Cancer Patients and Family Caregivers as a Unit of Care

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Background
• Cancer causes great disruption to both patients and caregivers
• Underprepared or distressed caregivers may compromise their care and support of the oncology patients
• Both patient and caregivers need health education and support in order to help them cope with the ordeals associated with cancer diagnosis and treatment.

Problem
• Insufficient clinical time allocated to meet oncology patients’ needs
• Dyadic intervention (treating dyads as a unit of care) is effective, but its implementation in the local clinical settings is limited.

Methods
• This Evidence-Based Practice Interventional Project (EBPIP) targeted 29 adult cancer patients and their family caregivers.
• Each dyad received a total of three bi-weekly tailored education sessions: two 90-minutes face-to-face home visits and one 30-minutes phone call in between the visits.
• Data collected at baseline and after intervention includes four measures: Brief COPE; the General Functional Assessment of Cancer Therapy (FACT-G version 4); the Caregiver Quality of Life Index-Cancer (CQOLC); and the Lewis’ Cancer Self-efficacy Scale (CASE) patient version and caregiver version.

Results
The EBPIP had statistically significant and positive impact on outcomes such as less likely using substance to cope in patients (t=2.289, p<.03), increased self-efficacy in both patients (t=2.810, p<.009) and caregivers (t=3.468, p<.002), and improved QOL in caregivers (t=1.999, p<.006).

PICOT
In cancer patients and their family caregivers (P), what are outcomes of the FOCUS program on dyads as a unit of care (I) compared with dyad baseline (C) for quality of life, self-efficacy, and coping with cancer (O) after the brief intervention sessions in six weeks (T)?

Goals of the Project
• To translate an evidence-based psychoeducational nurse-guided intervention (Northouse’s FOCUS program) into a clinical practice at Toledo, OH
• To examine the effects of Northouse’s FOCUS program in Toledo area by assessing the cancer patients and their caregivers’ changes in self-efficacy, coping, and quality of life.

Concept Map

Study Results in Cancer Patients

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<th>Study Results in Family Caregivers</th>
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<td>Demographic Data</td>
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Conclusion
• The three brief dyadic intervention is feasible and efficacious in terms of improving both cancer patients’ and caregivers’ self-efficacy, patients’ coping, and caregivers’ QOL
• The results will enhance our understanding about how to translate an effective research project in a much-needed community to improve the quality of oncology care locally.
• The small sample size affects generalizability of outcomes to the larger population of cancer patients and caregivers. Replication of the EBPIP with a much larger cohort of participants is recommended, including ample diversity of types of cancer and ages of patients and caregivers.