

Relationship between Caretakers Variable on Education and Coping Strategies of Primary Caretakers Attending to Children with Cardiac Problems

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Abstract: *The present study makes an attempt to understand the Relationship between Caretakers Variable on Education and Coping Strategies of Primary Caretakers Attending to Children with Cardiac Problems. Caretakers who were ready and willing to extend their cooperation for indepth interview were selected as population for the study. Thus a total number of 60 caretakers were selected purposively for conducting the present study. The results revealed that caretakers used both approach and avoidance coping styles. It reflected that, based on Education, caretakers was found to be positively correlated that is, the level of significance is 0.22035* under approach coping strategies indulging in logical analysis strategy. Better the education, caretakers were used it for medical treatment and for providing medicines etc. for the sick child.*

Keywords: Education, Caretakers, Coping Strategies, Cardiac Problems

1.Introduction

Becoming a parent, is one of the most powerful of the human experiences, is often accompanied with feelings of celebration and relief, but it can also be a time of anxiety, and stress. The term "Parenting" is derived from the Latin root *pario*, meaning life-giver, and encompasses much more than just the care giving activities parents perform.

Kasliwal *et al.* (2006) the incidence of coronary artery disease (CAD) has decreased by 50% . Over the past 30 years in developed countries, in India it has doubled. Prevalence is an epidemiological measure to determine a how commonly disease or condition occurs in a population, whereas incidence is another epidemiological measure that measures the rate of occurrences of new case of a disease or condition. The prevalence of congenital heart disease is seen mostly from the age of 35 years and over.

Patel *et al.* (2005) reported congenital heart disease is the second leading cause of mortality in Indians. Gupta (2004) reported that goal of preventing cardiac diseases is to avoid the occurrence of the major risk factors themselves.

however, this can be achieved only by being with the public and providing knowledge to them. The basic aim of the public health education is to spread the message of primordial prevention of coronary heart disease through population based measures. Cavusoglu (2004) reported that, one of the main nursing interventions in clinical settings (outpatient/inpatient) is to support the parents of children with congenital cardiac problems, such as educating, caring for and providing guidance regarding the disease, developing plans for care, being a representative of the health care team and acting as advisor to families. Nurses

should assess parenting distress at each health care visit to provide appropriate support and guidance. Appropriate planning and interventions can then be provided to parents who are in need of professional support through support and skilled counselling, nurses may significantly influence parenting behaviour and psychosocial outcomes for children with congenital heart disease.

Cheuk DK *et al.* (2004) found that, Parents of children with complex congenital heart disease (CHD) have the difficult task of understanding their child's medical condition and learning how best to care for them. Unfortunately, many parents of children with CHD have significant knowledge gaps that may impact care, possibly due to a lack of understanding or remembering important instructions.

Cheuk DKL *et al.* (2004) found that 156 parents of children with relatively simple congenital heart defects were recruited that 59% of parents correctly named their child's congenital heart disease, only 28.8% correctly indicated the heart lesion(s) diagrammatically. Significant determinants of knowledge in the nature of heart disease were cardiac diagnosis, occupation of parents, and their educational level.

2.Research Method

A total number of 60 caretakers who were ready and willing to extend their cooperation for in depth interview were selected as population for the present study. The sample was limited to Primary care takers for two reasons. First much of the research on family care giving which has been done aboard was focused only on below 15 year old children. Secondly, reports have suggested that parents are particularly vulnerable to the strains of illness experienced due to multiple roles to be shouldered. The main focus of the

study was to provide various alternative strategies for the primary caretakers.

3. Research Findings and Discussion

Caretakers who were ready and willing to extend their cooperation for in depth study were selected as population for the study that is "Relationship between Caretakers Variable on Education and Coping Strategies of Primary Caretakers Attending to Children with Cardiac Problems". Thus a total 60 caretakers were selected purposively for conducting the present study.

Description of the Cardiac Problems

- Cardiac illness is the most acute pressure, which any family may experience and it also creates a potential threat equally to both the victim and the caretaker.
- For the patient, the threat involves painful medical procedures, surgeries, and its side effects, and frequent hospitalization.

4. Relationship Between Caretakers Variable on Education and Coping Strategies

Approach coping		Avoidance coping	
Caretakers Variable: <i>EDUCATION</i>			
Logical Analysis	0.22035*	Cognitive avoidance	-0.18227
Positive appraisal	0.11357	Acceptance	-0.13378
Guidance and support	0.16454	Alternate Rewards	0.06328
Problem solving	-0.06828	Emotional discharge	-0.16048

P*0.05; level of significance; P**0.01 level of significance
r tab value at 5% level of significance = 0.2500; r tab value at 1% level of significance = 0.3248.

The above table presents the relationship between caretaker variable on education and coping strategies of primary caretakers attending to children with cardiac problems. Out of the eight coping responses, the first four represents Approach coping and the remaining four comes under Avoidance coping.

Under Approach coping, the first area is logical analysis, which deals with handling the situation objectively, finding some personal meaning to the situation and anticipating the new demands. In this area, the level of significance is **0.22035*** logical analysis in coping with the situation.

The second area under Approach coping is Positive appraisal, which includes caretaker's ability to see the good side of the situation and how the event could change one's life in a positive way. In this area, the level of significance is 0.11357 positive appraisals in coping with the situation.

The third area under Approach coping is guidance and support, which involves seeking support from relations, talking to a closed person about the problem and praying for guidance and strength. In this area, the level of significance is 0.16454 caretakers sought guidance and support.

The fourth area under Approach coping is problem solving, which involves a plan of action, using alternate ways of solving problem and trying out new ways of confronting the

problem. In this area, the level of significance is -0.06828 used to problem solving strategies.

Under Avoidance coping, the first area is cognitive avoidance i.e. avoiding the situation, denial, day dreaming, and imagining that problems would go away on their own. In this area, level of significance is -0.18227 used cognitive avoidance.

The second area under avoidance coping is acceptance i.e., accepting the situation with all its intensity, realizing that one has no control over the problem and believing that outcome would be decided by fate. In this area, the level of significance is -0.13378.

The third area under avoidance coping is seeking alternate rewards i.e., getting involved in new activities, making new friends and indulging in more recreational activities. In this area, the level of significance is 0.06328. The fourth area under avoidance coping is emotional discharge, which involves yelling or shouting to let off steam, showing the frustration of role capacity on others and keeping away from people in general. In this area, the level of significance is -0.16048 used avoidance coping emotional discharge technique.

5. Conclusion

The data collected with respect to relationship between caretaker variable on education and coping strategies of primary caretakers attending to children with cardiac problems revealed that caretakers used both approach and avoidance coping styles. It reflected that, based on the Education caretakers was found to be positively correlated that is the level of significance is **0.22035*** under approach coping strategies indulging in logical analysis strategy. Better the education, caretakers were used it for medical treatment and for providing medicines etc. for the sick child.

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