A study to assess the awareness of care givers towards the care of terminally ill subjects at tertiary care hospital: A statistical approach

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Abstract

Need of the study: One of the important factors influencing a successful delivery of palliative health care is the health care professionals’ knowledge, attitudes, awareness, and experiences, which determine not only their procedure but also their behavior during evaluation and treatment of patients. Nurses play most valuable role in care of terminally ill patients. Along with nurses or health care workers, there is a real need that the care givers of terminally ill patients should also have the required proper knowledge about how to take care of the patients. Hence the aim of this study was to know about the awareness among care givers of terminally ill subjects at a tertiary care hospital which would help the care givers to enhance their knowledge.

Objectives: The objectives of this study were
1. To assess the awareness of care givers regarding care of terminally ill subjects.
2. To find association between awareness and selected demographic variables.

Material & Methods: Used for the study is the evaluative approach with only study group. Study was conducted on sample of 25 care givers of the terminally ill patient. The data were collected by structured questionnaire. The data were analyzed using descriptive and inferential statistics.

Results: Majority of care givers 21 (84%) had average level of awareness towards the care of terminally ill subjects, whereas 1 (4%) of care givers had good level of awareness and 3 (12%) of care givers had poor level of awareness towards care of terminally ill subjects. Overall there was average awareness in care givers towards care of terminally ill subjects.

Conclusion: There was significant association was found between education and awareness of care givers towards care of terminally ill subjects. On-going teaching and health education programs can further improve the awareness of care givers towards care of terminally ill subjects.

Keywords: Terminally, Care Givers, Ill, Palliative.

Introduction
Death is an unavoidable thing that affects every human being. Nurses are present at both the starting and the end of life, and play a key role in caring for dying patients. That role is seen as one of the most stressful sides of nursing.1 “Palliative care (PC) is an approach that improves the quality of life of patients and their families facing the problem associated with life-threatening illness through the prevention and relief of suffering by means of early identification, impeccable assessment and treatment of pain and other problems like physical, psychosocial and spiritual” (WHO, 2006).2 According to the WHO estimates more than 4 million people will benefit from palliative care. <1% of those who need
palliative care services have any access to such services in the country. It is a comprehensive approach where teams work together as one namely family members, palliative care providers, nursing assistants, social workers, physiotherapists, volunteers and community to relieve, and ease the pain (physical, mental and spiritual) of the sufferer and offer a support system until their end of life.

Palliative care is typically viewed as being the passionate care of a patient who is close to death. Some chronically ill patients die from the side effect of treatment.

Palliative patients have to be hospitalized, because the problems cannot be handled in the home situation or because sufficient family care is lacking at home. More than half of the home patients move in the last months for dying still to another setting because of acute medical problems, lack of professional home care or overload of the informal care.

One of the important factors influencing a successful delivery of palliative health care is the health care professionals’ knowledge, attitudes, awareness, and experiences, which determine not only their procedure but also their behavior during evaluation and treatment of patients. Nurses are the most valuable palliative care team members who address the physical, functional, social, and spiritual dimensions of care. Nurses as well as other healthcare workers often feel not well-prepared for their task in palliative care and are much in need of more expertise in the field of pain and symptom management, communication and dealing with ethical dilemma’s.

Along with nurses or health care workers, there is a real need that the care givers of terminally ill patients should also have the required proper knowledge about how to take care of the patients. Moreover, the knowledge, awareness and attitude of care givers about care of terminally ill patients is very minimal as per various studies hence the aim and objective of this study was to know about the awareness among care givers of terminally ill subjects at a tertiary care hospital which would help the care givers to enhance their knowledge.

Materials and Methods
The evaluative approach with one group design was used. Study was conducted on sample of 25 care givers of the terminally ill subjects in selected tertiary hospital by using convenient sampling technique.

Statistical Methods
Data were collected, tabulated and analyzed using SPSS version 20.0 with regard to objectives of the study using descriptive and Inferential Statistics. Descriptive Statistics namely frequency and percentage was done. t test was used to check the association between selected demographic variables and awareness of care givers of the terminally ill subjects.

