

BMF CP68: Predicting the Needs of Emotional Support among Family Caregivers of Cancer Patients by Analyzing the Demanded Healthcare Information

Ni Putu Wulan Purnama Sari

Faculty of Nursing, Widya Mandala Surabaya Catholic University, East Java, Indonesia

"Constant kindness can accomplish much."

- In: "The Teaching of Reverence for Life"; Karma, Kindness, Compassion [1]

Introduction

Cancer management at home requires a high involvement of family members. Caregiving activities are described as burdensome and overwhelming by family caregivers (FCG) due to frequently unmet needs, casting a shadow over the caregiving experience [2]. Healthcare professionals (HCP) are responsible for providing supportive care for FCG of cancer patients. The supportive care needs of partners and caregivers of cancer patients are categorized into four domains, namely: 1) emotional and relational needs, 2) practical needs, 3) work and social needs, and 4) healthcare and illness-related needs [3].

Among all aspects, the unmet needs of healthcare information from the healthcare and illness-related domains have the potency to predict the unmet needs of emotional support from the emotional and relational domains in this population. The current study aims to examine the predictors of the needs for emotional support among FCGs of cancer patients

by analyzing the demanded healthcare information, i.e., cancer-specific information, caregiver-specific information, therapy-specific information, information on cancer physical needs, information on alternative therapies, and information on support services.

The Ethical Committee of the Faculty of Medicine, Widya Mandala Surabaya Catholic University, East Java, Indonesia, has reviewed this study protocol with an ethical clearance registered certificate of 080/WM12/KEPK/DOSEN/T/2020. The data collection procedure implemented ethical aspects of human subject protection, risk management, anonymity, confidentiality, beneficence, justice, and fidelity. Informed consent was given to all respondents before study participation.

Materials and method

The mindsponge theory was used in conceptual development and interpretation [4]. Bayesian Mindsponge Framework (BMF) analytics was used for statistical analysis on a dataset of 48 spouses (husbands) and 12 other family members (n = 60) in five congested communities of Surabaya, Indonesia [5]. The nursing team at Widya Mandala Surabaya Catholic University, East Java, Indonesia, collected and processed the dataset. The bayesvl R package, aided by the Markov chain Monte Carlo (MCMC) algorithm, was employed for statistical analyses [6]. For more information on BMF analytics, portal users can refer to the following documents [7,8].

Findings

Among the six types of healthcare information, the demanded cancer-specific information and information on cancer physical needs positively predict the need for emotional support among FCGs of cancer patients. Meanwhile, FCGs with a higher demand for information on alternative therapies and support services are less likely to need emotional support. Other types of information have ambiguous effects on the need for emotional support (see Figure 1).

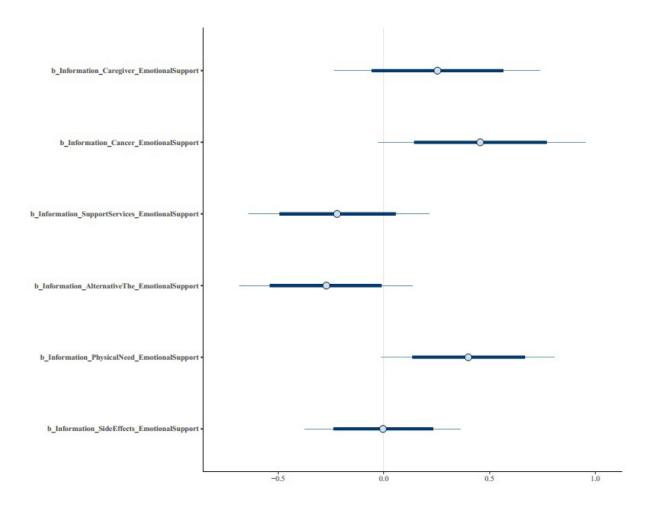


Figure 1. Coefficients' posterior distributions

Collaboration procedure

Portal users should follow these steps for registering to participate in this research project:

- 1. Create an account on the website (preferably using an institution email).
- 2. Comment on your name, affiliation, and desired role in the project below this post.
- 3. Patiently wait for the formal agreement on the project from the AISDL mentor.

If you have further inquiries, please contact us at aisdl_team@mindsponge.info

If you have been invited to join the project by an AISDL member, you are still encouraged to follow the above formal steps.

All the resources for conducting and writing the research manuscript will be distributed

upon project participation.

Project coordinator: Ni Putu Wulan Purnama Sari.

AISDL mentor for this project: Minh-Hoang Nguyen.

The research project strictly adheres to scientific integrity standards, including authorship rights and obligations, without incurring an economic burden at participants' expenses.

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