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ABSTRACT

Cancer is experienced not only by the patient, but also by their loved ones. Caregivers have the very important role in the care of terminally ill cancer patients. This study aimed to understand the concept and meaning of hope and the spiritual wellbeing of Filipino caregivers of terminally ill cancer patients. This study aimed to understand the concept and meaning of hope and the spiritual wellbeing of Filipino caregivers with factors based on patient and caregiver characteristics. It also explored the personal experience and thoughts of Filipino caregivers on hope and spiritual wellbeing in caring for terminally ill cancer patients. The study utilized descriptive correlation design. One caregiver per patient was surveyed through purposive sampling (n=50). Patient characteristics were mean age of 51 years old, mostly female diagnosed with breast cancer and receiving chemotherapy, suffering from symptoms such as pain, lack of appetite, fatigue and bowel problems. Caregiver characteristics were: mean age of 44 years old, mostly females, married, and Roman Catholic, half were high school graduates, approximately 25% were spoused of patients, with average caregiving duration of 21.4 months, an average of 18.36 hours of caregiving in a day, self-efficacy score of 3.29 and social support at 1.72. Hope score of Filipino caregivers was moderately high at 3.24 out of 4.0 with highest scores in the following responses: (1) life has value and worth; (2) that faith gives comfort; (3) have positive outlook toward life; and (4) able to give and receive caring/love. On spiritual wellbeing, the mean score is 3.24, with highest scores in the following: (1) have reason for living; (2) life (does not) lack meaning and purpose; (3) patient's illness strengthened their faith or spiritual beliefs; (4) find strength in my faith or spiritual beliefs; and (5) life has been productive. Patient's age was moderately correlated with caregiver's hope ($r=0.30$) and was shown to be significant ($p=0.03$). Caregiver's educational attainment was significantly associated with both hope ($p<0.01$) and spiritual wellbeing ($p<0.01$). Caregiver's self-efficacy was moderately correlated with spiritual wellbeing ($r=0.46$) and statistically significant ($p<0.01$). caregivers' most frequent response on their hope was for their patients to get well and recover from their illness; to have strong spiritual faith and be healed with God's help; to be hopeful and positive; hope for longer life; resumption of family relations and free of pain and other discomforts. Caregivers thoughts on how to manage if their hopes do not happen were: (1) keeping faith, (2) enduring suffering and praying, (3) continuing the journey, (4) being uncertain, scared and having difficulty, and (5) being positive. Caregivers' thoughts on spiritual wellbeing were to have: (1) stronger faith, (2) being prayerful, and (3) being positive. Caregivers experience spiritual wellbeing by boosting self-esteem, easing worried, giving hope, giving knowledge and wisdom, and providing happiness for the patient. Regarding their spiritual practices, they pray often, sing songs of praise, attend Holy Mass and Novena, and ask God to ease suffering and to prolong life. Spiritual wellbeing is finding meaning, purpose and value in

life, often relating to God. Maintaining an optimistic perspective remains the most common spiritual interest for both the family caregivers and terminally ill patients. Having hope and faith that their patient gets well and generally keeping a positive outlook is an important matter for both caregivers and the patient.