Primary caregiver's knowledge and attitude on the care of Cardio Vascular Accident (CVA) patients

Vishnu Sharma Mr
HCN, SRHU, Dehradun, India

Rajesh K. Sharma
HCN, SRHU, Dehradun, India, rajeshsharma.hcn@gmail.com

Dipti Y. Sorte
HCN, SRHU, Dehradun, India

Sanchita Pugazhendi Dr
Faculty of Nursing, SRHU, Dehradun, India

Follow this and additional works at: https://impressions.manipal.edu/mjnhs

Part of the Nursing Commons

Primary caregiver's knowledge and attitude on the care of Cardio Vascular Accident (CVA) patients

Cover Page Footnote

Primary caregiver's knowledge and attitude on the care of Cardio Vascular Accident (CVA) patients

Vishnu Sharma, Rajesh K. Sharma*, Dipti Y Sorte, Sanchita Pugazhendi

Email: rajeshsharma.hcn@gmail.com

Abstract

Introduction: In the world, the primary neurological problem is Cardio Vascular Accident (CVA) and 3rd prominent reason of death worldwide. CVA is a significant primary cause of early mortality and disability in India. When a patient is discharged from the hospital, he/she returns home with physical, mental and behavioral consequences that affect the patient's functional capacity, autonomy, and independence that makes them dependent on others. The primary caregiver is the member who takes the responsibility of care, and play a vital role in the care of CVA patients. **Objectives:** The objectives of the present study were to assess the knowledge and attitude regarding the care of CVA patient among primary caregivers. **Methodology:** Descriptive research design was used. A total of 100 caregivers were selected by purposive sampling technique. Data were collected with a self-structured knowledge questionnaire, Likert scale, and WHOQOL-BREF. **Result:** Result showed that the knowledge level was adequate among 52 per cent of the primary caregivers of CVA patient, whereas the attitude level was moderate among 100 per cent of all primary caregivers of CVA patient. There was a negative correlation between the knowledge score and attitude score of primary caregivers of CVA patient, and there was no association between knowledge score and attitude score with their selected demographic variables. **Conclusion:** The study concluded that if health care professionals collaborate and identify the need of primary caregivers, it will help to increase the knowledge and improve attitude towards the patient.

Keywords: Primary caregivers, CVA patients, knowledge, attitude.

Introduction

Globally, CVA is the second leading cause of death and 3rd leading cause of disability. (World Health Organization, 2016). CVA is a significant primary cause of early mortality and disability in India, due to socio-demographic changes and an increase in the prevalence of risk factor. Mostly poor people are affected by the CVA, due to exposure to risk factors and being unable to pay for CVA care. Patients with CVA have to live with disabilities and the cost of medication and maintenance are added to the the families' expenses (Bonita & Beaglehole, 2007).

By 2030, an increase of 23 million CVA new cases and 7.8 million deaths related to CVA can be expected (World Health Organization, 2016). When a patient is discharged from the hospital, the patient often returns home with physical, mental and behavioral consequences that affect the patient's functional capacity, autonomy, and independence that makes the patient dependent on others. Primary caregivers are the members who take the responsibility of care of patients throughout the illness (Pereira et al., 2014).

Methods

A quantitative approach with the descriptive design was adopted to assess the knowledge and attitude regarding the care of CVA patients among primary caregivers.

The study was conducted at Himalayan Hospital, Dehradun, where primary caregivers of CVA patient were accompanied. The study was approved by the Research and Ethics committee of Himalayan Hospital.

