

Information Needs and Coping Styles of Primary Family Caregivers of Women Following Breast Cancer Surgery

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Purpose/Objectives: To determine the information needs and unmet needs of primary family caregivers of women with breast cancer, their informational coping styles, and the relationships among needs, coping styles, and caregiver and patient variables in the first three weeks after surgery.

Design: Descriptive, correlational survey.

Setting: Three surgical inpatient units at one private and two public hospitals in Perth, Western Australia.

Sample: 141 primary family caregivers of women having surgery for breast cancer.

Methods: Modified Family Inventory of Needs–Husbands and the Miller Behavioral Style Scale administered within one week after surgery and repeated one to two weeks later, after the postoperative visit with the surgeon.

Main Research Variables: Information needs, unmet needs, informational coping styles.

Findings: All 30 needs were rated as important by the majority of participants. A reduction in the median percentage of unmet needs occurred between time 1 (22%) and time 2 (10%) ($p = 0.00004$). Caregivers with children younger than 20 had a greater number of needs than the remaining sample ($p = 0.001$). Caregivers who received information from the breast nurse counselor and medical staff had the lowest percentage of unmet needs compared with those reporting any other source of information ($p = 0.007$). Caregivers of private patients had more unmet needs compared with public patients' caregivers ($p = 0.035$). Most caregivers displayed a high monitoring coping style, but further analysis of composite monitoring and blunting profiles revealed that 11%–16% were low monitors as well as low blunters and another 22%–26% displayed an apparently conflicting style of both high monitoring and high blunting.

Conclusions: Western Australian caregivers have a similar range and priority of needs as those previously reported internationally. Caregivers in the private system, where breast centers are not established, are at risk for not having their needs met. Further studies are needed to determine how informational coping styles may affect family caregivers' need for and response to education given by nurses.

Implications for Nursing: Breast nurse counselors and other nursing staff play an important role in caregiver support. Caregivers with young children need additional support. Caregivers' coping styles indicate the need for high levels of information, which, paradoxically, may lead to increased distress. Therefore, nurses should consider assessing caregivers' informational coping styles to balance the amount of information given with appropriate strategies for assisting caregivers to cope with stressful information.

Key Points . . .

- The Family Inventory of Needs–Primary Caregivers may be helpful to nurses as a means of discussing information needs with caregivers or assisting in prioritizing needs.
- Nurses should be alert to the possibility that caregivers may overlook their own needs in their concern for loved ones.
- Nurses should assess caregivers' informational coping styles to ensure that the amount of information given is matched to the coping style and that supportive interventions are offered to assist caregivers in dealing with stressful information according to their coping style.

The supportive role played by partners and other family caregivers of women with breast cancer is well documented (Carey, Oberst, McCubbins, & Hughes, 1991; Lichtman, Taylor, & Wood, 1987; Morse & Fife, 1998; Pistrang & Barker, 1995). One of the most important concerns for these family caregivers is the need for information (Hilton, 1993; Houts, Rusenas, Simmonds, & Hufford, 1991; Kristjanson & Ashcroft, 1994; Northouse & Peters-Golden, 1993). For many family caregivers, an important source of information is the

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Digital Object Identifier: 10.1188/03.ONF.987-996