members rather than in professional healthcare settings. This responsibility places substantial physical, psychological, and social strain on caregivers, potentially affecting not only their personal well-being but also the quality of interpersonal relationships and the overall family environment. Furthermore, the burden of caregiving can result in elevated levels of anxiety, depression, and social withdrawal among caregivers, which, in turn, affects family cohesion, communication, and daily routines. Understanding these real-life dynamics is critical because the family represents the primary support system for individuals with mental disorders, and yet, there is limited research that systematically documents how caregiving impacts family life. This contextual foundation highlights the urgency of conducting research that examines both the supportive role of families and the challenges they encounter, establishing a basis for informed interventions and policies (Aass et al., 2022).

Existing literature emphasizes that family support plays a pivotal role in managing mental disorders, contributing to the psychological stability, social functioning, and recovery of patients. Theories such as stress and coping frameworks suggest that social support can buffer the negative impact of caregiving stress and promote adaptive coping strategies. Research has consistently demonstrated that families providing emotional, instrumental, and informational support to affected members improve the patient's adherence to treatment and overall functioning. However, most studies tend to focus on clinical or institutional settings, which fails to capture the nuanced, day-to-day experiences of families providing care at home. Furthermore, despite recognition of the caregiver's role, existing literature often overlooks the long-term consequences of caregiving on family dynamics, including the effects on sibling relationships, marital satisfaction, financial stability, and overall family well-being. Additionally, studies frequently lack comprehensive frameworks that integrate psychological, social, and economic perspectives, leaving a theoretical gap between the acknowledged importance of family support and its multifaceted impacts on life quality. Research also suggests that cultural, social, and environmental factors significantly influence caregiving patterns and effectiveness, yet these factors are rarely fully explored in empirical studies. The absence of in-depth, holistic analyses underscores the necessity for studies that investigate not only how families provide support but also how such support interacts with the family's emotional, social, and economic systems. Addressing these gaps will enhance theoretical understanding and provide practical insights for developing interventions that are both culturally sensitive and contextually appropriate, ensuring that families are equipped to manage caregiving challenges effectively (Phillips et al., 2023).

In response to the identified gaps in literature and the practical challenges faced by families, this study aims to explore comprehensively the role of family support in caring for members with mental disorders and its impact on the overall functioning and quality of family life. Specifically, the study seeks to: first, identify the types and forms of support—emotional, informational, and instrumental—provided by family members to relatives with mental disorders; second, examine the challenges, barriers, and stressors faced by family caregivers, including psychological strain, social stigma, and financial constraints; third, analyze the influence of family support on the emotional, social, and relational well-being of all family members, considering both immediate and long-term outcomes; and fourth, develop evidence-based recommendations that can inform policy, healthcare practice, and caregiver training programs. These objectives are designed to bridge the gap between theory and practice, providing actionable knowledge that can be applied in real-world settings while contributing to academic discourse. By focusing on the interplay between caregiver support and family life impact, the study acknowledges the multidimensional nature of caregiving and the importance of contextualized approaches. Ultimately, these objectives serve not only to generate empirical evidence but also to enhance understanding of how families can be supported holistically, fostering resilience, cohesion, and quality of life for both caregivers and individuals with mental disorders. This approach ensures that the research is both scientifically rigorous and practically relevant, addressing the urgent need for family-centered mental health strategies (Kusumawaty et al., 2021).

The significance of this study lies in its focus on a central yet often overlooked aspect of mental health care: the family as a primary caregiver system. Families occupy a critical role in maintaining the well-being of individuals with mental disorders, and their experiences, challenges, and strategies are essential for understanding the broader implications of caregiving. By investigating the mechanisms through which family support is provided and its subsequent impact on family life, this research posits that effective support can enhance family cohesion, reduce caregiver stress, and improve the overall quality of life for all members. Conversely, insufficient support, inadequate preparedness, or lack of resources can exacerbate family conflict, psychological distress, and social isolation, ultimately affecting the patient's recovery process and the family's overall functioning. The study hypothesizes that a positive correlation exists between the presence of structured, multidimensional family support and improved emotional, social, and relational outcomes for the family unit. This hypothesis is grounded in both theoretical frameworks and empirical observations, linking the quality of family support with measurable impacts on family life. The study's findings are expected to provide a comprehensive understanding of family caregiving dynamics, offering critical insights for health practitioners, policymakers, and community organizations in developing effective interventions, caregiver education programs, and family-centered mental health policies. By emphasizing the practical and academic relevance, this research underscores the necessity of systematic exploration of family support as a cornerstone of mental health care and family well-being (Fakhrou et al., 2023).



Method

Research Object

The object of this study is centered on the phenomenon of family support in caring for members with mental disorders and the subsequent impact on overall family life. Specifically, the research examines the experiences, behaviors, and challenges faced by families as they provide caregiving, focusing on real-life cases documented in literature and reports. These cases encompass various scenarios, including families managing severe or chronic mental disorders, instances of acute episodes, and situations where social, economic, and cultural factors influence caregiving practices. By investigating these phenomena, the research aims to gain a comprehensive understanding of how families respond to the demands of caregiving, the types of support they provide, and the ways in which such support affects the emotional, social, and relational aspects of family life. The study also considers the broader context in which these phenomena occur, including societal attitudes, access to mental health services, and the availability of community support systems. Through detailed examination of these objects, the research seeks to identify patterns, challenges, and strategies that families employ, providing a holistic view of caregiving dynamics. Understanding the object of study is crucial because it allows the research to focus on real-life experiences and the practical implications of family support, rather than theoretical or abstract models alone. By concentrating on documented cases and phenomena, this study ensures that its findings are grounded in observable and verifiable information, forming the basis for a methodologically rigorous analysis (Chronister et al., 2021).