Results
Table 1: Frequency and Percentage distribution of care givers of terminally ill subjects according to socio demographic parameters

| Sr. No. | Socio Demographic Variables | No. | %   |
|---------|-----------------------------|-----|-----|
| Age     |                             |     |     |
| 1       | <20 yrs                     | 0   | 0.00|
|         | 20-30 yrs                   | 5   | 20.00|
|         | 31-40 yrs                   | 4   | 16.00|
|         | >40 yrs                     | 16  | 64.00|
| Gender  |                             |     |     |
| 2       | Male                        | 9   | 36.00|
|         | Female                      | 16  | 64.00|
| Educational Qualification |               |     |     |
| 3       | Illiterate                   | 4   | 16.00|
|         | Primary                     | 8   | 32.00|
|         | Secondary                   | 8   | 32.00|
|         | Graduate                    | 5   | 20.00|
| Occupation |                           |     |     |
| 4       | Farmer                      | 11  | 44.00|
|         | Job/Service                 | 4   | 16.00|
|         | Business                    | 2   | 8.00 |
|         | Other                       | 8   | 32.00|
| Channel of Communication |               |     |     |
| 5       | T.V.                        | 9   | 36.00|
|         | Radio                       | 1   | 4.00 |
|         | Newspaper                   | 3   | 12.00|
|         | T.V. and Newspaper          | 12  | 48.00|
Table 2: Classification of awareness of care givers of terminally ill patients at tertiary care hospital N=25

| Level of Awareness | Score | Level of Care givers | Frequency | Percentage |
|--------------------|-------|----------------------|-----------|------------|
| Poor               | 0-3   |                      | 3         | 12         |
| Average            | 4-7   |                      | 21        | 84         |
| Good               | 8-10  |                      | 1         | 4          |
| Total              |       |                      | 25        | 100        |

The table 2 shows the level of awareness of care givers of terminally ill subjects in selected tertiary hospital. It is noticeable that majority of care givers 21 (84%) had average level of awareness towards the care of terminally ill subjects, whereas 1 (4%) of care givers had good level of awareness and 3 (12%) of care givers had poor level of awareness towards care of terminally ill subjects. Overall there was average awareness in care givers towards care of terminally ill subjects.

The awareness of male care givers was 4.67 ± 1.41 and awareness of female care givers was 5.56 ± 0.96, (t= 1.69, p= 0.12). So, there was no association between gender and awareness. Awareness about taking care of terminally ill subjects is higher in females than males.

The awareness of illiterate and primary educated care givers was 5.83 ± 0.83 and awareness of care givers having secondary education or graduation was 4.69 ± 1.25 (t= 2.70, p= 0.013). So, there was association between educational qualification and awareness. Awareness about taking care of terminally ill subjects is significantly higher in care givers with less education.

Higher education is not providing more awareness. It varies from person to person. The awareness of care givers doing farming or job was 5.13 ± 1.13 and awareness of care givers doing business or other was 5.40 ± 1.35 (t= 0.52, p= 0.61). So, there was no association between occupation and awareness.

Discussion

Some research studies have been conducted in National and International level to assess awareness about taking care of terminally ill subjects in care givers. Results revealed, majority of care givers 21 (84%) had average level of awareness towards the care of terminally ill subjects, whereas 1 (4%) of care givers had good level of awareness and 3 (12%) of care givers had poor level of awareness towards care of terminally ill subjects. Overall there was average awareness in care givers towards care of terminally ill subjects.

Which was contradictory to awareness about palliative care was significantly higher in the health care givers group (74%) compared to the general population which was around only (20%). There was no statistically significant difference among the awareness of palliative care in the subgroups of health care givers. The source of information through which awareness was gained to the health care givers was through cancer hospital (53%) and hospice (33%), whereas through internet (35%), friends and relatives (20%) in the general population. This conflict of results could be due to a greater consciousness of the care of terminally ill patients among the study participants.

A highly significant relation between Nurses qualification, Nurses experience and training of palliative care with total mean of knowledge (0.020, 0.004, 0.015) respectively. It was revealed that no statistical significant relation among total mean of knowledge of palliative care with the hospitals and departments of work. The description of knowledge scores have shown that 20.8 % had good knowledge, about palliative care. Assessing nursing knowledge is important because knowledge plays a significant role in attitude or practice consistency. To the contrary 30.5% of nurses had as good knowledge; However, study found in Thai general physicians more knowledgeable 55.7% than study. The low level of nurses’ knowledge about palliative care could also be associated with the lack of...
specific palliative care units in Palestine. The difference may be due to lack of updating information regarding palliative care, and this might be due to the fact that PC education was not incorporated into either diploma or degree curricula. On the other hand, Palestinian nurses, particularly those works in bedside care are overworked because of the nursing shortage in the nursing staff. Therefore, they have limited time to enhance their knowledge about palliative care.

