



RESILIENCE IN THE FACE OF LOSS:

A Phenomenological Study of Families Affected by the Death of Primary Earners Due to COVID-19 in Selected areas of Ganjam, Odisha

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Abstract : The COVID-19 pandemic has exacted a tremendous toll on global health and economic stability, significantly affecting families through the loss of loved ones who were primary earners. A phenomenological study was carried out to explore the experience and resilience of families who survived the death of an earning member due to COVID-19 in a selected area of Ganjam. Data were collected through in-depth interviews utilizing a purposive sampling technique with 8 participants from October 20, 2023, to November 6, 2023. NVIVO-14 Free trial version was used for the analysis. The study findings revealed that 62.50% of participants were females aged 31-40, with an equal split between single and married individuals. Notably, 50% were bereaved children of the deceased. A majority, 75%, had achieved higher education and belonged to nuclear families. Hospitalization periods prior to death varied, with income levels largely remaining between Rs 20,001 and Rs 40,000 before and after the loss. All deceased were males, with significant health issues like diabetes mellitus and kidney disease being prevalent. The study identified six major themes—Family Response, Last Ritual, Power Take-up, Relocation, Children and Young Adults, and Family Bereavement Experience—comprising 23 subthemes that encapsulate the complex emotional and logistical challenges faced by the families. These insights highlight the need for more extensive research to better understand and generalize the resilience mechanisms and experiences of similarly affected families.

IndexTerms - Key Words- Experience; Resilience; Family survived; COVID-19

I. INTRODUCTION

Introduction

The global ramifications of the COVID-19 pandemic have been profound, impacting both health and economies on an unprecedented scale. The COVID-19 pandemic has caused significant global loss of life and has created tremendous challenges for public health systems, food security, and employment. Its economic and social impacts have been severe, placing tens of millions of individuals at heightened risk of falling into extreme poverty.^[1] Among those most affected by these hardships are families who have lost their main source of income, often dealing with deep emotional and financial distress. Resilience can be seen as the capacity to recover from difficulties and trauma. According to the American Psychological Association, it involves adapting effectively when faced with adversity, tragedy, or significant stressors. ^[2]

Coronavirus disease (COVID-19) is an infectious disease caused by the SARS-CoV-2 virus. [3] In Odisha total confirmed case is 13,36,304, out of which 9,204 deceased in COVID -19, 36,997 affected in Ganjam, out of which 513 deceased. 8,166 affected in Berhampur Municipal Corporation, out of which 129 deceased. [4]

This study endeavors to delve into the unique experiences and resilience of families survived by the death of earning member due to COVID-19 in selected area of Ganjam, aiming to uncover their experience and coping strategies while shedding light on crucial areas requiring support.

II. Need of the study-

In Odisha it has reported 1,03,536 confirmed cases, 25,705 active cases, 545 deaths from COVID-19, and 77,286 recovered among all districts, Ganjam was having the highest confirmed cases. Though the number of confirmed cases has been rising in recent days, the case fatality rate is quite low at 0.42%, compared with the national average of 1.70%, Odisha's recovery rate is also higher than the national average. [5] To cure the Coronavirus diseases (COVID-19) a lot of research is still going on. [7] A qualitative study was conducted on wider perspectives of frontline nurses in India during the COVID 19 global pandemic revealed that the inevitability of the pandemic had an influence at a personal, professional, and social level with learning for the future as themes like 'Physical, emotional and social health', 'Adapting to the uncertainties' and 'An agenda for the future - suggestions for improvement' emphasized on practical strategies for the future. [8] Few studies have been undertaken worldwide to explore difficulties that families face while caring for COVID-19 patients and after their deaths. Most COVID-19 research has focused on quantitative and experimental methods, primarily addressing its prevalence and mortality. However, in India's diverse social and cultural context, there is a growing need for qualitative studies on patient care and bereavement. During clinical experience, the researcher experienced that family member's experience crucial situation, find difficulties to overcome it. So, the researcher felt need to research on the following aspects.

Qualitative research offers a deeper understanding of these experiences. Therefore, this study aims to explore the experiences and resilience of COVID-19 victims' families in Berhampur using a qualitative phenomenological approach. Therefore this study was undertaken with the target to investigate the depth of experience and resilience of families survived by death of earning member due to COVID-19 in Berhampur.

