A Study to Assess the Perception about Factors Influencing Patient's Participation in Nursing Care and Decision Making Process among Patients Admitted in Cancer Hospital and Research Institute, Gwalior, M. P

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Abstract: The present study was undertaken to assess the perception about factors influencing patient's participation in nursing care and decision making process among the patients admitted in Cancer hospital and research institute, Gwalior, M. P". The objectives of the study were to determine the factors that influences patient's participation in nursing care and decision making process involved in the care, determine the factors stimulating patient's participation in nursing care and the decision making process, determine the factors inhibiting patient's participation in nursing care and the decision making process. Descriptive study design was adopted for this study. Purposive sampling technique was adopted to select samples.100 adult patients admitted in the various wards in the cancer hospital and research institute at Gwalior were selected. Informed consent was taken and data was collected. A structured interview schedule was used to assess the perception about factors influencing patient's participation in nursing care and decision making process among the patients. The collected data was analyzed by using descriptive and inferential statistics. According to the study majority (47%) of the patients strongly agree, (29%) agrees, (13%) disagree and (11%) strongly disagree with the factors stimulating patients participation in nursing care and the decision making process. Majority (53%) of the patients strongly agree, (29%) agrees, (13%) disagree and (5%) strongly disagree with the factors stimulating patients participation in nursing care and the decision making process.

Keywords: perception, patient's participation, decision making process

1. Introduction

Patient participation is increasingly recognized as a key component in the redesign of health care processes and is advocated as a means to improve patient safety. The concept has been successfully applied to various areas of patient care, such as decision making and the management of chronic diseases. Patient-related factors, such as acceptance of the new patient role, lack of medical knowledge, lack of confidence, comorbidity, and various socio demographic parameters, all affect willingness to participate in the health care process. Among health care workers, the acceptance and promotion of patient participation are influenced by other issues, including the desire to maintain control, lack of time, personal beliefs, type of illness, and training in patientcaregiver relationships. Social status, specialty, ethnic origin, and the stakes involved also influence patient and health care worker acceptance. The London Declaration, endorsed by the World Health Organization World Alliance for Patient Safety, calls for a greater role for patients to improve the safety of health care worldwide. Patient participation in hand hygiene promotion among staff to prevent health care-associated infection is discussed as an illustrative example. A conceptual model including key factors that influence participation and invite patients to contribute to error prevention is proposed. Further research is essential to establish key determinants for the success of patient participation in reducing medical errors and in improving patient safety.

Patient participation is a complex concept and arises from the widespread consumer movement of the 1960s that affirmed the consumer's right to safety, the right to be informed, the right to choose, and the right to be heard. During the past few years, patient participation has been increasingly recognized as a key component in the redesign of health care processes and successfully applied to some aspects of patient care, notably the decision-making process and the treatment of chronic illness. Recently, increasing patient participation has been recommended to improve patient safety. The World Health Organization (WHO) World Alliance for Patient Safety is actively highlighting the role that patients and their families could play in the improvement of health care. However, this field of patient participation has not been widely researched thus far.

No single definition exists, and various terms such as patient collaboration, patient involvement, partnership, patient patient-centered empowerment, care are used or interchangeably. Furthermore, patient participation can relate to aspects of health care as diverse as decision making, self-medication, and self-monitoring, patient education, goal setting, or taking part in physical care. The US National Library of Medicine defines patient participation as "the involvement of the patient in the decision-making process regarding health issues". However, this focus on the decision-making process does not include the many and varied aspects of health care in which the patient could participate. In this review, we make a distinction between participation in decision making and

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participation in other aspects of care. Larsson recently presented barriers for participation from a patient perspective: facing own inability, meeting lack of empathy, meeting a paternalistic attitude, and sensing structural barriers

2. Statement of the Problem-

"A study to assess the perception about factors influencing patient's participation in nursing care and decision making process among the patients admitted in Cancer hospital and research institute, Gwalior, M. P".

3. Purposes

The main purpose of the study is to study the process of patient's participation, to determine the various factors influencing patient's participation in nursing care and the decision making process involved in the care.

4. Objectives

- 1) To determine the factors that influences patient's participation in nursing care and decision making process involved in the care.
- 2) To determine the factors stimulating patient's participation in nursing care and the decision making process.
- 3) To determine the factors inhibiting patient's participation in nursing care and the decision making process.

5. Methods/ Approach

Descriptive study research design was used for the

Following study. Study variable under the study were:

Patient's perception and factors influencing patient's participation in nursing care and the decision making process.

