

Research Paper

The Effectiveness of Self-Management Program Based on 5A Model on Patient Care Burden for Stroke Patients

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Abstract

Introduction: Chronic diseases around the world are rapidly increasing. One of these chronic diseases is stroke. Given the multiplicity of problems in this disease, it needs to be managed and provided with appropriate education and support services to the patient and family to achieve self-management ability to maximize functions, feel good, reduce care burden, and improve the quality of life. The purpose of this study was to investigate the effect of a self-management program based on the 5A Model on caregiver burden of family caregivers of stroke patients.

Methods: This quasi-experimental study was performed on 64 family caregivers of patients with stroke in Kashan Shahid Beheshti Hospital. Sampling was done by convenience sampling based on inclusion criteria. Data collection tools included demographic characteristics of the patient questionnaire and the primary caregiver and The Zarit Burden questionnaire. The data were analyzed using descriptive and inferential statistics and SPSS-19 software.

Results: Findings showed that the mean age of patients was 69.28 ± 15.57 , and the mean age of caregivers was 44.10 ± 10.80 . Most of the patients' primary caregivers (62.5%) were their children. There was no statistically significant difference in the mean of caregiver burden between the intervention and control groups in the pre-test ($P = 0.109$). In contrast, the caregiving burden was significantly decreased in the intervention group and increased in the control group in the post-test ($P = 0.001$).

Conclusions: Implementation of a self-management program based on the 5A Model helps reduce the caregiver burden for family caregivers of patients with stroke and can be used as one of the effective methods for empowering them.

Extended Abstract

OBJECTIVE

It is well known that interactions, functions, and shared family tasks change in response to the presence of stroke patients in the family. What makes it more complicated is that caregivers want to

adapt to their lives at the same time by meeting the needs of stroke patients with sudden occupational, social, and emotional changes (5). In Iran, for reasons such as high cost of patient care in private centers and

the costs of home nurse use, the shortage of government rehabilitation centers and the lack of follow-up after discharge, most families of patients with stroke are responsible for the primary role of patient care (4). Since stroke is an unexpected event, family members usually take on the part of patient-caregiver suddenly and without preparation, and it appears that caregivers and patients need to manage and receive appropriate education and support services. Self-management is one of the most important methods to reduce the costs of treatment and care of patients, especially those with chronic diseases, and health policymakers focus on spreading and promotion of self-management skills (6). This study aimed to investigate the effect of a self-management program based on the SA Model on the care burden of family caregivers of stroke patients.

MATERIALS AND METHODS

This quasi-experimental study was conducted on 64 family caregivers of patients with stroke in Shahid Beheshti Hospital in Kashan, Iran. Subjects were randomly divided into two groups of 32 members. Data collection tools were the patients' and primary caregiver demographic characteristics form and the Zarit Burden Interview. The questionnaire consists of 22 questions about psychological pressures, which are imposed on the caring person in the patient's care (16). The intervention group received an academic and practical program based on the SA self-management program (8) on care for patients with stroke, and the family caregiver performed this education for six weeks at home. The way to play and adherence were followed up by the researcher via the Internet and phone calls. The questionnaires were filled in again six weeks after the intervention. The collected data were analyzed using descriptive and inferential statistics and SPSS-19 software. The significance level was $P < 0.05$.

Table 1. Compare the Average Score of the Total Care Burden

Research Stage	Before*	After*	P Value (T Couple)
Intervention	49.84 ± 22.15	22.07 ± 8.35	0 < 0.001
Control	58.68 ± 21.35	68.80 ± 9.85	0.022
P value (independent t)	0.109	0 < 0.001	

*Data are presented as Mean ± SD.

Ethical Considerations

In this study, ethical points according to the ethical protocols of Helsinki studies, were done and received moral code from Social Welfare and Rehabilitation Sciences with several IR. USWR. REC. 1398.013. Also, the research consent form was signed by all subjects.

Funding or Supports

This research has not sponsored and is done at personal expense.

Author's Contribution

All authors contributed equally to the writing of this

RESULTS

Findings showed that the mean age of patients was 69.28 ± 15.57 , and the mean age of caregivers was 44.10 ± 10.80 . In this study, 54.7% of patients were female, and 67.2% of them had an ischemic stroke. Most of the patients' primary caregivers (62.5%) were their children, and 71.9% of caregivers were female. There was no statistically significant difference in the mean of care burden between the intervention group and the control group in the pre-test (P -value = 0.109). In contrast, the care burden significantly decreased in the intervention group and increased in the control group in the post-test (P -value = 0.001).

CONCLUSION

Implementation of a self-management program based on Model SA helps reduce the care burden for family caregivers of patients with stroke, and it can be a guide for nursing education managers and officials as one of the effective methods for empowering patients with stroke and their caregivers. It appears that although nursing plays an essential role in providing healthcare, integrated and multilateral coordination between treatment specialists is necessary to provide education tailored to the culture, beliefs and religious beliefs of Iranian families to the public to reduce problems and speed up the recovery process of patients with chronic diseases, especially stroke. Nursing managers also have more comprehensive visibility in the field of stroke and its associated problems, in the context of their authority, the conditions for education to the family of patients with stroke in the hospital along with the treatment of these patients to provide the satisfaction of patients and their families and reduce the hospitalization time and the quality of care.

article.

Conflict of Interest

In this article, there was no reported any conflict of interest.

Applicable Remarks

Implementation of a five-model based self-management program in reducing the burden of family caregivers of patients with stroke is valid and can be a guide for managers and nursing education officers and duplicated as one of the effective methods for empowering patients with stroke and their caregivers.

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the University of Social Welfare and Rehabilitation sciences, patients, and family of patients with stroke in Kashan Shahid Beheshti Hospital, and we have all the teachers and caregiver who have been assisting in this study.