Vishnu Sharma[1], Rajesh K. Sharma[2], Dipti Y Sorte[2], Sanchita Pugazhendi[3]
1 Post Graduate Nursing Student, HCN, SRHU, Dehradun, India
2 Associate Professor, HCN, SRHU, Dehradun, India
3 Dean, Faculty of Nursing, SRHU, Dehradun, India

*Corresponding Author

One hundred (100) primary caregivers of CVA patient with 3rd to 5th-degree disability as measured by the Modified Ranking Scale, were selected by non-probability purposive sampling technique. The study tools: Structured Knowledge Questionnaire (SKQ) and Likert scale were given to eight experts from various disciplines of nursing and medicine for establishing content validity. Reliability of SKQ was calculated by the split-half method (r=0.91), indicating high reliability of the tool. Reliability of attitude questionnaire was calculated by the test-retest method (r=0.94), and it was found highly reliable.

After obtaining written informed consent on day one of the study, Modified Ranking Scale was used to measure the degree of disability of the patient. After that, data related to demographic, attitude and knowledge regarding care of CVA patient were collected from selected patient's caregivers.

Results

Demographic Characteristics of primary caregivers of CVA patients

The demographic characteristics of the participants are presented in Table 1

Table 1:
Frequency and Percentage Distribution of Primary Caregivers According to their Selected Demographic Variables.

(N=100)

Variables	Frequency (f)	Percentage (%)
Age (in years)		
<35	24	24
36 – 45	49	**49**
>45	27	27
Gender		
Male	44	44
Female	56	**56**
Marital status		
Married	96	**96**
Unmarried	4	4
Relationship with patient		
Parent	7	7
Children	34	34
Spouse	59	**59**
Education		
Primary education	63	**63**
High school	23	23
Graduation	14	14

Variables	Frequency (f)	Percentage (%)
Occupation		
Pensionnaire	16	16
Shopkeeper	9	9
Teacher	9	9
Student	5	5
Labour	9	9
Unemployed	16	16
Housewife	36	**36**
Place of living		
Rural	58	**58**
Urban	42	42
Family income per month in rupees		
< 10,000	35	35
>10,000	65	**65**
Mode of payment		
B H E L / E C H S / E S I / Ayushman Yojana	79	**79**
Self	21	21
Financial problem faced by primary caregivers		**62**
Yes	62	38
No	38	
Duration of care		
<5 week	62	**62**
>5 week	38	38
Caregiving time	47	**47**
Both day and nighttime	25	25
Day time	28	28
Nighttime		
Any health issue of primary caregivers?	52	**52**
Yes	48	48
No		
Health issue (n = 52)		
Diabetes Mellitus	27	**51.9**
Hypertension	21	40.4
Old Tuberculosis	2	3.8
Hyperthyroidism	2	3.8

Table 1 Illustrate that maximum 49% primary caregivers were in the age group of 35 – 44 years, Majority of participants 56% were female. Majority of participants (96%) were married. Approximately half (47%) of primary caregivers were housewives, and about one third (33%) of primary caregivers had education up to high school. Most of the primary caregivers (36%) were housewives. Approximately half (58%) of the caregivers are from rural area. The Majority (44%) of the primary caregiver's income per month was more than 15,001. Approximately 79% of primary caregiver's mode of payment of the expenses were through by the health schemes (BHEL/ECHS/

ESI/ Ayushman yojana). Maximum (62%) of primary caregivers faced the financial problem. Half, (62%) of primary caregivers had 2 to 4 weeks of caregiving duration. The Majority (47%) of primary caregiver's caregiving time was day and night. Majority (52%) of primary caregivers had health issues.
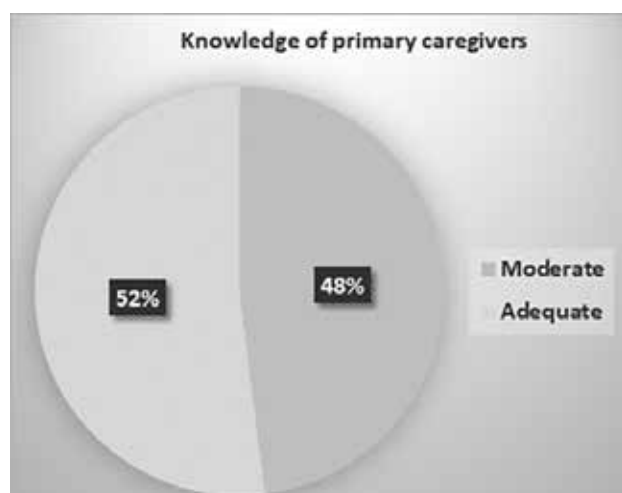

Figure 1: Percentage distribution of the level of knowledge among primary caregivers of CVA patients.