III. Research methodology

This study employs a phenomenological approach to understand the experience and resilience of families survived by the death of a primary earner due to COVID-19 selected areas of Berhampur. Phenomenology stands out as an ideal approach for capturing the intricate nuances and profound significance of individual experiences, illuminating the unique meanings individuals attribute to their lived realities.

Ethical considerations

The Study is approved by Research Committee College of nursing, Berhampur Vide Letter No 2537 dated 16.12.2023 & IEC, MKCG MCH, BERHAMPUR vide Letter No. 1318 dated 13.09.2023, Permission from Commissioner, Berhampur Municipal Corporation Vide Letter No 62 dated 02.01.2024. Informed consent was taken from each participant prior to data collection.

3.1 Population and sample

In this study population are those families who lost their earning member due to COVID-19 in Ganjam and accessible population refers to families residing in Berhampur Municipal Corporation who lost their earning member due to COVID-19.

Eight participants were selected using purposive sampling technique from Berhampur Municipal Corporation of Ganjam. The selection criteria ensured a diverse representation of individuals who had lost a primary earner due to COVID-19.

3.2 Data and Sources of Data

Data collection occurred from October 20, 2023, to November 6, 2023. Data were collected from individuals with purposive sampling technique from those families who are residing within Berhampur Municipal Corporation and fulfilling inclusion criteria. Sources of data researcher got from patient records from municipal corporation after obtaining due permission from concerned authority. Socio-demographic

data was meticulously collected alongside conducting in-depth interviews using self structured interview guide validated by experts, ensuring a holistic approach to gathering comprehensive narratives from the participants. These interviews provided detailed insights into the, case diagnosis, adaptation and resilience, relocation of responsibility, power take up, emotional, economic, and social impacts after their lost their earning member.

3.3 Theoretical framework

For this research, a couple of theoretical frameworks acknowledged. Many elements needed to be addressed regarding experiences and resilience of families survived by death of earning member due to COVID 19. Researcher adapted Roy's adaptation model for this study. Further researcher implemented conceptual frame work integration inpt-process-output model with Roys's Adaptation Model for the study.

3.4 Research tool-(Self-structured In-depth Interview guide)

Consisted Eleven question for socio-demographic data. Furthermore, the indepth interview guide consisted ten main questions including many prompts under domains as Case Diagnosis and Mortality, Adaptation and resilience, Relocation of responsibility and Power take-up.

3.5 Data Analysis

The NVIVO-14 Free trial version [6] was used to facilitate the analysis of qualitative data. This software facilitated in organizing and identifying themes and subthemes from the interview transcripts, offering a structured methodology for comprehending the data.

IV . Results and Discussion

Demographic Profile

Table 1: Frequency and percentage distribution of study participant based on the demographic variables. N=8

Sl. No.	Categories	Frequency	Percentage (%)
1	Gender of respondent		
	Male	3	37.50%
	Female	5	62.50%
	Transgender	0	0
2	Age of the respondent		
	21-30years	3	37.50%
	31-40 years	4	50%
	41-50 years	0	0
	51-60 years	1	12.50%
3	Marital status		
	Single	3	37.50%
	Married	3	37.50%
	Widow/Separated	2	25%
4	Deceased relation with informant		
	Parent	4	50%
	Sibling	2	25%
	Spouse	2	25%
	Child	0	0%
5	Education		
	No formal education	0	0%
	Primary	1	12.50%
	Higher Secondary	1	12.50%
	Graduation and above	6	75%
6	Type/ nature of family		

	Nuclear	6	75%
	Joint	2	25%
	Extended	0	0%
7	Hospitalization duration of the deceased person		
	Less than 1 week	2	25%
	1-2 weeks	3	37.50%
	Over 2 weeks	3	37.50%
8	Previous monthly income of family		
	Rs- 0-10000	0	0
	Rs-10001—20000	1	12.50%
	Rs-20001-40000	3	37.50%
	Rs-40001- 70000	2	25%
	More than Rs-70001	2	25%
9	Current monthly income of the family		
	Rs- 0-10000	0	0
	Rs-10001—20000	2	25%
	Rs-20001-40000	4	50%
	Rs-40001- 70000	1	12.50%
	More than Rs-70001	1	12.50%
10	Gender of deceased family member		
	Male	8	100%
	Female	0	0
	Transgender	0	0
11	Co morbidities of deceased person with COVID 19		
	Diabetes mellitus	2	25%
	Hypertension	1	12.50%
	Respiratory disease(asthma)	1	12.50%
	Kidney disease	2	25%
	Nothing	2	25%

Gender and Age: 62.50% of participants were females aged 31-40.

