

Family Caregivers' Burden, Patients' Resourcefulness, and Health-Related Quality of Life in Patients With Colorectal Cancer

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OBJECTIVES: To examine how family caregivers' burden and patients' resourcefulness influence each other and health-related quality of life (HRQOL) in patients with colorectal cancer.

SAMPLE & SETTING: This study was conducted in an outpatient clinic at a medical center in Taichung, Taiwan. A total of 84 patient-caregiver dyads were recruited, and 43 patients had advanced-stage cancer. Patients and their caregivers signed consent forms individually. Patients were aged 29–77 years, and caregivers were aged 22–75 years.

METHODS & VARIABLES: The theory of resourcefulness and QOL guided this study. An F test and multiple regression analyses were conducted to examine the relationships among demographic characteristics, family caregivers' burden, patients' resourcefulness, and patients' HRQOL.

RESULTS: Higher-resourcefulness patients tended to have caregivers with higher self-esteem and fewer health impacts. Caregivers with fewer impacts to health and finances and higher self-esteem were predictive of higher resourcefulness in patients. Higher patient resourcefulness, fewer caregiver disruptions to daily schedule and impacts to finances, and higher caregiver self-esteem were predictors of patients' HRQOL.

IMPLICATIONS FOR NURSING: When developing and evaluating education programs about cognitive skills training for patients with cancer, nurses should take family caregivers' burden into consideration to support optimal patient outcomes and HRQOL.

KEYWORDS health-related quality of life; resourcefulness; family caregivers' burden

ONF, 51(1), 39–48.

DOI 10.1188/24.ONF.39-48

In 2022, 1.9 million new cases of colorectal cancer (CRC) were diagnosed, and 930,000 deaths from CRC occur each year worldwide (World Health Organization, 2023). CRC and cancer-related symptoms affect patients' health-related quality of life (HRQOL) (Mintiotti et al., 2022). HRQOL in patients with cancer is defined as patients' perception of their physical, psychological, functional, and social health status in the context of cancer and its treatments (Cella, 2000).

HRQOL is an important predictor for survival in patients with CRC (Park et al., 2018). Age, gender, comorbidities, and tumor locations are statistically significant predictors of HRQOL in patients with CRC (Al-Shandudi et al., 2022). QOL was also found to be affected by age (Yeo et al., 2018) and gender (Nogueira et al., 2018) in patients with breast cancer. Being unmarried, of lower income, or of lower education level, as well as receiving certain types of treatment, was significantly related to inadequate QOL in patients diagnosed with breast cancer (Ho et al., 2018).

In addition, learned resourcefulness, as defined by Meichenbaum (1977), was a significant predictor of QOL; higher resourcefulness correlated with fewer depressive symptoms in Taiwanese women diagnosed with breast cancer (Huang et al., 2010). A study by Lin et al. (2017) found a mediating effect when patients with prostate cancer with higher resourcefulness experienced better QOL and fewer depressive symptoms. Resourcefulness helps patients organize different techniques to overcome the challenges caused by the disease (Wang & Zauszniewski, 2018), as well as to maintain their independence by using personal and social resources (Wang et al., 2016).

Patients with cancer and their family caregivers often experience challenges caused by cancer and fight the illness together (Given et al., 2001). Patients and their family caregivers can be considered an entity