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Family filial value on caring children with leukemia



Yuni Sufyanti Arief*, Nursalam, Praba Diyan Rachmawati

Faculty of Nursing, Universitas Airlangga, Kampus C Unair, Jl. Mulyorejo, Surabaya, Indonesia

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KEYWORDS

Family; Filial value; Leukemia

Abstract

Objective: Family centered empowerment is a nursing intervention by increasing family filial value which consists of responsibility, respect, and family care. The purpose of this study was to explain the family filial value in treating leukemia children.

Method: The design of this study was descriptive with a cross-sectional design. The population in this study were families with children suffering from leukemia who were treated at Dr. Soetomo Surabaya. A sample of 140 respondents were recruited by consecutive sampling technique. Data was collected by questionnaire. The independent variable is family filial value and the dependent variable is the family's ability to caring children with leukemia. Data were collected by questionnaire and analyzed with spearman correlation (\propto < 0.05).

Result: Responsibility is the highest indicator of family filial value (16.4%). The results showed that there was an influence of family filial value (responsibility p = 0.000; r = 0.520, respect p = 0.000; r = 0.403 and care p = 0.000; r = 0.297) on the family's ability to care for leukemia children.

Conclusion: Filial value of the family can improve the family's ability to care for leukemic children that have an impact on children's health indicators.

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Introduction

Families and children in chronic health conditions often feel powerless in meeting the health care needs of their children and in sustaining their family life. Caregivers or families who

E-mail address: yuni_sa@fkp.unair.ac.id (Y.S. Arief).

have children with chronic conditions where one of them is leukemia, faced with demands, challenges, emotional and cognitive problems, and changing roles in the family and community. This has an impact on family sustainability in providing care for children. The powerlessness experienced by the family will affect the ability of the family to support providing care for their children. The ability of families to care for children with leukemia is needed to improve their quality of life.

The concept of empowering families can run optimally if the family has basic values (filial values) which include responsibility, respect, and care.² This filial value can later contribute to the family in making an assessment (family

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^{*} Corresponding author.

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appraisal) of him related to the family's ability to treat patients with chronic illness. This can help families to know what should be done related to child care in the hospital or at home. During child care at the hospital it is expected that a learning process will occur in the family to increase knowledge and skills related to children's illness. Family centered empowerment requires basic values (filial value) owned by the family which includes components of a sense of responsibility, respect and care for the family in providing care for leukemia children. The consequences of the empowerment process carried out on parents can be in the form of parental abilities. However, these conditions have not yet materialized.

Methods

Design

This study uses a descriptive explanatory research design with a correlation design, to determine the relationship between the different aspects under study of the phenomenon. Based on the time of data collection, the design used is cross-sectional, where the cause and effect variables are examined and measured at the same time.

Population and study setting

The population in this study were families with children suffering from leukemia in Children's IRNA Dr. Soetomo Surabaya. The sample used was 140 families who had leukemia children with inclusion criteria for mothers with children suffering from leukemia who were undergoing chemotherapy and the mother treated the child directly with leukemia. The sampling technique used was consecutive sampling.

Variables

The variables in this study are family values with indicators of responsibility, respect, and care as independent variables and the ability of families to care for leukemia children with indicators of family perceived health, personal growth, and existential well being as independent variables.

Data collection

Research data collection was carried out using a questionnaire. The questionnaire for the family filial value uses the filial value scale instrument, the questionnaire consists of 18 questions with assessments given agree (SS), agree (S), not sure (TY), disagree (TS), strongly disagree (STS).² Family ability questionnaire in caring for leukemia children with perceived health indicators using the Health Status Questionnaire (HSQ-12) instrument consisting of 11 questions, personal growth indicators using the Personal Growth Initiative Scale (PGIS) instrument from Cristhine Robitschek, which consists of 9 items questions, and existential wellbeing indicators use Ellison's Spiritual Well Being Scale (SWBS) instrument.

Table 1 Description of the filial value variable category for mothers with children suffering leukemia in children's IRNA RSUD Dr. Soetomo Surabaya.

	Filial value	Category	Frekuensi N = 140	%
		Low	21	15.0
	Responsibility	Medium	96	68.6
		High	23	16.4
		Low	12	8.6
	Respect	Medium	111	79.3
		High	17	12.1
(Care	Low	25	17.9
		Medium	93	66.4
		High	22	15.7

Data analysis

Descriptive analysis was conducted to identify the filial valued and ability of families to care for leukemia children. Descriptive analysis is done by making frequency distribution tables, standard deviations, and percentages. Indicator descriptions are expressed in high, medium and low values. Inferential analysis of data collected using Spearman correlation analysis.

Ethical aspect

Before conducting research data retrieval, researchers conducted an ethical review conducted at RSUD Dr. Soetomo Surabaya to determine that this research has fulfilled its feasibility. This study was declared ethical as appropriate as stated in the ethical certificate issued by RSUD Dr. Seotomo Surabaya number 385/Panke.KKE/V.

Result

The basic values of the family (filial value) which are the basis for family empowerment (family centered empowerment) in this study are divided into three factors. These factors are: a sense of responsibility (responsibility) family in caring for children leukemia, a sense of attention (respect) for children, and care for caring for children suffering from leukemia. Table 1 explains the indicator descriptions of the filial value consisting of responsibility, respect, and care. This indicator is a form of empowerment that must be grown on the family. Indicator of responsibility is the mother's attitude toward a sense of responsibility in caring for a leukemia child. In this indicator most respondents had a medium category of responsibility (68.6%) and at least a low category (15%).

