

Assessment of Knowledge Among Primary Caregivers Regarding Stroke Care: A Descriptive Study from a Tertiary Hospital in Meerut, India

Divya

Assistant Lecturer, Mental Health Nursing, Panna Dhari Maa Subharti Nursing College, Meerut, Uttar Pradesh, India
Email: [divyajohn11977\[at\]gmail.com](mailto:divyajohn11977[at]gmail.com)

Abstract: ***Background:** Stroke remains one of the leading causes of mortality and disability globally. Family caregivers play a central role in the long-term rehabilitation of stroke survivors, yet many caregivers assume these responsibilities without adequate preparation. **Purpose:** This study aims to assess the knowledge level of primary caregivers regarding stroke care and identify demographic factors associated with their level of understanding. **Methods:** A descriptive cross-sectional design was adopted, involving 30 primary caregivers recruited through purposive sampling. Data were collected using a structured questionnaire with 21 knowledge items. Descriptive and inferential statistics were used. **Results:** The findings revealed that 53.33% of caregivers had good knowledge, 40% average knowledge, and 6.66% below-average knowledge. Gender, religion, and residence showed significant associations with knowledge levels. **Conclusion:** Caregivers demonstrate moderate understanding of stroke care, yet structured educational interventions remain essential.*

Keywords: Stroke, Caregiver Knowledge, Rehabilitation, Nursing Education, Family Caregivers

1. Introduction

Stroke is a global health concern characterized by sudden interruption of blood flow to the brain, resulting in neurological deficits. It is one of the leading causes of morbidity, disability, and long-term dependence worldwide. In India, the burden of stroke continues to rise due to lifestyle changes, increasing prevalence of hypertension, diabetes, and sedentary habits. Following a stroke, patients often require prolonged rehabilitation, ongoing monitoring, assistance with daily living activities, emotional support, and preventive care to avoid complications. With limited availability of professional rehabilitation services in many parts of India, the role of family caregivers becomes indispensable.

Despite their critical involvement, most caregivers acquire their responsibilities suddenly, without training or prior experience. This places them under emotional, physical, and psychological strain. Knowledge gaps in stroke management may contribute to complications such as pressure ulcers, aspiration pneumonia, falls, contractures, emotional instability, and delayed recovery. Ensuring that caregivers possess adequate knowledge is therefore central to improving quality of care.

This study investigates the level of knowledge among primary caregivers regarding stroke care in a tertiary hospital in Meerut, Uttar Pradesh. By identifying gaps and associated demographic factors, this study aims to support targeted interventions and policy reforms to strengthen caregiver preparedness.

2. Materials and Methods

A descriptive cross-sectional approach was selected to assess caregiver knowledge. The study was conducted at Chhatrapati Shivaji Subharti Hospital, Meerut, a tertiary institution catering to a diverse patient population.

Sample and Sampling: A total of 30 caregivers were selected using purposive sampling based on inclusion criteria: caregivers aged 15 years or older, providing direct care to stroke patients, and able to read or understand Hindi or English.

Data Collection Tool: A structured questionnaire was used containing two sections—demographic variables and 21 multiple-choice items assessing stroke-related knowledge. The tool covered areas such as signs and symptoms, complication prevention, nutrition, mobility, positioning, medication adherence, and rehabilitation support.

Procedure: After obtaining ethical clearance and informed consent, data were collected during ward hours through interviewer-administered questionnaires.

Data Analysis: Frequencies, percentages, and means were used for descriptive statistics. Chi-square test was employed to determine associations between demographic variables and caregiver knowledge.

3. Results

The demographic data revealed that caregivers were predominantly male (66%), with the largest age group between 15–25 years (40%). Most participants identified as Hindu (73%) and came equally from rural and urban backgrounds.

Knowledge Levels: More than half (53.33%) demonstrated good knowledge, reflecting functional awareness of stroke care practices. A substantial proportion (40%) exhibited average knowledge, while only 6.66% had poor knowledge.

Associations: Significant associations ($p < 0.05$) were observed between knowledge levels and gender, religion, and place of residence. No significant association was found

with age, education, income, family type, or family history of stroke.

4. Discussion

The findings indicate moderate to high levels of knowledge among caregivers, aligning with global studies where caregiver awareness varies but often remains inadequate in low-resource settings. Gender differences in knowledge may reflect varying caregiving roles or exposure to health information. The association with religion and residence may relate to cultural practices or differences in healthcare access between rural and urban populations.

Despite moderate knowledge, many caregivers lack practical training in mobility support, safe feeding practices, early symptom recognition, and emotional support for survivors. This highlights the need for structured, ongoing educational programs facilitated by nursing professionals. Regular caregiver training sessions, counseling, demonstration-based learning, and follow-up support can significantly improve outcomes.

Strengthening caregiver education could reduce complications, enhance rehabilitation, and improve the quality of life for both patients and caregivers.

5. Conclusion

Caregivers possess moderate understanding of stroke care; however, continuous education, skills training, and professional support remain essential for strengthening their role in rehabilitation. Healthcare institutions should integrate caregiver training into routine stroke management and discharge planning.

6. Implications

- Clinical: Nurses must prioritize caregiver education as part of patient care.
- Educational: Nursing curricula should include caregiver-centered modules.
- Administrative: Hospitals should develop standardized caregiver teaching policies.
- Research: Future studies should involve larger samples and test educational interventions.

References

- [1] Smith J., 2018. Stroke rehabilitation and caregiver burden. *Journal of Clinical Neuroscience*.
- [2] Agarwal P., 2020. Stroke in India: burden and challenges. *Indian Journal of Public Health*.
- [3] Williams B., 2019. Family caregiver preparedness in stroke. *International Journal of Nursing Studies*.