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An exploratory study to assess knowledge regarding Homecare of patient with chemotherapy among care giver of patient suffering from cancer patients residing in selected areas of the Pune

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Abstract

Cancer is a group of disease with similar characteristic, which can occur all living cells in the body and different cancer type have different natural history. To assess the knowledge regarding of patients with chemotherapy caregiver of patient suffering from cancer residing in selected areas of Pune city.

Quantitative approach was chosen for the research study. The research design used for the study was exploratory survey design. The study consists of 60 samples which were selected by non probability convenient sampling. The study was conducted in selected areas of Pune city. The data were collected by administering structured questionnaire 60 participants under study. The questionnaire consists of two parts. Section A which deals with demographic data of participating and section B which consists of question related to knowledge regarding self care after the patient.

The validity of the tool was done by 5 experts from various fields of obstetrics and gynecology nursing, community health nursing, medical-surgical nursing. The reliability of questionnaire was established by the method and was found to be 0.79.

In this study it is found that most caregiver chemotherapy patients were having good knowledge but still there is a home caregiver whose knowledge level is average and poor. It shows that home care is still limited and it requires greater attention and commitment from a health professional. There is no significant association between the selected demographic variables and the knowledge of home caregiver for chemotherapy patient regarding self care of the patient. I.e. age, gender, relation with patient, education, occupation, and marital status.

Keywords: chemotherapy, caregiver, homecare, knowledge

1. Introduction

Cancer is a term used for disease in which abnormal cell divides without and are able to invade other tissue. Cancer cases are estimated around 12.7 million new cases diagnosed worldwide in 2010. Childhood cancers are the leading cause of death by disease among children aged 1-14 years of age. In India out of 8 lakh cancers diagnosed actually about 50,000 is childhood cancer. According to the Indian nursing council of medical research a decade back childhood was 2.5% of the total number of the cancer cases, today they old up to 5.5% according to statistics. 1.5 to 4.8 of all cases reported in the country is among children below 15 years of age. The most common type of cancer seen in children is leukemia, which accounts for about 34% of all cancers, followed by neuroblastoma, Wilm's tumor, lymphoma, and retinoblastoma.

The care of children's with cancer is a complex, challenging and lengthy process. Hence the child needs to be provided all the care by the parents after discharge from hospital. Responsibilities of caregivers have extended widely and more technical jobs such as medications, administration, maintaining neutropenic precautions at home, and care of invasive lines, diet, and early recognition of complication

are fewer routine jobs for family caregivers. Low socio-economic status of the parents, lack of knowledge of medical care and resources to meet the medical care are some of the impendent which probably compel the parents to delay or postpone the follow up visits.

The world health organization promotes the importance of families receiving input from palliative care services. Identifying the patient and family as the unit of care. Nurses need to recognize the patient and their caregivers react to cancer as a unit and as a result, they both have a legitimate need for help from health care professionals. When caregiver's needs are not addressed, patients are denied the opportunity to obtain care from a well-prepared family caregiver. Programs of care directed only towards patients are seldom sufficient to meet patients need because so much of the patient care depends on family caregivers.

Cancer patients and their family caregivers react to cancer as one emotional system. An article from the journal of pediatric oncology nursing suggests that home care has become a well accepted option for children with chronic illness. Such as cancer, who require continued technological care for survival? Nurses play a major role in the discharge planning for home care by educating caregivers to perform

the necessary care and ensuring that the caregivers and the home environment are ready for the child's discharge.

2. Methodology

A non experimental study enrolling the 60 home caregivers from chemotherapy patients was conducted during the month of 19 Feb 2018 to 9 march 2018 from one setting. An exploratory survey design was used to evaluate the knowledge of the caregiver regarding chemotherapy patient. The samples were selected by using Non probability convenient sampling method. The collected data were analyzed by using descriptive and inferential statistics.

3. Result

Table 1: Shows that out of 60 samples, majority (60%) of the gender is female.