Type of Research

This research employs a literature-based methodology, commonly known as a library or desk study, which emphasizes systematic examination of documented sources to understand the research problem. The study relies on primary data derived from relevant literature that presents real-life cases, phenomena, or issues related to family support for individuals with mental disorders. These primary sources include case studies, empirical reports, and documented experiences from families and caregivers. Additionally, secondary data plays a significant role in enriching the analysis, consisting of literature that broadly addresses the key concepts of the research, such as family support, mental health care, and the impact on family life. Secondary sources are drawn from academic books, peer-reviewed journal articles, research papers, reports, and other scholarly publications that provide theoretical, contextual, or statistical insights. This combination of primary and secondary data allows the study to integrate both real-life experiences and established knowledge from prior research, ensuring a comprehensive understanding of the topic. By using a literature-based approach, the research can systematically compare, synthesize, and interpret findings from multiple sources, providing a nuanced perspective on how families support members with mental disorders and how these interventions influence family dynamics. The method ensures objectivity, reliability, and academic rigor by grounding conclusions in well-documented evidence and validated studies (Shimange et al., 2022).

Theoretical Framework

The theoretical foundation of this study is critical in guiding both data collection and interpretation. This research draws primarily on stress and coping theory, initially developed by Richard S. Lazarus and Susan Folkman in 1984, which posits that individuals experience stress as a result of perceived demands exceeding available coping resources and that coping mechanisms can mitigate the psychological impact of stress. The theory emphasizes two types of coping strategies: problem-focused coping, which involves taking action to manage or resolve stressors, and emotion-focused coping, which seeks to regulate emotional responses to stress. In the context of family caregiving for individuals with mental disorders, this theory provides a framework for understanding how family members respond to the pressures of caregiving, including strategies they employ to manage emotional, social, and practical challenges. Additional theoretical support is drawn from family systems theory, proposed by Murray Bowen in the 1970s, which views the family as an interrelated system wherein changes or stressors affecting one member influence the entire family unit. This theory highlights the interconnectedness of family relationships, emphasizing that support provided to an individual with mental disorders affects not only that member but also the broader family dynamics. By integrating these theories, the study establishes a conceptual lens that guides the selection of literature, the interpretation of findings, and the identification of patterns in family support and its impact on family life (Leng et al., 2019).

Research Process and Data Collection

The research process follows a structured approach that prioritizes thorough examination of relevant literature. Data and information are collected through comprehensive reading of written sources, including books, peer-reviewed journals, prior research studies, academic papers, reports, and magazines that pertain to the phenomenon of family support in caring for members with mental disorders. Each source is evaluated



for relevance, credibility, and contribution to understanding both the challenges and strategies associated with family caregiving. The process involves systematic identification of recurring themes, case studies, and documented outcomes of family support, allowing the research to compile comprehensive information on real-world experiences. Additionally, the study cross-references findings across multiple sources to ensure consistency and reliability, identifying areas of convergence and divergence in the literature. Through meticulous documentation and analysis, the research ensures that data collection is both comprehensive and targeted, focusing on information that directly addresses the key research questions. This method allows for an in-depth understanding of family support practices, challenges faced by caregivers, and the broader effects on family life, providing a solid empirical foundation for subsequent analysis(Cheng et al., 2022).

Data Analysis Techniques

Data analysis in this study utilizes content analysis techniques, which involve systematic examination and interpretation of textual data to identify patterns, relationships, and significant information relevant to the research objectives. Through this approach, the study categorizes information according to thematic relevance, such as types of family support, caregiver challenges, and the resulting impact on family life. The analysis process begins with careful reading and coding of data extracted from each source, followed by grouping similar ideas and identifying recurring trends or discrepancies. By applying content analysis, the research can uncover underlying patterns, causal relationships, and critical insights that may not be immediately evident from individual sources. This technique also allows for integration of both qualitative and quantitative findings from literature, providing a comprehensive understanding of the dynamics of family support and its influence on family life. Ultimately, the systematic use of content analysis ensures that conclusions drawn from the study are evidence-based, coherent, and reflective of the complexity inherent in family caregiving for individuals with mental disorders. The approach provides a rigorous and replicable methodology that strengthens the validity and reliability of the research findings(Yusuf et al., 2022).

Results and Discussions

The literature review and analysis of documented cases consistently indicate that family support is central to caring for individuals with mental disorders. Families provide multidimensional support, including emotional, informational, and instrumental assistance, which collectively influence both patient outcomes and family well-being. Emotional support, such as empathy, reassurance, and encouragement, helps patients cope with symptoms, reduces feelings of isolation, and promotes adherence to treatment regimens. Instrumental support includes practical help in daily activities, medication management, and coordinating healthcare appointments, while informational support provides guidance on treatment decisions and symptom management. The literature emphasizes that these types of support are not isolated but interact dynamically, reflecting a continuous feedback process where the patient's needs shape the caregiving strategies employed by family members. Families that successfully integrate these supports demonstrate improved cohesion, resilience, and adaptation in the face of caregiving challenges. However, variations in effectiveness are influenced by socio-economic status, family structure, cultural expectations, and the severity of the mental disorder, indicating the context-dependent nature of family support(Dehbozorgi et al., 2022).