This study was conducted among study 100adult patients admitted in the various wards in the cancer hospital and research institute at Gwalior who satisfied the inclusion criteria

The tool consists of 3sections:

- 1) Demographic data.
- 2) Items related to factors stimulating patient's participation in nursing care and the decision making process.
- 3) Items related to factors inhibiting patient's participation in nursing care and the decision making process.

Structured Questionnaire	No. of Items
SECTION A: Demographic variables.	10
SECTION B: Items related to factors stimulating	
patient's participation in nursing care and decision	20
making process.	
SECTION C: Items related to factors inhibiting	
patient's participation in nursing care and decision	20
making process.	

Section A:

Demographic Data: It comprises of items seeking general information about socio demographic information of the patient regarding age, sex, religion, marital status, education, occupation, duration of illness, monthly income, type of family, and area of living.

Section B

It consisted of 20 items related to factors stimulating patient's participation in nursing care and the decision making process. Which are divided under categories namely: Regarded as person (ques.1 to 6), Engaged through information (ques.7 to 10). Acknowledged as competent (ques.11 to 14), other factors (ques.15 to 20). Likert questions were made to know how strongly the respondent agrees with a particular statement. The likert scale was developed with five-point scale (strongly agrees agree, uncertain, disagree, and strongly disagree). Scoring of the likert scale was done on the basis of type of statement and level of respondent's agreement with the statement. In this section the statements are positive thus respondents get higher score if there is agreement with the statement. An instruction to respondents was adequately stated.

Section C:

It consisted of 20 items related to factors inhibiting patient's divided participation under categories in nursing namely: Abandoned without backup (ques.1 to 7), Belittled verbally (ques.8 to 10), Ignored without influence (ques.11 and 12) Likert to questions influence (ques.11 and 12), and other factors (ques.13 20). Likert questions were made to know how strongly the respondent agrees with a particular statement. The likert scale was developed with five-point scale (strongly agrees agree, uncertain, disagree, and strongly disagree). Scoring of the likert scale was done on the basis of type of statement and level of respondent's agreement with the statement. In this section the statements are negative thus respondents get higher score if there is disagreement with the statement. An instruction to respondents was adequately stated.

Score Interpretation

Section A:

Information regarding demographic data was collected on 10 demographic variables. The responses they felt appropriate was placed in the space provided for each item

Section B:

Maximum scoring for the statement is 5 and minimum of 1 based on the direction of scoring

Table 1: Level of perception regarding factors stimulating patient's participation in nursing care and the decision making process.

To interpret level of perception the scores were distributed as follows:-

- 20-40strongly Disagree
- 40-60 Disagree

60-80Agree

 $80-100 \ strongly \ Agree$

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Section C:

Maximum scoring for the statement is 5 and minimum of 1 based on the direction of scoring

Table 2: Level of perception regarding factors inhibiting patient's participation in nursing care and the decision making process.

To interpret level of perception the scores were distributed as follows:-

- 20-40strongly Disagree
- 40 60 Disagree
- 60 80 Agree
- 80-100 Strongly Agree

Level of perception:

- Strongly agree-53 (53%)
- Agree-29 (29%)
- Disagree-13 (13%)
- Strongly disagree-5 (5%)

Written permission was obtained from the concerned patients. The data collection was done from 25-04-2012 to 30-04-2012 the samples were selected by judgmental or selective sampling. The purpose of the study explained to them and informed consent was obtained. The investigator reassured that whatever information they give will be kept confidential and this information used only for the study purpose. The total of 100 subjects was selected for the study. The data were collected by using structured interview schedule in English. Data was entered to Master Data sheets. Descriptive and inferential statistics was used for analysis of data. Frequency and percentage were used to describe the distribution to their demographic characteristics. Mean, Mean score percentage and Standard Deviation were used for assessing the knowledge regarding stress and coping methods. Chi - square test was used to determine the association of demographic variables with knowledge regarding stress and the association of demographic variables with practice of coping strategies.

6. Results

Section A

Characteristics of the Study Sample: Data shows that (50%) of the study sample are males and (50%) are females. The data also shows that majority of the study sample (40%) belongs to the age group 66 years and above.

Majority of the samples (87%) are married; and majority of them (89%) were found to be Hindus. The data below shows that majority of the study samples (33%) were illiterate; majority of them (38%) had agriculture as their occupation. It was also observed that majority of the study sample (43%) had a monthly income of 5001 to 10000 Rs. The table also indicates that majority of the sample (33%) were suffering from cancer for less than one year; majority of them (77%) belonged from a nuclear family; majority of the study sample (58%) were from rural areas.