Sr. No.	Data	Frequency	Percentage
1.1.	**Age**		
	a) 20-30	5	8.33%
	b) 31-40	5	8.33%
	c) 41-50	14	23.4%
	d) Above 50	36	60%
1.2.	**Gender**		
	a) Male	24	40%
	b) Female	36	60%
1.3.	**Relation with patient**		
	a) Father	1	1.7%
	b) Mother	10	16.7%
	c) Wife	20	33.3%
	d) Husband	25	41.7%
	e) Other	4	6.6%
1.4.	**Education**		
	a) Primary education	10	16.6%
	b) Secondary education	23	38.4%
	c) Graduate	24	40%
	d) Post graduate	3	5%
1.5.	**Occupation**		
	a) Housewife	13	21.7%
	b) Job	32	53.3%
	c) Business	10	16.7%
	d) Other	5	8.3%
1.6.	**Marital status**		
	a) Married	47	78.4%
	b) Unmarried	5	8.3%
	c) Divorce	3	5%
	d) Widow	5	8.3%

Table 2: Showing level of knowledge regarding homecare of patient with chemotherapy.

Sr. No	Level of knowledge	frequency	Percentage
1.1	0-5 marks = poor knowledge	O	0
1.2	6-10 marks = average knowledge	8	14%
1.3	11-15 marks = good knowledge	52	86%

Frequency, a percentage distribution table showing knowledge regarding Homecare of patient with chemotherapy among caregiver of patient suffering from cancer residing in selected areas of Pune city. The above table shows that out of 60 samples, 86% of the caregivers are showing the average knowledge about homecare of patient with chemotherapy, 14% are showing good knowledge. And 0% students are showing poor knowledge about homecare of patient with chemotherapy.

Table 3

Sr. no	Categories	Mean N=60	Standard deviation N=60
1	Identification of knowledge score	12.69	1.5523

Table 4: Association of knowledge score with demographic data.

Demographic Data	Degree of association	Table value	Calculated value	P value
Age	06	5.2750	6.25	0.1
Gender	01	0.1785	2.71	0.1
Relation with patient	08	7.4713	13.36	0.1
Education	06	3.8360	10.64	0.1
Occupation	06	1.4364	1.64	0.95
Marital status	06	1.5654	1.64	0.95

4. Discussion

The present study assesses the knowledge showing knowledge regarding homecare of patient with chemotherapy among caregiver of patient suffering from cancer residing in selected areas of Pune city.

This study was conducted on 60 caregivers. The structured questionnaire was given and data were collected. The data was analyses.

The above Study shows that knowledge of home care giver for chemotherapy patient. In these two studies the maximum home care giver has good knowledge regarding chemotherapy patient. The above study is similar to A study was conducted in India, Kerala to evaluate the effect of chemotherapy on distress, anxiety and depression among cancer patients. A total of 117 patients was evaluated by using distress inventory for cancer (DIC2) and hospital anxiety and depression scale (HADS). The majority of the patients were taking chemotherapy for solid tumors (52; 44.4%). The results show that the mean distress score was 24, 18 (15.38%) were found to have anxiety while 19 (16.23%) had depression. High social status was the only factor found to influence distress while female gender was the only factor found to influence depression in the present study.

5. Conclusion

The majority of the participants had adequate knowledge regarding home care givers there is an essential need for further education, knowledge, regular checkup, for such personnel would be required.

In this study, there is no association with the knowledge of home care giver as per the value of p is less than 0.05

This study shows that home caregiver is having 86% good knowledge and 14% are having average knowledge so that those 14% home caregivers should have to improve their knowledge regarding chemotherapy patient's care at home.

6. Recommendation

1. The study can be done in a large sample size to confirm the result of the study.
2. An evaluating study can be done to determine the effectiveness of a structured teaching programme of home caregiver regarding chemotherapy.

7. References

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