Emotional support emerges as a particularly critical component of caregiving. Families who consistently offer empathy, active listening, and verbal encouragement help stabilize the emotional state of the patient, especially during acute episodes of mental disorders. Studies highlight that patients who receive adequate emotional support are more likely to adhere to treatment, demonstrate reduced symptom severity, and experience higher overall satisfaction with their care. Caregivers themselves, however, often experience stress, emotional fatigue, and burnout due to the constant demands of providing support. Literature indicates that caregiver burden is mitigated when families share responsibilities among members, establish structured communication channels, and seek external counseling. Emotional support also strengthens familial bonds, fostering trust and understanding between patients and caregivers. The dynamic relationship between providing support and experiencing stress underscores the complexity of caregiving, suggesting that interventions should address both patient well-being and caregiver resilience(Andrade et al., 2021).

Instrumental support plays an equally important role in caregiving. Families assist with daily routines, transportation, medication adherence, and financial responsibilities related to treatment. This support is especially crucial for patients with severe mental disorders that impair autonomy or require constant monitoring. Research indicates that families with limited resources experience higher levels of stress, as they must balance caregiving responsibilities with professional and personal obligations. In some cases, instrumental support may necessitate lifestyle adjustments, such as reducing work hours or reallocating household duties. Despite these challenges, effective instrumental support has been shown to reduce



hospitalization rates, improve adherence to treatment plans, and stabilize the family environment. The literature highlights that practical assistance is an essential complement to emotional and informational support, ensuring that patients receive comprehensive care and that families maintain functional stability (Lohrasbi et al., 2023).

Informational support is another critical aspect of family caregiving, providing patients with guidance regarding their condition and helping caregivers make informed decisions. Families often rely on healthcare professionals, research literature, and peer networks to acquire accurate information about treatment strategies, symptom management, and crisis prevention. Access to reliable information enhances the family's capacity to respond proactively to mental health challenges, preventing unnecessary conflicts or misunderstandings. Literature further emphasizes that informational support is closely linked to socio-cultural factors, including health literacy, societal stigma, and community resources. Families equipped with knowledge are more confident in caregiving, employ effective coping strategies, and can anticipate potential complications. Conversely, insufficient information contributes to caregiver stress, treatment non-compliance, and emotional strain. The provision of informational support, therefore, is both a preventive and corrective mechanism that facilitates informed, adaptive, and effective family caregiving (Ong et al., 2021).

Despite the central role of family support, caregivers often face substantial challenges. Emotional fatigue, social isolation, financial strain, and lack of professional guidance are commonly reported stressors. Unpredictable patient behaviors, crises, and symptom exacerbation further complicate caregiving responsibilities. Literature indicates that cultural stigma surrounding mental disorders frequently discourages families from seeking external support, intensifying isolation and burden. Caregiver challenges extend beyond emotional strain, affecting physical health, interpersonal relationships, and household functioning. Studies show that prolonged stress can lead to depression, anxiety, and even health complications among caregivers, reflecting the interconnectedness of caregiver well-being and family stability. Understanding these challenges is essential for designing targeted interventions that support both patients and caregivers, emphasizing the need for comprehensive approaches that address emotional, practical, and social dimensions of caregiving (Wang et al., 2025).

Adaptive strategies employed by families are a key theme in the literature. Caregivers frequently develop structured routines, shared responsibility systems, and proactive monitoring strategies to manage the demands of caregiving. Problem-focused coping, such as organizing schedules, anticipating crises, and coordinating care, complements emotion-focused coping strategies, including mindfulness, cognitive reframing, and self-care. Families that effectively integrate these strategies report lower stress levels, improved family cohesion, and greater resilience. Peer support networks and professional counseling also provide external reinforcement, enhancing the family's ability to cope. Literature emphasizes that successful caregiving involves dynamic adaptation, reflecting both the evolving needs of the patient and the capacities of the family system. These findings highlight the importance of supporting caregiver strategies and resilience as integral components of mental health interventions (Theng et al., 2023).

The impact of caregiving on family life is multidimensional. Families often experience changes in role dynamics, household routines, and interpersonal relationships as they adapt to the demands of mental health care. Sibling relationships, marital satisfaction, and parent-child interactions may be affected, leading to potential conflicts or emotional strain. Simultaneously, effective caregiving can strengthen empathy, cohesion, and mutual understanding within the family. Literature suggests that the degree of impact is influenced by the level of support provided, family resources, and coping strategies employed. Positive outcomes, such as increased collaboration and shared responsibility, are associated with structured caregiving approaches and access to external resources. Conversely, inadequate support or high stress levels can exacerbate conflicts, reduce quality of life, and impair family functioning. These findings underscore that caregiving is a transformative process with both challenges and opportunities for growth within the family system (Cameron, 2021).