	Table	1	
S. No.	Sample Characteristics	Frequency	Percentage
1	Gender of the Patent		
	Male	50	50%
	Female	50	50%
2.	Age		
	21 to 35 years	13	13%
	36 to 50 years	27	27%
	51 to 65 years	20	20%
	66 and above	40	40%
3.	Marital Status		
	Unmarried	7	7%
	Married	88	88%
	Widowed	2	2%
	Divorced	3	3%
4.	Religion		
	Hindu	89	89%
	Muslim	9	9%
	Sikh	-	
	Christian	-	
	Any other	2	
5.	Educational Status		
	Illiterate	33	33%
	Primary	29	29%
	Secondary	22	22%
	High School	15	15%
	Graduate And Above	1	1%
6.	Occupational Status		
	Household Work	19	19%
	Laborer	12	12%
	Farmer	38	38%
	Service	11	11%
	Private Business	11	11%
	Any Other	9	9%
7.	Monthly Income		
	Less Than 2000rs	13	13%
	2001 To 5000rs	33	33%
	5001 To 10000rs	43	43%
	More Than 10000rs	11	11%
8.	Duration of Illness		
	Less Than 1 Year	33	33%
	1 To 3 Year	26	26%
	4 To 5 Year	23	23%
	More Than 5 Year	18	18%
9.	Type of Family		
	Nuclear	77	77%
	Joint	23	23%
10.	Area of Living		
	Rural	58	58%
	Urban	42	42%

Section B- Patient's perception regarding the factors influencing stimulating patient's participation in nursing care and the decision making process:

According to this study majority (47%) of the patients strongly agree, (29%) agrees, (13%) disagree and (11%) strongly disagrees with the factors stimulating patient's participation in nursing care and the decision making process.

Table 2

S. No	Level of Perception	Frequency	Percentage	
1.	Strongly agree	47	47%	
2.	Agree	29	29%	
3.	Disagree	13	13%	

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11%

4. Strongly disagree

Level of perception:

- Strongly agree-47 (47%)
- Agree-29 (29%)
- Disagree-13 (13%)
- Strongly disagree-11 (11%)

Section C

Patient's perception regarding the factors influencing inhibiting patient's participation in nursing care and the decision making process:

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According to this study majority (53%) of the patients strongly agree, (29%) agrees, (13%) disagree and (11%) strongly disagrees with the factors inhibiting patient's participation in nursing care and the decision making process.

Table 3

S. No	Level of Perception	Frequency	Percentage
1.	Strongly agree	53	53%
2.	Agree	29	29%
3.	Disagree	13	13%
4.	Strongly disagree	5	5%

Level of perception:

- Strongly agree-53 (53%)
- Agree-29 (29%)
- Disagree-13 (13%)
- Strongly disagree-5 (5%)

7. Discussion

The findings reveal that stimulating patient participation occurred when nurses treated the patient as a valuable coworker.

It is important to become motivated and engaged through information. Information constitutes the basis of patient participation. Patients need to find acceptable interpretations of what is happening to them, which is essential for participation. Consequently, information needs to be adequate, individually adjusted, coordinated, and univocal. The findings reveal that inhibiting patient participation occurred when nurses treated the patient so they felt neglected and as a helpless object of a nurse's actions. When patients feel belittled verbally, a nurse may exercise the power of language or behave as a parent figure.

8. Conclusion

This study based on patients' experiences provided a picture of health care workers behavior that stimulate or inhibit patients' participation and patient's reactions on health care workers behavior. In order to promote patient participation, health care worker need to be aware of the situations where they could overstep the mark and which of their own behavior lead to promotion or hindrance. Our findings suggest that there is scope for developing health care worker' behaviors in order to activate patients in their own nursing care. The findings may increase understanding of patient participation in nursing practice, patient education, policymaking, and evaluation. Further verification of the findings is recommended either by means of replication or other studies in different settings.

9. Future Scope

- 1) The study can be replicated on a larger sample size.
- 2) The study could also be done for patients admitted in the general hospitals with acute illness.
- 3) A comparative study between the perception of patients admitted in one hospital to the patients admitted in another hospital regarding the factors influencing the patient's participation in nursing care and the decision making process.
- 4) The study can concentrate on patient's knowledge regarding his or her own rights regarding procedures.

10. Limitations

The limitations of the present study were:

- 1) The sample size was 100.
- 2) Unresponsive patients were not included.
- 3) Patient admitted in the various wards of cancer hospital in Gwalior.
- 4) Patients who were available during the study period.
- 5) Patients who were willing to participate in the study.
- 6) Admitted patients who were below the age group of 20 years and above 60years.
- 7) Patients those who understood the language Hindi.

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