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PSYCHOLOGICAL INTERVENTIONS FOR REDUCING STRESS AND IMPROVING COPING AMONG WIVES OF PERSONS WITH ALCOHOL DEPENDENCE: A SYSTEMATIC REVIEW

Mrs. Usha B S, Dr. Prasanna Kumar O
[1]Professor & HOD, Department of Community Health Nursing, Shree Siddaganga Institute of Nursing Sciences and Research Centre, Tumkur
[2]Government College of Nursing, Bengaluru
Correspondence author: Email id; ushashivana@gmail.com Mob No; 9738574028

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ABSTRACT

Background: Wives or female partners of persons with alcohol dependence may experience psychological distress, family conflict, financial strain, stigma, caregiving burden and reduced social support. Previous literature on affected family members indicates a need for interventions addressing coping and psychological well-being.[1-8]

Objective: To systematically review psychological and psychosocial interventions intended to reduce stress and improve coping among adult wives or female partners of persons with alcohol dependence, alcohol use disorder or problematic alcohol use.

Methods: This systematic review protocol will follow the Preferred Reporting Items for Systematic Review and Meta-Analysis Protocols (PRISMA-P) 2015 guidance.[9,10] PubMed/MEDLINE, CINAHL, PsycINFO, Scopus, Web of Science and the Cochrane Central Register of Controlled Trials will be searched. Reference lists of eligible studies and relevant reviews will also be screened. Eligible studies will include randomized controlled trials, quasi-experimental studies and prospective pre-post intervention studies. Primary outcomes will be stress, psychological distress and coping; secondary outcomes will include anxiety, depression, quality of life, self-esteem, social support, family functioning and marital satisfaction. Two reviewers will independently screen studies, extract data and conduct design-appropriate JBI critical appraisal. Narrative synthesis will be undertaken, with meta-analysis considered only when clinical and statistical homogeneity is sufficient.

Conclusion: This protocol provides a prespecified method for identifying and synthesizing evidence on psychological and psychosocial interventions for wives or female partners affected by another person's alcohol use. No study results or conclusions about intervention effectiveness are reported in this protocol.

Introduction

Alcohol dependence and problematic alcohol use can affect spouses and other family members as well as the person who drinks. Studies involving wives of persons with alcohol dependence have described psychological, social and family difficulties and a range of coping responses.[1,2] Broader reviews of families affected by substance use suggest that psychosocial interventions may address coping, psychological distress, family functioning and relationship outcomes, although intervention content and study quality vary.[3]

The nursing relevance of this topic is based on the potential role of nurses in identifying psychological distress, providing psychoeducation and supportive interventions, assessing safety and coordinating referral within mental-health, addiction and community services. This protocol therefore focuses specifically on interventions directed at wives or female partners rather than interventions directed only at the person with alcohol dependence.[1]

Need for the Review

The psychological needs of spouses may be overlooked when services are primarily organized around the person with alcohol dependence. Previous literature describes stigma, family disruption and difficulties with coping among affected family members.5 A focused synthesis may clarify which psychological or psychosocial approaches have been evaluated for wives

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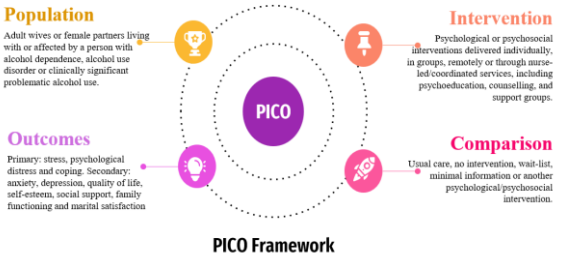
or female partners and which outcomes have been measured.

Broader systematic reviews have included affected family members across different substances and relationship types; evidence specifically focused on wives or female partners of persons with alcohol dependence may therefore require focused synthesis.[8]

Review Question

Among adult wives or female partners of persons with alcohol dependence, alcohol use disorder or clinically significant problematic alcohol use, what are the effects of psychological or psychosocial interventions, compared with usual care, no intervention, wait-list, minimal information or an alternative psychological intervention, on stress, psychological distress, coping and related psychological or family outcomes?

PICO Framework



PICO Framework

Element	Definition
Population	Adult wives or female partners living with or affected by a person with alcohol dependence, alcohol use disorder or clinically significant problematic alcohol use.
Intervention	Psychological or psychosocial interventions delivered individually, in groups, remotely or through nurse-led/coordinated services, including psychoeducation, counselling, cognitive-behavioural strategies, coping-skills training, stress management and support groups.
Comparison	Usual care, no intervention, wait-list, minimal information or another psychological/psychosocial intervention.
Outcomes	Primary: stress, psychological distress and coping. Secondary: anxiety, depression, quality of life, self-esteem, social support, family functioning and marital satisfaction.

Objectives

1. To identify psychological and psychosocial interventions evaluated among adult wives or female partners of persons with alcohol dependence, alcohol use disorder or problematic alcohol use.
2. To determine the reported effects of eligible interventions on stress, psychological distress and coping.

3. To summarize reported effects on anxiety, depression, quality of life, self-esteem, social support, family functioning and marital satisfaction.

4. To critically appraise the methodological quality of included studies using JBI tools appropriate to each study design.

Methodology

Design and Reporting

This manuscript is a systematic review protocol. The review will be planned and reported using PRISMA-P 2015 guidance.[9,10] PRISMA 2020 is a reporting guideline for completed systematic reviews and will be used when reporting the completed review, rather than as the protocol framework.[11] The protocol will be finalized before formal screening. Registration in PROSPERO will be considered if the review meets eligibility requirements. Any protocol amendments will be documented and reported transparently.