Socio-cultural factors significantly influence caregiving practices and outcomes. Collectivist cultures, for example, often place strong expectations on family members to provide direct care, increasing responsibility and potential stress. Individualistic cultures may distribute caregiving responsibilities more widely across healthcare systems, reducing family burden but potentially weakening emotional cohesion. Social stigma, cultural beliefs about mental illness, and local norms affect both willingness to seek external support and the strategies employed by families. Literature highlights that public awareness campaigns and educational interventions can improve family knowledge, reduce stigma, and enhance caregiving efficacy. The cultural



context is thus an essential consideration in understanding family support, as it shapes both perceptions and practices, affecting outcomes for patients and the family unit (Kim & Maijan, 2024).

Families providing care for individuals with mental disorders also face financial and logistical challenges. Costs associated with treatment, transportation, and therapy often strain household budgets. Time constraints, especially when multiple family members are employed or have other responsibilities, can lead to role conflict and fatigue. Research indicates that families with limited resources may struggle to maintain consistent care, affecting patient outcomes and family stability. Financial support systems, government assistance, and community-based programs are therefore critical in alleviating the burden. Literature underscores that addressing economic and logistical challenges enhances the overall effectiveness of family support, ensuring that caregivers can sustain long-term caregiving without compromising their personal well-being or household functioning (de Jong et al., 2025).

The literature also emphasizes the interplay between caregiver stress and patient outcomes. High levels of caregiver stress are associated with increased patient relapse rates, reduced adherence to treatment, and heightened behavioral issues. Conversely, families that implement effective support strategies, including emotional, informational, and instrumental assistance, facilitate better patient recovery and long-term stability. Research highlights the bidirectional nature of these relationships: patient well-being influences caregiver stress, while caregiver capacity directly affects patient outcomes. Understanding this reciprocal dynamic is essential for designing interventions that target both patient care and family resilience, reinforcing the interdependent nature of family caregiving (Uemura & Comini, 2022).

Case studies indicate that family support is not static but evolves over time as patient needs change. Initial stages of caregiving often involve learning and adaptation, as families acquire knowledge and develop routines. Over time, caregivers refine strategies, balance responsibilities, and adjust approaches according to patient progress. Literature demonstrates that families who actively engage in learning and adaptation experience lower stress and higher efficacy in care provision. This dynamic evolution reflects the complex nature of caregiving, where flexibility, problem-solving, and continuous learning are critical to sustaining effective support and preserving family stability (Syakirin, 2021).

Informational support is closely linked to caregiver competence. Families who have access to reliable, evidence-based information can implement proactive strategies, anticipate potential crises, and communicate effectively with healthcare providers. Literature shows that informational support enhances caregiver confidence, reduces uncertainty, and fosters a structured approach to care. Conversely, lack of information can exacerbate stress, lead to inconsistent care, and increase the risk of conflict within the family. Educational interventions, workshops, and access to mental health resources are therefore critical in strengthening informational support and optimizing family caregiving outcomes.

Emotional resilience among caregivers is a recurring theme in the literature. Families that employ coping strategies such as peer support, counseling, self-care routines, and mindfulness practices report lower levels of burnout and improved mental health. Research suggests that caregiver resilience directly affects the quality and consistency of support provided to patients. Strong emotional coping mechanisms enable caregivers to respond effectively to crises, maintain household stability, and foster positive family interactions. These findings underscore the importance of integrating caregiver support and mental health promotion within family-centered interventions (Gagné & Forest, 2020).

Instrumental support effectiveness is influenced by family structure and resources. Households with multiple adult members can distribute caregiving responsibilities more efficiently, reducing individual burden. Single-parent families or those with limited support networks may experience heightened stress and fatigue. Literature highlights that supplemental resources, including professional caregivers, community programs, and healthcare assistance, significantly alleviate the burden of instrumental caregiving. The combination of internal family support and external resources is therefore crucial in sustaining caregiving practices and ensuring patient and family well-being (Agudelo-Hernández et al., 2024).

Family support also affects sibling dynamics. Siblings often participate in caregiving, either directly or indirectly, and their experiences shape family relationships. Literature indicates that siblings may experience stress, jealousy, or role confusion, but effective communication, structured responsibilities, and inclusive family strategies mitigate negative impacts. Positive engagement of siblings in caregiving fosters empathy, responsibility, and stronger familial bonds, highlighting the broader social effects of caregiving on family life (Rebolledo, 2019).

Marital relationships are similarly affected by caregiving responsibilities. Research shows that high caregiver stress, role conflicts, and emotional fatigue can strain marital interactions. Couples may experience reduced communication quality, decreased shared leisure time, and increased conflict. Conversely, effective division of caregiving duties, mutual support, and external counseling enhance marital satisfaction and strengthen relational bonds. Literature underscores that marital dynamics are integral to family functioning, influencing both patient outcomes and household stability(Lim et al., 2020).

Parent-child interactions are another dimension impacted by caregiving. Children in families with a member experiencing a mental disorder may experience secondary stress, increased responsibilities, or emotional strain. Literature suggests that open communication, age-appropriate involvement in care, and emotional support reduce negative consequences for children. Families that maintain balanced interactions foster resilience, empathy, and emotional intelligence among children, demonstrating the intergenerational influence of caregiving practices.

Community and social networks play a pivotal role in supporting families. Literature indicates that families with strong social connections, supportive peers, and access to community programs experience reduced isolation and stress. Social networks provide informational, emotional, and sometimes instrumental support, reinforcing the family's capacity to provide care. Conversely, families lacking community engagement often face increased burden and limited coping strategies. These findings highlight the importance of integrating community-based support in family-centered mental health interventions(Shimange et al., 2022).

