

# Informal Caregiver Training on Home Care and Cancer Symptom Management Prior to Hospital Discharge: A Feasibility Study

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**Purpose/Objectives:** To determine the feasibility of individualized caregiver training for home care and symptom management conducted at the bedside of older patients with cancer prior to hospital discharge.

**Design:** Pilot study.

**Setting:** The Extended Care Rehabilitation Center at the Durham Veterans Affairs Medical Center in North Carolina.

**Sample:** 7 female informal caregivers with a mean age of 56 (range = 26–76). More than half were African American. Most commonly, caregivers were spouses of the patients with cancer.

**Methods:** Individualized and experiential training on home care and cancer symptom management was conducted at the bedside of patients before hospital discharge. Caregiver demographic data were collected. An informal interview at the end of the training asked about the usefulness of the training in preparing for home caregiving.

**Main Research Variables:** Feasibility of the training.

**Findings:** Individualized bedside training to caregivers prior to hospital discharge is feasible. All caregivers noted the relevance of the content as well as the approach to the training.

**Conclusions:** When given an opportunity for training on symptom management and home care, informal caregivers were very interested in participating. The individualized approach gave caregivers an opportunity to have their particular needs met. The flexibility of when to conduct the training proved to be crucial when soliciting attendance. The biggest challenge was in recruiting caregiver subjects through patients with cancer.

**Implications for Nursing:** The impetus now is to look at the effects of the training on caregiver-patient variables as well as the cost-effectiveness and sustainability of such an approach to caregiver training.

## Key Points . . .

- ▶ When given an opportunity for training on cancer symptom management prior to hospital discharge, informal caregivers were very interested in participating.
- ▶ Individualized bedside training with an opportunity to practice skills increased confidence among informal caregivers that they would be able to help their loved ones manage their symptoms at home.
- ▶ The flexibility of when to conduct the training proved to be crucial when soliciting participation from informal caregivers.

being (Bandura, 1997), and, in general, informal caregivers' psychological states already are vulnerable as a consequence of caregiving (Schulz & Beach, 1999; Schulz, Visintainer, & Williamson, 1990). Because of the reciprocal and intricate relationship in caregiver and patient dyads, when caregivers' psychological health deteriorates, it may have a negative impact on their ability to provide care, thus adversely affecting patients' conditions as well (Hodges, Humphris, & Macfarlane, 2005).

The period immediately after hospitalization has been found to be one of the most trying times in cancer symptom management (Giarelli, McCorkle, & Monturo, 2003; Laizner, Yost, Barg, & McCorkle, 1993; Weitzner, Jacobsen, Wagner, Friedland, & Cox, 1999). In addition, the use of emergency services is common among patients with cancer during the first two weeks after hospital discharge (Kurtin et al., 1990). One possible reason is that, in the current healthcare system, many patients with cancer still are acutely ill at the point of discharge

By 2030, the number of older people with cancer in the United States is expected to double (Edwards et al., 2002). With shorter hospital stays and cancer treatments in ambulatory settings, a concomitant increase will occur in the number of community-dwelling, informal caregivers for patients (Andrews, 2001; Aranda & Hayman-White, 2001; Pasacreta & McCorkle, 2000). Symptom management has been identified as an essential component of effective home caregiving for older adults with cancer (Steinhauser et al., 2000). However, most informal caregivers do not feel confident that they possess the knowledge and skills to care for their loved ones while managing their symptoms at home (Aranda & Hayman-White; Schumacher et al., 2002; Steele & Fitch, 1996; Sutton, Clipp, & Winer, 2000). Low levels of confidence may negatively affect people's psychological well-

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