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A study to assess the level of stress and the coping strategies adopted by the male and female oncology patients aged between 30-50 years and are admitted in Bhagwan Mahaveer Cancer Hospital, Jaipur, Rajasthan

Dr. Shakti Singh Soni

Vice-Principal Cum, H.O.D. Mental health (Psychiatric) Nursing, Jaipur, Rajasthan, India

Abstract

Back Ground of The Study: As a worldwide phenomenon, no one is Stress affect people of all ages, cultures, educational and income levels. The studies conducted in developing countries have revealed that during their life time; more than 25% of individuals develop one or more mental or stress disorders. In 2014, about 450 million people were estimated to be suffering from stress.

There have been tremendous advances in our understanding of the causes and treatment of Stress most of these treatments can be provided effectively by a general or community health worker by having good knowledge towards Stress.

Methods: Purposive Sampling technique was used to collect data among 60 adults. The data was collected using the tools: demographic Performa, Stress assessment questionnaire and three point coping Assessment scale. The data was analyzed using descriptive and inferential statistics.

Results: The level of Stress of an adult towards Cancer the data presented that 43% of the people were in moderate stress and majority of people i.e. 48% were in severe stress and only 8% of the people were in mild stress, none of them were discomfort and nil range. In the aspect of coping approximately 95% of the people's coping was adequate where only 5% of the people were having inadequate Coping.

Conclusion: The study suggested that nurses can play a vital role in educating the peoples in relation to Cancer and Stress and its prevention.

Keywords: Stress, coping, urban community, adults

Introduction

This year theme on World cancer day 2020, "I am and I will" focused on low the risk of developing cancer can significantly be reduced through simple measures. Today, a person is confronted with a new diagnosis of cancer often known to someone who has survived cancer. Yet, cancer remains a frightening one for many. Some clients still associate the word with death ^[1]. Psychological stress describes what people feel when they are under mental, physical or emotional pressure. Although it is normal to experience some psychological stress from time to time, people who experience high levels of psychological stress or who experience it repeatedly over a long period of time may develop health problems (mental and/or physical) ^[2]. People feel that they are unable to manage or control changes caused by cancer or normal life activities, they are in distress. Distress has become increasingly recognized as a factor that can reduce the quality of life of cancer patients. There is even some evidence that extreme distress is associated with poorer clinical outcomes. Clinical guidelines are available to help doctors and nurses assess levels of distress and help patients manage it ^[3].

A variety of coping skills are required to adjust to and life successfully with cancer. One's ability to cope affects how one perceives or appraises the situation, how well one relates to others and how one can manage side - effects of treatment, including pain. Weisman (1979) describes

patients who cope effectively are being able to accept a diagnosis, seek more information, talk with others to relieve stress and undertake some positive, constructive action ^[4].

The term coping is used to refers to the process by which a person attempts to manage stressful demands. As a nurse, we have an important role in care of patients with stress and anxiety. Nurse should identify patient's particular stressors and help with coping techniques targeting particular concerns ^[5].

Sampling Criteria

Inclusion Criteria

1. Participants diagnosed with cancer and are receiving treatment.
2. Participants above the age of 30-50 years.
3. Those who are willing to participate in this study.

Exclusion Criteria

1. An adult who are not willing to participate in study.
2. Those that are not diagnosed as cancer patient.

Analysis and Interpretation

Organization of study findings

The study findings are organized in following two sections.

Section I: Description of socio-demographic characteristics

of study participants. Section II: Findings of analysis as per objectives of the study.

Section I: Description of socio-demographic characteristics of study participants.

Table 1: Frequencies and percentage distribution of socio-demographic Variables of study participants (N=60)

S. No.	Socio demographic characteristics	Frequency	Percentage
1	Gender		
	Male	39	65%
	Female	21	35%
2	Age		
	30-35years	06	10%
	36-40years	30	50%
	41-45years	15	25%
	46-50years	09	15%
3	Educational status		
	Secondary	12	20%
	Hr. Secondary	12	20%
	Graduation	24	40%
	Post-graduation	12	20%
4	Occupation		
	Daily Wages	06	10%
	Private Employee	24	40%
	Government Employee	21	35%
	Others	09	15%
5	Monthly Income		
	<5000/-	06	10%
	5001-10,000/-	09	15%
	10,001-15,000/-	27	45%
	>15,000/-	18	30%
6	Marital status		
	Married	36	60%
	Unmarried	18	30%
	Divorced	03	05%
	Widow	03	05%
7.	Type of family		
	Joint	24	40%
	Nuclear	33	55%
	Separate	03	05%

Section II Objective: 1 to assess the level of stress among adults

In this section researcher analyzed the level of stress regarding cancer. An adult who scored between 21 – 25 were considered as having severe stress level, those who scored in between 16-20 were considered as having moderate stress, Those who are in between 11-15 considered as having mild stress and those who scored in between 6-10 were considered as having discomfort, those having less than 5 score considered as having nil stress. Mean, Median and Standard Deviation were calculated.