Long-term caregiving leads to adaptive changes in household routines, decision-making processes, and family priorities. Literature shows that families develop structured schedules, contingency plans, and collaborative strategies to maintain daily functioning. These adaptations enable families to balance caregiving responsibilities with personal, professional, and social demands, illustrating the transformative nature of caregiving. Effective adaptations contribute to family resilience, continuity of care, and improved patient outcomes.

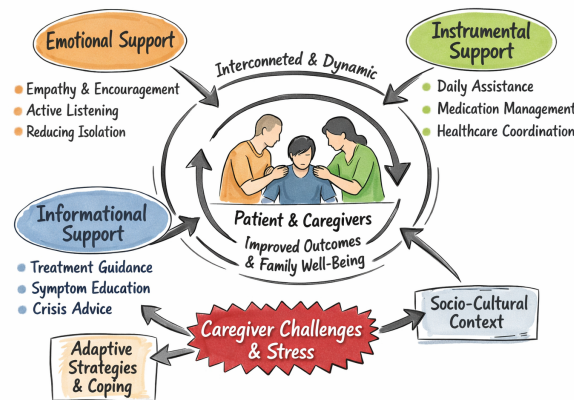


Figure 1. Conceptual Framework of Family Support in Caring for Individuals with Mental Disorders

The diagram illustrates the multidimensional nature of family support in caregiving for individuals with mental disorders. At the center, the Patient & Caregivers node represents the dynamic interaction between the person receiving care and their family. Three primary types of family support—Emotional Support, Instrumental Support, and Informational Support—are depicted as interconnected and mutually reinforcing elements that collectively enhance patient outcomes and overall family well-being. Emotional support includes empathy, active listening, and encouragement, helping patients cope with symptoms and reduce isolation. Instrumental support involves daily assistance, medication management, and healthcare coordination, ensuring practical needs are met. Informational support provides guidance on treatment, symptom education, and crisis management. Surrounding factors, such as Caregiver Challenges & Stress, Adaptive Strategies & Coping, and Socio-Cultural Context, illustrate the external influences and feedback loops affecting the effectiveness of family support and the resilience of the caregiving process(Galea et al., 2020).

Emotional and Informational Support in Family Caregiving

The literature consistently highlights emotional support as a cornerstone of family caregiving for individuals with mental disorders. Families who provide empathy, reassurance, and active listening help patients cope with the psychological challenges of their conditions. This emotional support not only reduces feelings of isolation and anxiety in patients but also enhances treatment adherence. Findings indicate that caregiver involvement in emotional support creates a feedback loop where patient stability positively influences family dynamics. Families that maintain consistent emotional support demonstrate improved cohesion, trust, and mutual understanding, which further reinforce the caregiving process. However, the literature also identifies a duality: while emotional support benefits patients, it may simultaneously increase caregiver stress and fatigue, highlighting the need for strategies that balance patient care with caregiver resilience (Chronister et al., 2021).

Table 1. Synthesis of Emotional and Informational Support in Family Caregiving for Mental Disorders

Aspect	Description	Benefits	Challenges	Strategies/Interventions
Emotional Support	Empathy, reassurance, active listening to help patients cope with psychological challenges.	Reduces patient isolation/anxiety; improves treatment adherence; enhances family cohesion, trust, and dynamics.	Increases caregiver stress, fatigue, and emotional burnout.	Balance care with caregiver resilience; integrate peer networks and counseling.
Informational Support	Guidance/knowledge from professionals, peers, literature to manage symptoms and crises.	Enables proactive strategies, informed decisions; reduces miscommunication/conflict.	Insufficient access leads to stress, low efficacy, poor patient outcomes.	Structured training, access to professionals, educational interventions.
Interdependence & Context	Dynamic interplay; adapts to disorder severity, culture (e.g., collectivist vs. individualistic societies).	Informed caregivers provide better empathy; external resources lower burden.	Role overload, uncertainty in complex cases; socio-cultural barriers.	Community support, peer networks; holistic family-centered programs.
Overall Effectiveness	Integral to caregiving; depends on competence, info access, cultural/socio-economic factors.	Optimizes patient recovery and family well-being.	Emotional fatigue, isolation without resources.	Counseling, education, collaborative external support.

Informational support complements emotional support by providing guidance and knowledge critical to effective caregiving. Families often seek information from healthcare professionals, peer networks, and academic literature to better manage symptoms and anticipate potential crises. Reliable information allows caregivers to implement proactive strategies, avoid mismanagement, and make informed decisions about treatment options. The literature emphasizes that insufficient access to accurate information increases stress, reduces caregiver efficacy, and can negatively impact patient outcomes. Therefore, emotional and informational support are interdependent; informed caregivers are better equipped to provide empathetic, consistent care, reducing the likelihood of miscommunication or conflict within the family unit (Hadiansyah et al., 2025).

Case studies indicate that emotional and informational support are dynamic and context-sensitive. Families adapt their strategies based on the severity of the disorder, patient responsiveness, and socio-cultural



factors. For instance, collectivist societies may place greater emphasis on extended family involvement in providing both emotional reassurance and guidance, whereas individualistic societies may rely more on external professional support. Literature also points to the role of peer support networks, counseling services, and educational interventions in strengthening both forms of support. Families that integrate these external resources experience lower caregiver burden and higher perceived efficacy, demonstrating that support is a collaborative process extending beyond immediate family members (Baysak et al., 2021).