Marital Status: There was an equal split between single and married individuals.

Relationship to Deceased: 50% were bereaved children of the deceased.

Education and Family Structure: 75% had higher education and belonged to nuclear families.

Economic Impact: Income levels before and after the loss largely remained between Rs 20,001 and Rs 40,000.

Health and Economic Context

All deceased were males, with prevalent health issues such as diabetes mellitus and kidney disease. The hospitalization periods prior to death varied, indicating diverse medical trajectories.

Identified Themes

Table- 2-Theme analysis

Theme	Subtheme
Family Response	Initially denied
	Challenges faced in accessing care
	Profound Emotional Impact
	Adapted various coping Mechanisms

Last Rituals	Changes in the environment
	Heartbreaking last-seen farewell
	Belongings returned
	Neglected Relatives/Friends
	Pandemic constrained funeral ritual
Power take-up / Power shifting	Earning member leads decision with female input
	Role shifts
	Earned member shoulders more duties
	Family strife
	Diminished family communication
Relocation	Legal/Financial Plans
	Encountered challenges in execution of financial Plans
	Challenges Encountered
Children and Young Adults	Compromised Education/Career/Aspiration
Family Bereavement Experience	Unveiling emotional grief
	Sense of solitude and seclusion
	Deteriorated self-Esteem
	Comforting endeavours
	Persistent bereavement

Family Response:

Immediate reactions to the loss, ranging from shock and disbelief to gradual acceptance and adaptation. It encompasses six subthemes: initial denial, challenges in accessing care, profound emotional impact, adoption of various coping mechanisms, changes in the environment, and the heartbreaking last-seen farewell.

*Initially denied -

The initial reaction to both the diagnosis and subsequent passing of individuals involves a series of medical interventions that typically include hospitalization, isolation from loved ones, and, ultimately, intensive care in an ICU, highlighting the severity and extended nature of the treatment required during this challenging period.

"1st he was diagnosed in nearly government hospital and isolated. After 10 days of admission, he was shifted to ICU and was on ventilator for 13 days, then he passed away. It was difficult for us to accept that he was no more." #Sample-1

*Challenges in accessing care-

The family's endeavours to procure medical treatment, coupled with the hurdles they encountered in accessing healthcare services beyond their local vicinity, underscore the intricate challenges and inherent limitations within the healthcare infrastructure, significantly influencing the overall patient outcomes.

"Firstly, we got treated him in Homeopathic treatment, when there is Oxygen shortage, we wanted to shift my father to another hospital but faced difficulty to shift him out our town. Then he got admitted in Aswini Hospital. Then he was hospitalized for more than 2 weeks, 4 days in ventilator. After that, he left us."

#Sample-2

*Profound Emotional Impact-

The profound emotional repercussions stemming from the loss permeate deeply within the family, impeding their capacity to come to terms with the stark reality of the situation, thereby inducing distress and presenting formidable challenges in effectively navigating through the absence of their cherished family member.

"It was all in our front, it was very difficult to accept the situation, difficult to accept that we can't see him anymore, we can't talk with him, our children and in-laws couldn't accept the situation." #Sample-1

*Adaptation of various Coping Mechanisms -

Family members utilize an array of coping mechanisms, such as engaging in open communication with their children and seeking support from neighbours, as they endeavour to navigate through the intricate web of emotional tribulations and practical responsibilities that inevitably arise in the aftermath of the loss.

"Our Children know the situation from the beginning, but it was very difficult for them to realize as they lost their father. When my in-laws heard the incident, my father-in-law got hospitalized due to high BP, anxiety, and trauma. My mother-in-law denied the news and not accepted it at all. She said that she wants to see her child. Even I was not in a situation to explain and make them understood. Our neighbour's helped that time and took care of them." #Sample-1

***Changes in the environment-**

In an attempt to navigate through the intricacies of this challenging period, the family made a strategic decision to transition into a new phase of their lives by opting to relocate, preferring to shift their household to a different location and alter the living setup, thereby hoping to forge a fresh environment that could potentially offer solace and a new beginning amidst their grief.