Figure 1 shows, the knowledge level was adequate among nearly half (52%) of the primary caregivers of CVA patient, and rest (48%) of the primary caregivers of CVA patient were having a moderate level of knowledge.

Attitude level of primary caregivers
The result showed that all (100%) of the primary caregivers had moderate attitude.

Table 2:
Correlation Between Knowledge and Attitude of Primary Caregivers of CVA Patients.

N= 100

	Mean	SD	r – value	p-value
Knowledge	14.64	1.925	-.207	.039
Attitude	58.84	3.167		

Table 2 reveals a negative correlation between the knowledge and attitude of primary caregivers of CVA patients which implies that as knowledge of primary caregivers increases the attitude level of primary caregiver's decreases.

Association between knowledge regarding the care and socio-demographic variables

The study revealed that there is no association found between knowledge regarding care with selected demographics variables.

Association between attitudes regarding care, with socio-demographic variables

The study revealed that there is no association found between attitudes regarding care with demographics variables.

Discussion

The findings of the study revealed that knowledge level was adequate among (52%) of the primary caregivers of CVA patient, and rest of half (48%) of the primary caregivers of CVA patient were having moderate level of knowledge. The findings of the study were supported by the study that result showed that majority (41.6%) caregivers had average knowledge, nearly one third (38.3%) had good knowledge and few (20%) were having poor knowledge score of caregivers regarding home care management of stroke patient (Bhavya & Vidya, 2017).

The present study findings showed that there was no statistically significant association between knowledge score with their selected demographical variables. This finding is supported by a study which concluded that there was no significant association found between the findings with selected demographic variables (Pandit et al., 2017).

The result showed that there was no statistically significant association between attitude and selected demographic variables. These findings are contradicted by a study reported a significant association between attitude and selected demographic variables like type of family and experience (Bhavya & Vidya, 2017**)**. Further research can be done on a broader range of primary caregiver's interventions such as counselling to raise the attitude level towards CVA patient.

Conclusion

The study concluded that if health care professionals collaborate and identify the need of primary caregivers, it will help to increase the knowledge and improve attitude towards patients among their caregivers in home and hospital.

Acknowledgement

References

Bhavya, S V, Vidya, M (2017). Knowledge and Attitude of Care Givers regarding Home Care Management of Stroke patients. International Journal of Nursing Education and Research, 5(3), 342-43.

Bonita, R., & Beaglehole, R. (2007). Stroke prevention in poor countries: time for action. Stroke, 38(11), 2871–2872. https://doi.org/10.1161/STROKEAHA.107.504589

Pandit, R B, Mathews M, & Sangle, S (2017). Caring for Stroke patient; caregivers' knowledge and practices. International Journal of Recent Scientific Research, 8(6), 17563-66. DOI: http://dx.doi.org/10.24327/ijrsr.2017.0806.0380.

Pereira, R A, Santos, E B, Fhon, Marques, S, & Rodrigues (2014). Burden on caregivers of elderly victims of cerebrovascular accident. Rev Esc Enferm USP, 47(1):185-92. http://dx.doi.org/10.1590/S0080-62342013000100023

Strong, K., Mathers, C., & Bonita, R. (2007). Preventing stroke: saving lives around the world. The Lancet. Neurology, 6(2), 182–187. https://doi.org/10.1016/S1474-4422(07)70031-5

World Health Organization (2016). Global Health Estimate, Geneva. Retrieved from https://www.who.int/healthinfo/global_burden_disease/en/