Challenges in providing emotional and informational support are well-documented. Caregivers report emotional fatigue, uncertainty, and role overload, especially when managing complex or severe mental disorders. Inadequate information exacerbates these challenges, making caregivers feel unprepared and isolated. Literature suggests that structured training programs, access to mental health professionals, and peer support mechanisms can mitigate these stressors. These interventions not only improve caregiver competence but also reinforce the quality of emotional and informational support, ultimately benefiting both patient and family well-being (Kostyrka-Allchorne et al., 2023).

Overall, the discussion demonstrates that emotional and informational support are integral to family caregiving. Their effectiveness depends on caregiver competence, availability of accurate information, and contextual factors such as cultural norms and socio-economic resources. Interventions targeting these areas—through counseling, education, and community support—can enhance caregiver capacity, reduce stress, and optimize patient outcomes. Understanding the interdependence of emotional and informational support is essential for designing holistic family-centered mental health programs that strengthen both patient recovery and family life quality (Ong et al., 2021).

Instrumental Support and Practical Challenges

Instrumental support, defined as tangible, practical assistance provided to patients, is critical in the caregiving process. Families assist with daily routines, transportation to healthcare appointments, medication management, and financial support. This type of support ensures that patients receive consistent, necessary care while allowing families to monitor progress and respond to emerging needs. Literature consistently reports that instrumental support contributes to reduced hospitalization rates, improved treatment adherence, and stabilization of family dynamics. However, effectiveness depends heavily on the family's resources, including time, finances, and social support networks. Families with limited capacity often face increased stress, highlighting the need for supplemental assistance from community or professional sources.

Research indicates that providing instrumental support can generate role conflict and caregiver fatigue. Balancing caregiving with employment, personal responsibilities, and other family duties places substantial strain on caregivers. Studies reveal that caregiver stress correlates with the intensity of instrumental tasks, emphasizing that practical support is both essential and demanding. Literature also suggests that families that distribute responsibilities among members or engage external support services manage these burdens more effectively, maintaining continuity of care without compromising personal well-being.

Instrumental support is closely linked to socio-economic factors. Families with higher financial stability and access to resources can implement comprehensive care strategies, including hiring professional caregivers or securing transportation and medical services. Conversely, resource-constrained families may need to make significant sacrifices, such as reducing work hours or reallocating household responsibilities. These constraints may limit the effectiveness of caregiving and increase the risk of caregiver burnout. Literature highlights the importance of targeted social policies and community programs that alleviate financial and logistical burdens, reinforcing sustainable caregiving practices.

Instrumental support also interacts with other forms of care. Emotional and informational support are enhanced when practical needs are met, creating a cohesive care environment. For example, consistent medication management allows caregivers to focus on emotional reassurance and patient guidance. Literature emphasizes that integrated approaches, combining emotional, informational, and instrumental support, produce the most favorable outcomes for both patients and families. Families that achieve this balance demonstrate resilience, adaptability, and improved household functioning despite caregiving challenges.

In summary, instrumental support is indispensable for effective caregiving but presents significant challenges that require adaptive strategies, resource allocation, and external assistance. Its impact extends beyond patient care to influence family functioning, stress levels, and overall quality of life. Understanding the multifaceted nature of instrumental support underscores the need for holistic approaches in family-centered interventions, ensuring that practical caregiving responsibilities are sustainable, equitable, and effective within diverse socio-economic contexts (Abass et al., 2021).



Caregiver Challenges and Coping Strategies

The literature extensively documents the challenges faced by caregivers in providing sustained support for family members with mental disorders. Caregivers frequently report emotional fatigue, social isolation, financial strain, and physical exhaustion as common stressors. Managing unpredictable patient behaviors, acute symptom episodes, and complex treatment regimens further complicates caregiving responsibilities. Studies highlight that these challenges can negatively impact caregiver well-being, family cohesion, and patient outcomes. Understanding these stressors is essential for developing interventions that alleviate burden and improve caregiving capacity.

Coping strategies employed by families play a critical role in managing caregiver stress. Problem-focused coping involves structuring routines, sharing responsibilities, and actively planning for potential crises. Emotion-focused coping strategies, including mindfulness, self-care routines, and cognitive reframing, help caregivers regulate emotional responses to stress. Literature shows that families combining both problem-focused and emotion-focused strategies experience lower stress levels and improved family functioning. These adaptive mechanisms are essential for sustaining caregiving over the long term and maintaining patient stability.

Social and community support further strengthens coping strategies. Peer networks, professional counseling, and educational programs provide emotional relief, practical guidance, and access to information. Families with robust social support demonstrate higher resilience, improved caregiver efficacy, and reduced feelings of isolation. Literature emphasizes that integrating social resources into caregiving strategies enhances both patient outcomes and family well-being, highlighting the importance of multi-level interventions that address individual, familial, and community factors (Pisani, 2021).