"We changed the place; we shifted to our new house that was made by my father". #Sample-3

***Heartbreaking last-seen farewell –**

The widespread disruption brought about by the pandemic has compelled a revaluation of traditional funeral practices, underscoring the imperative need for flexibility and adaptation in the execution of last rites, ensuring that these solemn ceremonies are conducted in a manner that not only respects the dignity of the departed but also strictly adheres to the prevailing public health measures to safeguard the living.

"Last ritual was pain; it was not planned, just happened, but the government officials supported us. At least we could see him for the last time." #Sample-2

Last Ritual:

Changes in traditional last rites due to pandemic restrictions, impacting the grieving process. It includes three subthemes: belongings returned, neglected relatives/friends, and pandemic-constrained funeral rituals.

***Belongings returned-**

The customary practice of returning belongings upon admission to healthcare facilities serves as an established protocol aimed at ensuring the comfort and dignity of patients, yet instances of incomplete return may serve as indicators of potential administrative or procedural shortcomings, necessitating further scrutiny and remedial action to uphold the standards of patient care and operational efficiency within such settings.

"At the time of admission, the valuables returned to us, but his phone and spectacles are not returned." #Sample-1

***Neglected Relatives/Friends –**

Fewer help from family and friends shows that people are worried about the risks of the pandemic. It shows how vital it is for neighbours and communities to support each other when there's a crisis.

"Our neighbours and my brother supported that time. But other relatives just for the sake of formality, they just only called us. Everyone was afraid to come to our house because of the pandemic." #Sample-2

"No relatives helped us at that time, everyone was avoiding our phone calls and many neighbours passed silly comments without understanding our situation." #Sample-7

***Pandemic constrained funeral ritual-**

Restrictions on funeral gatherings due to the pandemic necessitate adjustments in traditional funeral practices, leading to smaller, more intimate gatherings and challenges in observing customary rituals and ceremonies.

"On the 12th day because of the pandemic, we couldn't arrange the feast after the death ceremony; just 12-15 members were there in support." #Sample-1

Power Take-up/Power Shifting:

Shifts in household responsibilities and power dynamics, often increasing burdens on surviving members. It is detailed through five subthemes: decision-making led by the earning member with input from females, role shifts, the earning member shoulders more duties, family strife, and diminished family communication.

***Decision-making led by the earning member with input from females -**

The shift in decision-making responsibilities from male family members to female members signifies a change in traditional gender roles and highlights the adaptation to new family dynamics following the loss of the male head.

"Previously my husband and my father-in-law mutually took all the decisions for my family."

#Sample-1

*Role shifts-

Role shifting within the family dynamics can lead to changes in relationships and perceptions, resulting in potential conflicts and challenges in adjusting to new roles and responsibilities.

"My in-laws do not love my sons as much as they used to before, they blame my sons; that's why we admitted my husband to a government hospital." - #Sample-1

*Earned member shoulders more duties-

Disparities in responsibility allocation within the family can lead to feelings of burden and strain on certain family members, impacting their emotional well-being and contributing to potential conflicts and challenges.

"Major responsibility was on my son's shoulder." #Sample-1

"Generally all responsibilities came on my part as I was the only bread earner in our family."

#Sample-6

*Family strife –

Conflicts arising from changes in family roles and responsibilities, coupled with external scrutiny and judgment, can strain intra-family relationships and contribute to emotional distress and tension.

"Now, there are quarrels between me and my in-laws. Some relatives also blame us for not taking enough care of our in-laws, but things are not like that." #Sample-1

*Diminished family communication-

Changes in communication patterns within the family and extended relatives reflect the impact of loss on interpersonal dynamics, leading to shifts in interaction styles and potential isolation from broader support networks.

"Communication changed a lot after the demise of my husband between my in-laws and me, the communication changed a lot and also with the extended relatives. Now the communication is much reduced with extended family members." #Sample-1

Relocation:

Some families had to relocate due to financial constraints or loss of their homes. Relocation, is outlined by three subthemes: Legal/Financial Plans, challenges encountered in executing financial plans and encountered challenges.

*Legal/Financial Plans-

Pre-existing legal and financial plans, including insurance and property ownership, provide a foundation for managing post-loss financial challenges and accessing support resources.

"Our all property is in my name. He loved me very much. He has done LIC insurance, and I was the nominee, and we claimed it. Because of that insurance we got some help. Loan was also there that my husband borrowed from his friend." #Sample-8

*Challenges encountered in executing financial plans -

Despite having plans in place, challenges in executing them, such as financial constraints and administrative hurdles, can exacerbate the stress and strain on family members coping with the loss.

