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Caregiver's strain and quality of life among gynecological cancer survivors

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Abstract
Aim: The aim of the study was to assess the level of Care giver's strain and Quality of life among gynecological cancer survivors.
Methods: A descriptive study design was adopted. The participants of 100 were selected, by convenient sampling technique. The Structured interview schedule was used to collect the data from samples by using Care givers Strain index (CSI) scale and WHO-BREF Scale for Quality of life.
Results: Among 100 samples, 34% of the caregivers are having less level of strain, 66% of them are having a more strain level of score. The overall findings showed that 56 % of the care giver's has poor level of QOL, 44% of them are having a average level of QOL. The overall findings stated that there is a negative, moderate correlation between caregivers strain score and QOL. QOL increases when caregivers strain decreases (p=0.001).
Conclusion: Care givers of gynecological cancer survivors are having more strain score and less quality of life. Adequate intervention need to be given to address the Strain and Quality of life.

Keywords: Care giver, strain, quality of life, cancer survivors

Introduction

Cancer is a major cause of morbidity and mortality in developing and developed countries alike[1]. In many low-income and middle-income countries, including India, most of the population does not have access to a well-organized and well regulated cancer care system. A diagnosis of cancer often leads to catastrophic personal health expenditures[2]. Such expenditures can push entire families below the poverty line and may, especially when combined with an absence of what are seen as acceptable services, threaten social stability.

The changing demographic scenario in India is declining fertility level and increasing life expectancy. As the life expectancy at birth increases proportionately the percentage of geriatric population also rises. Higher incidence of non-communicable diseases, especially cancer is positively associated with percentage of aged population of a country. The World Cancer Report documents that cancer rates are set to increase at an alarming rate globally. Cancer rates could increase by 50% new cases for the year 2020.

Globocan estimates that about 14.1 million new cancer cases were diagnosed worldwide in 2012 of which 8 million occurred in economically developing countries, which contain about 82% of the world's population. 1 million of these new cases and nearly 700 000 of the deaths occurred in India, which is home to about 17% of the global population

New management methods brought about greater chances of survival for cancer survivors and on the other hand, cancer is still a disease with severe impact on the survivors as well as his/her family and close friends. The growing number of persons living with chronic diseases like cancer, and other terminal illness makes a greater dependence on outpatient care, has increased demands away from professional caregivers toward family caregivers. The responsibility of caring for the cancer patient at home is challenge for the patient's spouse, children, relatives or friends.

As oncology care continues to move toward delivery in the outpatient setting, oncology nurses must find ways to effectively educate patients and their care givers about diagnosis, treatment, and symptom management.

Statement of Problem
"A study to assess caregiver's strain and quality of life among gynecological cancer survivors"

Objectives
- To assess the level of caregiver's strain.
- To assess the quality of life of gynecological cancer survivors
- To associate the caregiver's strain with selected demographic variables.
- To associate quality of life with selected demographic variables.
- To find association between caregiver's strain and quality of life of patient.

Research Materials and Methods
Research Approach: Quantitative Research Approach Is used.
Research Design: Descriptive survey research design is used.

Variables
Independent variables: Care givers of Gynecological cancer survivors.

Dependent variables: Care give's Strain and Quality of life.

Null Hypothesis
H_0: There is no significant association between caregiver's stain and quality of life of gynecological cancer survivors.

Assumption
- Caregiver's of gynecological cancer survivors has Strain
- Quality of life of care giver's of gynecological cancer is almost affected in all aspects of dimension.

Setting: Selected Obstetrics & Gynecology Hospital at Chennai.

Population: Care givers of patient suffering from gynecological cancer.

Sample Size: 100 Care givers of Gynecological cancer survivors who are fulfilling the inclusion criteria.

Sampling Technique: Convenient sampling technique was followed.

Inclusion criteria
- Who can understand Tamil and English.
- Who are willing to participate.
- History of treatment more than 6 months.
- Both inpatient and outpatient.
- Women suffering from only gynecological cancer.

Exclusion Criteria
- Women suffering other than gynecological cancer.
- History of cancer less than 6 months.

Data collection techniques
Structured questionnaire consist of Care givers' strain index scale (CSI) and WHO BREF-quality of life Scale were used on Caregiver's of Gynecology Cancer survivors.

Development and Description of the Tool
With an extensive review of literature, discussion professional experts and with investigators, personal experience structured questionnaire was developed to elicit the Care giver's Strain & Quality of Life of Caregiver's of Gynecology Cancer survivors. It consists of 3 sections.

Research Tool
Section 1
Demographic variable: name, Age, education, income, occupation, religion, residence, diagnosis, duration of treatment, types of treatment, stage of diseases.
Caregiver name, age, education, occupation, income.

Section II
- WHO BREF-quality of life Scale was used.

Section III
- Caregiver's strain index. (CSI) was used.

Validity: In the present study the tool had been given to 5 experts for content validity, after doing the corrections the tool has been finalized.

Data Collection Procedure
The necessary Permission was obtained to conduct this study. A convenient sampling technique was employed to select the hundred samples from Oncology outpatient clinic of selected Obstetrics & Gynecology Hospital in Chennai. Informed consent was obtained from the participants. The structured interview method was used to collect data from the participants of 10-15 minutes without having any possible interaction with other participants. QOL of caregivers was assessed by using WHOQOL-BREF. Care Giver's strain was assessed by using Care Giver strain index scale (CSI). A pilot was conducted to assess the reliability and validity of the tools.

Data Analysis
The data was analyzed using interferential and descriptive statistics.