Caregiver challenges also manifest in intergenerational dynamics, affecting siblings, marital relationships, and parent-child interactions. Siblings may experience stress or role confusion, marital partners may encounter reduced communication quality, and children may bear additional responsibilities. Literature underscores that adaptive coping, clear communication, and shared responsibilities mitigate these negative impacts, fostering resilience and cohesion. These findings emphasize that caregiving affects the entire family system, necessitating comprehensive interventions that consider multiple relational dimensions.

Impact of Family Support on Family Life and Socio-Cultural Context

Family support significantly influences overall family life, reshaping relationships, household routines, and daily functioning. Literature indicates that effective caregiving strengthens familial bonds, enhances empathy, and fosters shared responsibility. Conversely, high caregiver stress or inadequate support can lead to conflict, tension, and reduced quality of life. The balance between positive and negative impacts depends on the integration of emotional, instrumental, and informational support, as well as the family's capacity to adapt to caregiving demands. Understanding these impacts is essential for designing interventions that promote both patient recovery and family well-being (Polnaya et al., 2018).

Cultural factors play a crucial role in shaping caregiving practices. Collectivist societies emphasize extended family involvement, increasing caregiving responsibilities and potential stress. In contrast, individualistic societies often rely on formal healthcare systems, which may reduce caregiver burden but also weaken emotional cohesion. Literature demonstrates that cultural beliefs, societal expectations, and stigma influence the strategies families employ, access to external support, and perceived caregiving efficacy. Tailoring interventions to local cultural contexts enhances effectiveness and sustainability.

Socio-economic resources also mediate the impact of family support on family life. Families with higher financial stability can access professional care, transportation, and supplementary resources, reducing caregiver burden. Resource-limited families face compounded stress, affecting both caregiving quality and family stability. Literature highlights that supportive policies, community programs, and social assistance are critical in mitigating these disparities, ensuring equitable access to effective caregiving practices.

Community and social networks reinforce the positive impact of family support. Families with strong peer networks, access to counseling, and educational programs experience reduced isolation and improved coping capacity. These resources enhance the family's ability to provide consistent, multidimensional support and maintain household stability. Literature underscores that integrating community-based interventions into family-centered care strengthens both patient and family outcomes.

Conclusions

The study demonstrates that family support is a multidimensional and dynamic process, encompassing emotional, informational, and instrumental assistance that collectively shapes the well-being of individuals with mental disorders and the overall quality of family life. Families face significant challenges, including emotional fatigue, financial strain, and role conflicts, yet employ adaptive coping strategies, leverage social networks, and utilize available resources to sustain caregiving. The effectiveness of support is influenced by socio-cultural context, family structure, and access to external resources, highlighting the need for culturally sensitive and contextually appropriate interventions. Ultimately, family support not only promotes patient recovery and adherence to treatment but also strengthens family cohesion, resilience, and relational stability, emphasizing that fostering comprehensive, informed, and collaborative caregiving practices is essential for optimizing mental health outcomes and enhancing family life quality.

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References

- Aass, L. K., Moen, Ø. L., Skundberg-Kletthagen, H., Lundqvist, L., & Schröder, A. (2022). Family support and quality of community mental health care: Perspectives from families living with mental illness. *Journal of Clinical Nursing, 31*(7–8), 935–948.
- Abass, G., Asery, A., Al Badr, A., AlMaghlouth, A., AlOtaiby, S., & Heena, H. (2021). Patient satisfaction with the emergency department services at an academic teaching hospital. *Journal of Family Medicine and Primary Care, 10*(4), 1718–1725.
- Agudelo-Hernández, F., Guapacha-Montoya, M., & Rojas-Andrade, R. (2024). Mutual aid groups for loneliness, psychosocial disability, and continuity of care. *Community Mental Health Journal, 60*(3), 608–619.
- Andrade, J. J. da C., Silva, A. C. O., Frazão, I. da S., Perrelli, J. G. A., Silva, T. T. de M., & Cavalcanti, A. M. T. S. (2021). Family functionality and burden of family caregivers of users with mental disorders. *Revista Brasileira de Enfermagem, 74*(05), e20201061.
- Baysak, E., Yorguner, N., Kandemir, G., Denizman, I. A., & Akvardar, Y. (2021). Is early marriage practice a problem for women living in Istanbul? A qualitative study. *Archives of Women's Mental Health, 24*(2), 243–250.
- Cameron, J. I. (2021). Family caregiving research: Reflecting on the past to inform the future. *The Journal of Spinal Cord Medicine, 44*(sup1), S19–S22.
- Cheng, W.-L., Chang, C.-C., Griffiths, M. D., Yen, C.-F., Liu, J.-H., Su, J.-A., Lin, C.-Y., & Pakpour, A. H. (2022). Quality of life and care burden among family caregivers of people with severe mental illness: mediating effects of self-esteem and psychological distress. *BMC Psychiatry, 22*(1), 672.
- Chronister, J., Fitzgerald, S., & Chou, C.-C. (2021). The meaning of social support for persons with serious mental illness: A family member perspective. *Rehabilitation Psychology, 66*(1), 87.
- de Jong, P., Frieder, R., Schnusenberg, O., & Timmerman, I. (2025). Beyond paychecks and prestige: unveiling the true drivers of faculty well-being. *Review of Behavioral Finance, 17*(3), 387–405. <https://doi.org/10.1108/RBF-08-2024-0246>
- Dehbozorgi, R., Fereidooni-Moghadam, M., Shahriari, M., & Moghimi-Sarani, E. (2022). Barriers to family involvement in the care of patients with chronic mental illnesses: A qualitative study. *Frontiers in Psychiatry, 13*, 995863.
- Fakhrou, A. A., Adawi, T. R., Ghareeb, S. A., Elsherbiny, A. M., & AlFalasi, M. M. (2023). Role of family in supporting children with mental disorders in Qatar. *Heliyon, 9*(8).
- Gagné, M., & Forest, J. (2020). Financial incentives to promote optimal work motivation: Mission impossible? *The Journal of Total Rewards, 36*–47.
- Galea, S., Merchant, R. M., & Lurie, N. (2020). The mental health consequences of COVID-19 and physical distancing: the need for prevention and early intervention. *JAMA Internal Medicine, 180*(6), 817–818.