"Health care-related expenditure of my in-laws and me was affected. We don't have enough money to spend on medications. That hurt the most." #Sample-8

*Challenges Encountered-

The lack of support networks and resources can magnify the challenges faced by the family, highlighting the need for external assistance and community support in navigating post-loss difficulties.

"Financial problem was the major issue; we don't have much family and friends to support us, to guide us." #Sample-8

Children and Young Adults:

Unique challenges faced by bereaved children and young adults, including disruptions in education and psychological distress. It contains a single subtheme focusing on compromised education, career aspirations.

*Compromised Education/Career/Aspiration-

Children and young adults adjust in their education and career plans to support their family and fulfil the responsibilities left behind by the deceased, demonstrating resilience and maturity in navigating through difficult circumstances.

"My younger son was working previously in Surat, but now he was with us to fulfil and carry out all tasks left by his father." #Sample-1

"I have to leave my master degree in between as I have to earn anyhow for my family and started new job." #Sample-4

Family Bereavement Experience:

The overall bereavement experience, shaped by emotional turmoil and practical difficulties, with each family navigating their path to resilience differently. Comprises five subthemes: unveiling emotional grief, a sense of solitude and seclusion, deteriorated self-esteem, comforting endeavors, and persistent bereavement.

***Unveiling emotional grief-**

Participants continue to express their enduring sorrow and struggle to overcome the profound impact of the loss, indicating a prolonged period of emotional distress and challenges in the process of recovery.

"Till now we are not recovered from that trauma. Every question of yours keeps reminding me of that event again. It was very painful." #Sample-1

***Sense of solitude and seclusion-**

Participants articulate sentiments of loneliness and a pervasive sense of isolation in the aftermath of the loss, conveying profound emotional struggles and a palpable disconnect from their surrounding social support networks.

"Of course, I and all my family members have faced the crucial trauma. I always feel lonely. I know he is always with me." #Sample-2

***Deteriorated self-Esteem-**

Participants communicate how the loss has profoundly shattered their confidence and fractured their sense of self, leaving them grappling with a profound upheaval in their identity and a pervasive sense of uncertainty about their place in the world.

"I got broken. My confidence got broken. As he was there, I was completely dependent on him. I miss his presence." #Sample-3

***Comforting endeavours-**

Participants describe the support they received from family and neighbours during their time of grief.

"See at that time I am not in a position to console others. But my brother and my neighbour always with us, taking care of us, my children act as a great support system for me." #Sample-4

***Persistent bereavement-**

Participants introspect on the continual journey of bereavement, acknowledging the arduous nature of fully relinquishing the grip of sorrow and grappling with the enduring challenge of embracing a new normalcy beyond the loss.

"As you asked that, I can't say that the bereavement went completely, but we are trying to come out of sorrow. My children are busy so they came out from trauma, but my in-laws and I, as we are living in the same environment. We always remember him." #Sample-5

Discussion

This study highlights the emotional, economic, and social challenges faced by families who lost their primary earners to COVID-19. Their resilience emphasizes the need for comprehensive support, including mental health care, financial aid, and educational support for grieving children. It also calls for stronger interdisciplinary collaboration, quality improvement initiatives, and a holistic care approach led by nurses. Policymakers must prioritize resources to build robust support systems, while nursing leaders can implement policies like bereavement leave and counseling access. Additionally, integrating chronic health management into pandemic preparedness is crucial to avoid similar crises in the future.

Conclusion

This study offers profound insights into the resilience and struggles of families in Ganjam grappling with the loss of primary earners due to COVID-19. These families endure multifaceted challenges encompassing physical, financial, emotional, power dynamics, and shifting responsibilities, compounded by the grieving process. By comprehensively grasping their distinct challenges and adaptive strategies, tailored support systems can be crafted to nurture resilience and facilitate recovery. Future research endeavors are imperative to extrapolate and refine these findings, ultimately enhancing assistance for families facing

similar circumstances. Nurses occupy a pivotal role in comprehending and addressing these complexities, utilizing their expertise to foster holistic family resilience and provide unwavering support during this tumultuous period.

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CONFLICT OF INTEREST

The authors declare that there is no conflict of interest.

Lipsa Nayak: Data collection, analysis , review of Data analysis and interpretation and manuscript preparation

Dr. Ranjita Beura: Conception of idea and framing the course work , Revision of tool of data collection and manuscript preparation

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