Understanding the experiences of caring for someone after stroke: analysis of a s...

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Understanding impact of stroke needed an appreciation of various nature of the disease and the recovery process from biopsychosocial view. Therefore, this study is to explore the experiences of male-patients post-stroke and their wife-caregiver's perceptions of factors that impacting the patient's quality of life and wife-caregivers' strain encountered during the first year after discharge. Study design of this research is descriptive qualitative. The researchers used qualitative content analysis to analyze male patient's depiction of quality of life and wife-caregivers' account of caregiving. The participants were recruited after the approval from University of Calgary Health Region Conjoint Ethics Review Board was received. Twenty-six minor stroke patient and their wife-caregivers were recruited, and information is giving regarding timing of follow-up calls. Consent is obtained too. Semistructured interviews were undertaken with participants through telephone at 1, 2, 3, 6, 9 and 12 months. Quality of life for male patients was asked by using two open-ended questions and wife-caregivers were received the caregiver strain questionnaire administered. to recognize the issues and express their personal experiences, Stroke Specific Quality of Life applied to the male and Bakas Caregiving Outcome Scale applied to wife-caregiver. Exacts words that captured the key thoughts were highlighted after the text was read word by word. Also, codes were condensed and categorized in similarity content, with two central categories emerging from data. The results were two central categories were identified which are being vulnerable and realization.

Male patients are vulnerable due to their limitations in their daily life activities and feeling insecure. They felt their identity was strongly

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connected to their ideas of their masculine self. After stroke, they started to feel anger, anxiety, depression and denial because they unable to carry on their daily activities as usual. Male patients' emotional outbursts as reactions to their physical challenges cause them may have mood disturbance that linked to cognitive dysfunction. The researchers found out that most of the wife-caregivers engaged in hyper-vigilance while checking their husbands' health. Their stress and anxiety raised as they became fatigued and couldn't get enough sleep due to worrying about their husband. Men experienced physical loss that affected the independence and their sense of self. Wifecaregivers also experienced loss of independence and freedom as they have to reorganize their daily activity to adapt their husband. Some of the wifecaregivers felt overwhelmed and they loss of social contact due to their husbands'. However, some of the male patients learnt to adapt and accept what had transpired in their lives. Their wife-caregiver also stated that this experience became positive as they were able to focus on being a couple and build up their relationship.

According to the case study, Mr Grant is living with partner Edith. Mr Grant reported that he has struggled to carry out his daily life activities. He also started to deny his physical limitations and attempted to drive the car. His inability resulted in his emotional outburst. Based on the study, Mr Grant masculine image is threatened. His functional motor weakness causes his lack of independence and this evoked his reactions of anger, anxiety, denial and depression. His emotional outburst as reactions is due to his physical challenges. Mr Grant also felt depressed as his social contact became

limited. Also, due to Mr Grant's behavior, Edith felt frustrated and overwhelmed. According to research, Edith became fatigue from being constantly monitoring Mr Grant.