Results and findings
The major findings of the study based on the objectives were as follows.
1. The first objective was to assess the level of caregiver's strain.
The overall findings revealed that 34% of the caregivers are having less level of strain, 66% of them are having a more strain level of score. None of them has no strain.
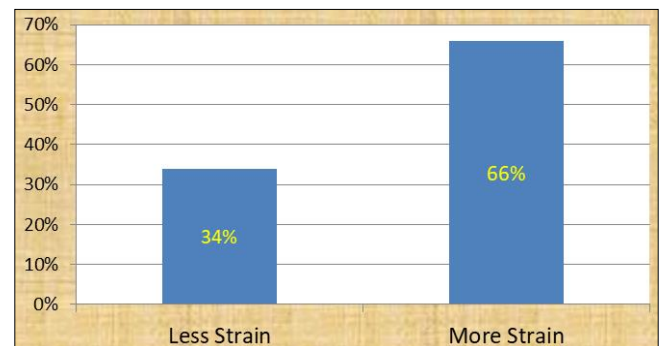

Fig 1: Bar diagram about the level of Care Giver's Strain

2. The Second objective was to assess the quality of life of care giver's of gynecological cancer survivors

The overall findings showed that 56 % of the care giver's has poor level of QOL, 44% of them are having a average level of QOL and none of them are having good level of QOL
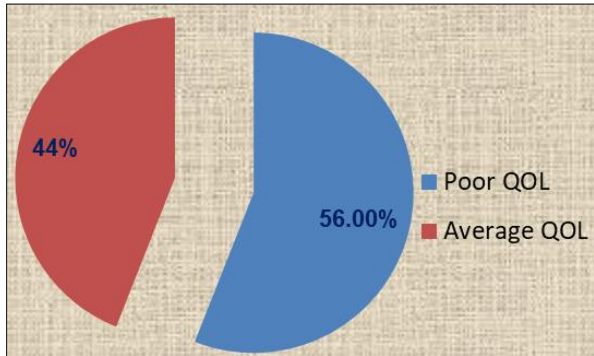

Fig 2: Pie diagram about the level of Care Giver's Quality of Life

3. The Third objective was to associate the Care giver's Strain with selected demographic variables.

The overall findings showed that the association between level CSI and Care Givers demographic variables. Elders, less education and less income patient's caregivers are having more strain score than others. Statistical significance was calculated using chi square test and statistical significant (P<0.001).

4. The forth objective was to assess the quality of life with selected demographic variables

The overall findings show the association between level QoL and Care giver's demographic variables. Elders, female caregiver's patients are having more QOL score than others. Statistical significance was calculated using chi square test and it was statistically significant (p< 0.01).

5. The fifth objective was to find the association between care giver's strain and Quality of Life(QoL)

Table 1: Correlation between caregivers strain score and Patients QOL score

	Mean	Standard deviation	r-value	Interpretation
Caregivers stain	62.78	6.66	r=-0.42 p=0.001***	There is a negative, moderate correlation between caregivers strain score and QOL of patients. QOL increases when caregivers strain decreases.
QOL score	7.54	1.96		

The overall findings stated that there is a negative, moderate correlation between caregivers strain score and QOL. QOL increases when caregivers strain decreases and it is statistically significant (p=0.001).
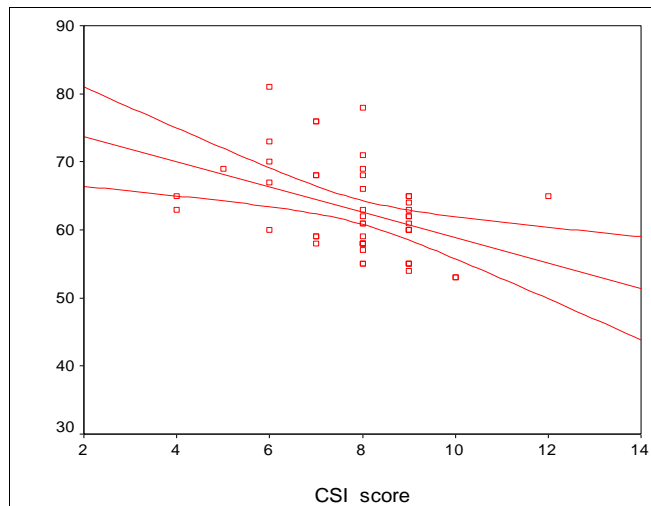

Fig 3: Scatter-plot with regression estimate shows the negative, moderate correlation between caregivers strain score and QOL score(r=-0.42 p=0.001)

Implications
The implication of findings has been discussed in relation to nursing practice, nursing education, nursing administration and nursing research.

Nursing Practice
The results of the study will help the nurse to enlighten on importance of Caregiver's health. The nurse can develop a structured teaching programme aimed at prevention of

Strain. Health education will reduce their staring and thereby Quality life will be improved.

Nursing Administration
Nursing administration can formulate policies which will include all nursing staff to be actively involved in assessment of Gynecology Cancer survivor's Care giver's. Especially through information, education, and communication. They should involve designing and distributing health education material like pamphlets and other audio visual aids on reduction of strain.

Nursing Education
During the course of study, student nurses will able to understand the risk factors for gynecological cancer patients, it helps to understand importance of prevention of cervical cancer is the commonest cancer among reproductive age group women.

In the present trends health care delivery system, emphasis as to be shifted from cure oriented services to preventive services. This can be only achieved by integrating and updating newer trends in nursing education. A variety of pamphlets can be developed and used to make teaching more effective.

This study can be used as an access to further studies. One of the aims of nursing research is to expand and the scope of nursing and providing evidence based practice in health setting. It can be used for the future as review of literature and this study can be replicated in several areas.

Recommendation
Different teaching strategies can be used to conduct similar study.
- The study finding could be disseminated to the authorities in this study setting and introduce as a

component of prevention of oral cancer.
- A similar study can be conducted on a large scale for better generalization.
- A similar study can be carried out in the difference setting.

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