Indicators of respect are parents' attention and admiration for children suffering from leukemia which consist of parents' attention to the nutrients needed by children with leukemia, treatment of bleeding that occurs in children with leukemia, prevention of secondary infections in children with leukemia. The results showed that most patients (79.3%) belonged to the medium category and the least was in the low category (8.6%). Care indicator is the mother's attitude toward her care in caring for a leukemia child. The

Table 2 D	Table 2 Description of the variable family ability in caring for leukemia children in children's IRNA RSUD Dr. Soetomo Suraba						
No	Family's ability for caring for leukemia children	Kategori	Frekuensi <i>N</i> = 140	%			
1	Perceived health	Low Medium High	23 103 14	16.4 73.6 10.0			
2	Personal growth	Low Medium High	20 101 19	14.3 72.1 13.6			
3	Existential wellbeing	Low Medium High	24 101 15	17.1 72.1 10.7			

most indicators are in the medium category (66.4%) and the least are in the high category (15.7%).

Overall, the filial value measured from 3 indicators is more in the medium category with the most categories in the indicators of parents' respect for children suffering from leukemia. This can be related to most of the status of children in this study is the first child. While the most low category is an indicator of maternal desire to care for leukemia children. This can be explained that an intervention is needed to increase the sense of family empowerment in caring for leukemia children, especially to increase family care for caring for leukemia children so that families can improve their ability to care for leukemia children. The ability to care in this study was divided into three factors. These factors are: perceived health, personal growth, existential well being.

Table 2 explains the ability of mothers to care for leukemia children which consists of indicators of perceived health, personal growth, and existential well being. Most of the categories of indicators of caring ability that includes perceived health, personal growth, and existential well being are in the medium category with the most indicators being the ability to care for aspects of the ability to manage health. The most percentage of low category is the indicator of the ability to maintain the condition of a prosperous existence while caring for a leukemia child. This can be explained that the mother's ability to perceive a healthy state, positive personal development from the mother, the mother's assessment of the ability to accept her condition, and form a vertical relationship with the creator is still not optimal. Efforts are needed to improve the ability of these mothers to be more optimal in caring for leukemia children.

Discussion

Filial value (values) the basis of the family is an indicator of the formation of empowerment in the family consisting of indicators of the ability of families to be responsible for caring for children with leukemia (responsibility), the ability of families to pay attention to children suffering from leukemia (respect) and the ability of families to care for children with leukemia (care). In this study, the indicators in the highest category were the family's ability to be responsible for

caring for leukemia children and the lowest category in the ability to care for children suffering from leukemia.

Empowerment is a process that runs continuously to improve the ability and independence of the community in improving their standard of living, the process is carried out by awakening their empowerment, to improve life on their own strength. The purpose of empowerment is to make someone capable of solving their own problems, by providing trust and authority so as to foster a sense of responsibility. Gibson defines empowerment as a social process, recognizing, promoting and increasing the ability of people to find their own needs, solve their own problems and mobilize the resources needed to control their lives. Family empowerment is a mechanism that enables changes in family ability as a positive impact of family-centered nursing interventions and health promotion measures as well as cultural appropriateness that affect treatment actions and family development.4 Empowerment is defined as the process of finding and developing personal capacity to be responsible for life because it has sufficient knowledge and resources to obtain and apply reasonable decisions and experience enough to evaluate the effectiveness of decisions. 5 Based on these results it can be explained that the existence of a sense of responsibility from parents in carrying out their roles and functions in the family, becomes a thing that can be maintained to be able to increase family empowerment in caring for leukemia children.

Family disease assessment is defined as family trust in assessing and treating disease. The family has an important role in the process of assessing and treating disease. Family assessments form members' values, goals, and priorities in response to an illness. The above supports the results of this study that the existence of basic family values as forming family empowerment can provide a positive family appraisal for families caring for leukemia children.

Family empowerment through strengthening family basic values (filial values) significantly influences the ability of families to care for leukemia children. Family basic values (attitudes) are attitudes and beliefs about parents' responsibilities toward their children's health. Beliefs and commitments to maintain traditional values can affect the motivation of caregivers to provide care for their children. There are 3 dimensions in measuring the filial value, among others:

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- the sense of responsibility of parents in caring for children.
- (2) the sense of parental concern for children and
- (3) the desire of parents to care for children.

The three dimensions of the filial value are expected to-

- change how parents assess the demands of care as a challenge or stressor,
- (2) contribute to existing resources to overcome strong sense of purpose and meaning associated with giving back to parents,
- (3) influence access to family resources and the use of community resources, and
- (4) indirectly affect the results of resources and assessments.²

Pieter and Lubus⁷ stated that through learning people are able to change behavior from previous behavior and display their abilities according to needs. Calgary intervention in the cognitive domain is one of the enabling factors for the formation of behavior. Knowledge and attitude also play a role as a predisposing factor. Knowledge of cancer care that has been good will bring a response in respondents in the form of a positive attitude. A positive attitude will be reflected in individual behavior in implementing cancer treatment.

Treatment measures for families suffering from cancer are good for families in line with the concept of cybernetics that is the ability to regulate oneself in the family process through a feedback process. Intrapersonal systems, especially families, can be seen from the feedback that occurs due to someone's behavior that influences and is influenced by the behavior of others. Actions in the treatment of family cancer can also be influenced by the availability of facilities owned by the family and family motivation in implementing cancer patient care.

Family empowerment (family centered empowerment) is high with indicated basic family values that include a sense

of responsibility in caring for leukemia children, parental attention (respect) to children and care for caring for leukemia children will affect the family assessment (family appraisal) to determine behavior so that in the end the family's ability to treat leukemia children increases.

Conflict of interest

The authors declare no conflict of interest.

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