- Hadiansyah, A., Fahmi, A. R., Gymnastiar, I. A., Nugroho, F. A., & Farid, F. (2025). Ramadan and Psychosocial Well-Being: Implications for Mental Health Policy in Educational Settings. *Indonesian Journal of Studies on Humanities, Social Sciences and Education*, 2(1), 72–91.
- Kim, L., & Maijan, P. (2024). An exploration process on job satisfaction in higher education. *Social Sciences & Humanities Open*, 10, 101097. <https://doi.org/10.1016/j.ssaho.2024.101097>
- Kostyrka-Allchorne, K., Stoilova, M., Bourgaize, J., Rahali, M., Livingstone, S., & Sonuga-Barke, E. (2023). Digital experiences and their impact on the lives of adolescents with pre-existing anxiety, depression, eating and nonsuicidal self-injury conditions—a systematic review. *Child and Adolescent Mental Health*, 28(1), 22–32.
- Kusumawaty, I., Surahmat, R., & Martini, S. (2021). Family support for members in taking care of mental disordered patients. *First International Conference on Health, Social Sciences and Technology (ICOHSST 2020)*, 115–120.
- Leng, A., Xu, C., Nicholas, S., Nicholas, J., & Wang, J. (2019). Quality of life in caregivers of a family member with serious mental illness: Evidence from China. *Archives of Psychiatric Nursing*, 33(1), 23–29.
- Lim, H. J., Moxham, L., Patterson, C., Perlman, D., Lopez, V., & Goh, Y. S. (2020). Students' mental health clinical placements, clinical confidence and stigma surrounding mental illness: A correlational study. *Nurse Education Today*, 84, 104219.
- Lohrasbi, F., Alavi, M., Akbari, M., & Maghsoudi, J. (2023). Promoting psychosocial health of family caregivers of patients with chronic mental disorders: A review of challenges and strategies. *Chonnam Medical Journal*, 59(1), 31.
- Ong, H. S., Fernandez, P. A., & Lim, H. K. (2021). Family engagement as part of managing patients with mental illness in primary care. *Singapore Medical Journal*, 62(5), 213.
- Phillips, R., Durkin, M., Engward, H., Cable, G., & Iancu, M. (2023). The impact of caring for family members with mental illnesses on the caregiver: a scoping review. *Health Promotion International*, 38(3), daac049.
- Pisani, D. J. (2021). *From the family farm to agribusiness: The irrigation crusade in California and the West, 1850–1931*. University of California Press.
- Polnaya, I., Nirwanto, N., & Triatmanto, B. (2018). The evaluation of lecturer performance through soft skills, organizational culture and compensation on Private University of Ambon. *Academy of Strategic Management Journal*, 17(2), 1–9.
- Rebolledo, O. (2019). Rituals and healing ceremonies help to promote psychosocial wellbeing by increasing sense of identity and community in Rohingya refugees in Bangladesh. *Intervention Journal of Mental Health and Psychosocial Support in Conflict Affected Areas*, 17(2), 278–283.
- Shimange, M. E., Poggenpoel, M., Myburgh, C. P. H., & Ntshingila, N. (2022). Lived experiences of family members caring for a relative with mental illness. *International Journal of Africa Nursing Sciences*, 16, 100408.
- Syakirin, A. (2021). Dualisme Abortus Provocatus Dalam Perspektif Regulasi (Perundang-Undangan) Di Indonesia. *Al-Syakhsyyah: Journal of Law & Family Studies*, 3(1), 1–15.
- Theng, B., Tran, J. T., Serag, H., Raji, M., Tzeng, H.-M., Shih, M., & Tran, J. (2023). Understanding caregiver challenges: A comprehensive exploration of available resources to alleviate caregiving burdens. *Cureus*, 15(8).
- Uemura, M. R. B., & Comini, G. M. (2022). Determining factors in the performance of integrated vocational education schools. *Revista de Gestao*, 29(2), 102–116. <https://doi.org/10.1108/REGE-12-2020-0123>
- Wang, D., Rushton, S., Ledbetter, L., Graton, M., Ramos, K., Cary Jr, M. P., Gray, T. F., & Hendrix, C. C. (2025). Understanding the Multidimensionality of Caregiving Appraisal: A Concept Analysis. *Nursing Forum*, 2025(1), 6087774.
- Yusuf, H., Subardhini, M., Andari, S., Ganti, M., Esterilita, M., & Fahrudin, A. (2022). Role of family and community support in the eliminating restraint of persons with mental illness. *International Journal of Health Sciences*, 6(2), 987–1000.