Eligibility Criteria

Population: Studies involving adult wives or female partners of persons with alcohol dependence, alcohol use disorder or clinically significant problematic alcohol use.

Interventions: Defined psychological or psychosocial interventions intended to influence stress, coping or related psychological/family outcomes, including psychoeducation, counselling, cognitive-behavioural approaches, coping-skills training, stress management and support groups.

Comparators: Usual care, no intervention, wait-list, minimal information or an alternative psychological/psychosocial intervention.

Outcomes: Studies must report at least one relevant primary or secondary outcome. Primary outcomes are stress, psychological distress and coping. Secondary outcomes are anxiety, depression, quality of life, self-esteem, social support, family functioning and marital satisfaction.

Study designs: Randomized controlled trials will be considered the principal design for estimating intervention effects. Quasi-experimental and prospective pre-post intervention studies will also be eligible and will be synthesized separately from

randomized evidence where appropriate. These designs will not be treated as equivalent in appraisal or interpretation.

Exclusion criteria: Studies focused only on the person with alcohol dependence without spouse outcomes; purely pharmacological interventions without a psychological component; studies without relevant outcomes; editorials, opinion papers, case reports and abstracts without adequate data; and mixed substance-use samples in which spouse-specific data cannot be separated.

Information Sources

The planned databases are PubMed/MEDLINE, CINAHL, PsycINFO, Scopus, Web of Science and the Cochrane Central Register of Controlled Trials. Reference lists of included studies and relevant systematic reviews will be screened. Grey literature may include dissertations, trial registries and institutional repositories. The completed review will report the search dates, database platforms, complete search strategies, filters and numbers of records retrieved.

Search Strategy

A draft PubMed strategy is provided below and will be adapted for each database: "Alcohol-Related Disorders"[MeSH] OR alcohol depend* OR alcohol use disorder* OR alcoholism OR problematic drinking and (wife OR wives OR spouse* OR partner* OR "affected other*" OR family member*) AND (psychological intervention* OR psychosocial intervention* OR counselling OR counseling OR cognitive behavio* therapy OR stress management OR coping skills OR psychoeducation OR support group* OR family therap*) AND (stress OR distress OR coping OR anxiety OR depression OR quality of life)

The final review will report the complete database-specific strategies and the date of the last search.

Study Selection

Two reviewers will independently screen titles and abstracts against the prespecified criteria. Potentially eligible reports will undergo full-text assessment. Reasons for exclusion at the full-text stage will be recorded. Disagreements will be resolved through discussion and, when required, consultation with a third reviewer. The completed review will present the selection process using a PRISMA 2020 flow diagram generated from the verified screening log.[11]

Data Extraction

A piloted data-extraction form will record author and year, country, setting, study design, sample size, participant characteristics, alcohol-use definition, intervention components, duration, provider, delivery mode, comparator, outcome instruments, assessment time points, effect estimates, attrition, adverse events, funding and conflicts of interest.

Critical Appraisal

The JBI critical appraisal tool appropriate to each included study design will be selected before appraisal. Two reviewers will independently appraise each study. Findings will be reported transparently by domain or item. Randomized, quasi-experimental and prospective pre-post evidence will be considered separately when interpreting study quality and consistency.

Data Synthesis

A structured narrative synthesis will be undertaken for all included studies. Interventions, populations, comparators and outcomes will first be assessed for clinical and methodological similarity. Meta-analysis will be considered only where sufficient homogeneity exists. Continuous outcomes measured using different instruments may be summarized using standardized mean differences with 95% confidence intervals. Statistical heterogeneity may be examined using I^2 where pooling is appropriate. When meta-analysis is not appropriate, findings will be presented narratively and stratified by study design and intervention type.

Protocol Registration and Amendments

The protocol will be registered in PROSPERO if eligible. The registration number, if obtained, will be reported in the final manuscript. Any important amendment made after registration will be described with its rationale and date.

Planned Reporting of Results

No results are presented in this protocol. The completed review will report the numbers of records identified, duplicates removed, records screened, full-text reports assessed, reasons for exclusion and studies included in qualitative and, where appropriate, quantitative synthesis. Study characteristics, intervention characteristics, critical-appraisal findings and outcome data will be presented only after completion of the prespecified search, screening and extraction process.

Anticipated Contribution to Nursing Practice

The review is intended to clarify the available evidence on psychological and psychosocial interventions for wives or female partners affected by another person's alcohol use. The final implications for nursing practice, education and service delivery will be based on the evidence identified and synthesized in the completed review rather than on assumptions made from the protocol.

Limitations Strengths and of the Protocol

Strengths include a prespecified eligibility framework, a structured database search, independent study selection and data extraction, design-appropriate critical appraisal and a planned distinction between randomized and non-randomized intervention evidence. Potential limitations include heterogeneity in definitions of alcohol use, intervention content and intensity, outcome measures, study designs and follow-up periods. Publication and language restrictions, if applied, will be explicitly reported.

Conclusion

This systematic review protocol establishes a prespecified approach for identifying and synthesizing evidence on psychological and psychosocial interventions for adult wives or female partners of persons with alcohol dependence, alcohol use disorder or problematic alcohol use. The completed review will determine the effects of eligible interventions on stress, psychological distress, coping and related outcomes. No conclusions about intervention effectiveness will be drawn from this protocol.

Declarations

Ethical approval: Not required for a systematic review protocol because no primary participant data are collected. Any additional institutional or journal-specific requirements will be addressed according to applicable policy.

Consent for publication: Not applicable because this protocol does not involve the collection or publication of identifiable individual participant data.

Conflict of interest: The authors declare that they have no conflicts of interest related to the conduct, authorship or publication of this systematic review protocol.

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