Table 2: Level of stress of an adults regarding cancer. (n=60)

Stress Level	Respondents	
	Frequency	Percent
Severe Stress (21 - 25)	26	43.33%
Moderate Stress (16 – 20)	29	48.33%
Mild Stress (11– 15)	05	8.34%
Discomfort (06-10)	00	0%
Nil (<05)	00	0%
	Total =60	100%

Maximum Score = 25

The data presented in table no 2 shows that 43% of the people were in moderate stress and majority of people i.e. 48% were in severe stress and only 8% of the people were in mild stress, none of them were discomfort and nil range.

Table 3: Mean, Median and standard deviation of Stress score of an adult's (N=60)

Stress Level	Mean ± SD	Median (Quartile I/II/III)
Stress Score	19.63±3.130	19.00 (18/19/22)

Above table no 3 shows that the mean Stress scores of an adult regarding Cancer was 19.63with the standard deviation of 3.13 with median score of 19.00. it was found that 25%adults having score less than 18,and 25%adults having score more than 22, however mean indicate (19.63)that the most of the adults having Stress around 19.63.

Objective: 2 to assess the various coping strategies of adults.

Table 4: shows the Coping score its frequency and percentage with grading. (N=60)

S. no.	Coping Score percentage	Frequency	Percentage	Grade
1	81 – 100%	20	33.33%	Adequate
	61 – 80%	23	38.33%	Coping
	41 – 60%	14	23.33%	
2.	21 – 40%	03	5.01%	Inadequate
	< 20%	00	00.00%	Coping

The data presented in table no 4 shows that approximately 95% of the people's Coping was adequate where only 5% of the people were having inadequate Coping.

Table 5: Shows the area wise Coping score of adult patients. (N=60)

S. no.	Type of Coping	Frequency	Percentage
1	Positive Coping	14	26.66%
2.	Negative coping	46	76.66%

The data presented in table no 5 shows the approximately 76.66% of the people have negative coping where 26.66% people have positive coping.

Table 6: Mean, Median and standard deviation of Coping Strategies of adult persons towards Cancer. (n=60)

Coping Score	Mean ± SD	Median
Coping Score	68.65±15.601	69.50

The data presented in table no 5 shows the mean median and standard deviation of coping score

Objective: 3 to find out the co-relation between Stress and coping strategies of adult towards Cancer

In order to find out the relationship between stress and coping strategies of the adults Karl Pearson's 'r' value was computed

This section consists of correlation between the stress score with the coping strategies of adults regarding Cancer.

- H1: There will be significant relationship between level of stress and the coping strategies adopted by the male and female oncology patients.

- H2: There will be significant association between level of stress and coping strategies adopted by the male and female oncology patients with selected socio-demographic and variables.

Table 7: Correlation between Stress and Coping score

S.N.	Variables	'r' Value	P value
1.	Stress and coping score of the adults	.878**	0.0001

** Correlation is significant at 5% level of significance

The data presented in table no 6 shows that there is positive correlation (0.878, p=0.001) between the stress and the coping score i.e. as well as the stressed of person increases coping mechanism is also increases. So that research hypothesis is accepted and null hypothesis was rejected.

Objective: 4 Association between knowledge of adults toward stress with selected demographic variables.

Chi-square test was used to find out the association between the stress score and selected socio demographic variables at <0.001 level of significance the demographic variables such as sex (<0.001*), age of participants (<0.001*), educational status (<0.001*), occupation (<0.001*), monthly income (<0.001*), marital status (<0.001*), and type of family (<0.001*) have the significant association with the stress score.

Conclusion

- The research approach adapted to this is a descriptive study design. The data were collected by using self-prepared structure questionnaire. Data was analyzed and interpreted by applying statistical method.
- This chapter deals with the conclusion. The conclusion were drawn on the basis of major findings of the study were as follows.
- An adult had Moderate to severe stress regarding cancer.
- An adult had adequate coping towards stress.
- Overall mean Stress and Coping strategies of an adult towards Cancer was 19.63 and 68.65 respectively.
- Adults had higher Stress score in role of 48.33% and no one had poor Stress towards Cancer.
- Adults had higher Coping score in role of an adult 94.99% (adequate) and 5.01% inadequate Coping towards stress. But negative coping strategies most of the Adult patients are using their everyday life.
- The correlation coefficient (R) = +0.878 obtained between Stress and Coping towards Cancer found to be positive indicating significant relationship between coping strategies and Stress. Hence Hypothesis H1 is accepted.
- There was no significant association observed between stress with demographic variables.

Summary

The analysis has been organized and presented under various headings like sample characteristics, Stress score, mean, mean percentage and coping score. To assess the Level of stress and correlation between stress and coping Karl Pearson's 'r' value was computed and to find the association between the Stress and socio demographic variables such as sex, age, of participants educational status, occupation, monthly income, marital status and type of family chi square test was applied.

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