Conclusion
From the data analysis and findings of the present study, it is concluded that, majority of care givers 21 (84%) had average level of awareness towards the care of terminally ill subjects, whereas 1 (4%) of care givers had good level of awareness and 3 (12%) of care givers had poor level of awareness towards care of terminally ill subjects. Overall there was average awareness in care givers towards care of terminally ill subjects. There was significant association was found between education and awareness of care givers towards care of terminally ill subjects. On-going teaching and health education programs can further improve the awareness of care givers towards care of terminally ill subjects.

References
1. Hopkinson, J.B., Hallett, C.E., and Luker, K.A. Everyday death: how do nurses cope with caring for dying people in hospital? International Journal of Nursing Studies, (2005). 42, 125-133.
2. World Health Organization (WHO): WHO definition of palliative care. 2006. Available from: http://www.who.int/cancer/palliative/definition/en/. Retrieved date: 22 August, 2012.
3. Joseph N, Jayarama S, Kotian S. A comparative study to assess the awareness of palliative care between urban and rural areas of Ernakulam District, Kerala. Indian J Palliat Care 2009;15:122-6.
4. Ross DD, Fraser HC, Kutner JS. Institutionalization of a palliative and end-of-life care educational program in a medical school curriculum. J Palliat Med 2001; 4:512-8.
5. Sanderson C, Tieman J, Care Search-online palliative care information for GPs. Aust Family Physician, 2010, 39, 341-3.
6. Visser, G, Mantelzorg in de palliatief terminale fase. Den Haag: NIZW Zorg/Lemma 2006
7. Skår R. Knowledge use in nursing practice: The importance of practical understanding and personal involvement. Nurse Educ Today 2010; 30:132-6.
8. Armes, P.J., & Addington-Hall J.M., Perspectives on symptom control in patients receiving community palliative care. Palliative Medicine, 2003, 17(7), 608-15
9. Trupti Bhosale, Ruksar Patel, Pavitra Patil, Rohini Yadav, A Study to Assess Effectiveness of Planned Teaching Programme on Knowledge regarding Hand washing among the Staff Nurses in Secondary Care Hospital, Karad , International Journal of Science and Research, September 2018; Vol. 7, Issue 9: 620-623.
10. Yates, P., Aranda, S., Edwards, H., Nash, R., & Skerman, H. (2004). Family caregivers’ experiences and involvement with cancer pain management. Journal of Palliative Care, 2004, 20(4), 287-96.
11. Bhosale TS, Zagade T, Yedage S et.al. A study to assess the knowledge regarding the hazards of tobacco smoking among patients and relatives in selected tertiary hospital Karad. Galore International Journal of Health Sciences & Research. 2018; 3(4): 59-63.
12. Andershed, B., Relatives in end-of-life care. Part 1: a systematic review of the literature the five last years. January 1999-
February 2004. 2006, Journal of Clinical Nursing, 15(9) 1158-69.

13. Osse, B.H., Vernooij-Dasse, M.J., Schade, E., & Grol, R.P. Problems experienced by the informal caregivers of cancer patients and their needs for support. Cancer Nursing, 2006, 29(5), 378-388.

14. Bhosale TS, Shinde M, Patel R, et al. A study to assess the quality of life after mastectomy among women in a tertiary care hospital, Karad. J. Evolution Med. Dent. Sci. 2018;7(49):6073-6077.

15. Gopal KS, Archana PS. Awareness, Knowledge and Attitude about Palliative Care, in General, Population and Health Care Professionals in Tertiary Care Hospital. Int J Sci Stud 2016;3(10):31-35.

16. Mr. Ahmad Ayed Dr. Sumaya Sayej Mrs. Lubna Harazneh Dr. Imad Fashafsheh Mrs. Faeda Eqtait The Nurses’ Knowledge and Attitudes towards the Palliative Care Journal of Education and Practice, 2015, Vol.6, No.4, 91-99.

17. Fabrigar, L., Petty, R., Smith, S., & Crites, S. Understanding knowledge effects on attitude–behavior consistency: The role of relevance, complexity, and amount of knowledge. Journal of Personality and Social Psychology. 2006, 90(4): 556–577.

18. Kassa H., Murugan R., Zewdu F., Hailu M. and Woldeyohannes D. Assessment of knowledge, attitude and practice and associated factors towards palliative care among nurses working in selected hospitals, Addis Ababa, Ethiopia. BMC Palliative Care. 2014, Vol 13 No. 6

19. Budkaew J. and Chumworathayi B. Knowledge and Attitudes toward Palliative Terminal Cancer Care among Thai Generalists. Asian Pac J Cancer Prev, 2013, 14 (10), 6173-6180.