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Family Support in Telenursing to Undergo Palliative Care for Cancer Patients

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ABSTRACT

This study aims to provide an overview of the support of telenursing methods carried out by families undergoing palliative care programs for cancer patients. This research method uses a qualitative design with a phenomenological approach model. Data collection techniques were conducted through in-depth interviews with six participants. Snowball sampling data retrieval method. Data analysis techniques using the colaizzi method. The results of this study show that when undergoing a palliative care program, support using the telenursing method is a practical and easy-to-use application and the services provided are consuming. This support makes it easier for families to carry out care, in addition to saving costs, Juda can save time, so that families can use their time to do daily work. This study concludes that families and patients must be given socialization about mastering applications and online consultations so that they are able and willing to use these online methods.

Keywords: cancer, family support, palliative care, telenursing

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INTRODUCTION

Palliative care carried out by the companion, in this case, is that the family must get help from community-based palliative care so that palliative care carried out by the family to the patient will be more optimally carried out (Mallon et al., 2021). In addition to medical and psychological treatments, palliative care also includes spiritual treatment, since spirituality can support the individual in seeking personal meaning and his relationship with family and the people around the brand (Valdés-Stauber et al., 2021).

Patients with cancer who are hospitalized are more likely to become infected with COVID-19. Not all cancers have the same risk of morbidity and mortality, with mortality rates ranging from 8% to 30% (Passaro et al., 2021). The high mortality rate of hospitalized end-stage cancer patients has increased significantly and the desire of patients and families to get palliative care to the maximum and also avoid patients and families being infected with COVID-19 requires palliative care methods to be carried out online.

This concern has developed so that new alternatives to treatment other than face-to-face can also be done online. Applying digital or online technology models in carrying out palliative care to cancer patients, one of which is to avoid face-to-face contact between health workers and patients, but the effectiveness of remote consultations is still unclear. (Mills et al., 2021).

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The results of the analysis and review of several selected journals concluded that telenursing communication technology can improve and facilitate nursing care services, namely in conducting health education. (Information, 2021).

The importance of online or telenursing treatment methods carried out by health workers to patients and families can also save time and energy, but it requires the ability to communicate and mastery of information technology for health workers, patients, and families must be improved. It can also improve the quality of palliative care and also the quality of life of cancer patients.

Seeing this phenomenon, there needs to be support for families undergoing palliative care online so that they can use the program properly. The support does not only come from family but also close people or health workers.

Most of the online support provided by group members is emotional support, friendship, assessment support, and informational support. Instrumental support is rarely provided. Support is mainly obtained indirectly through self-disclosure and patient renewal. Rarely do they ask for bright support (Benson et al., 2021).

This is by the DKI Jakarta regional government program, families who treat cancer patients also get access to online treatment, although it has not been optimally carried out by families, because there are obstacles experienced by families when doing online methods even though there is assistance from palliative cadres under the guidance of District Health Centers in their respective regions. They received guidance from the Indonesian Cancer Foundation in Jakarta. Palliative cadres together with health workers always provide the best service to families and patients, so that patients recover quickly.

The above statement is also the same as the statement that families and patients must cooperate well with health workers and palliative cadres so that patient care takes place optimally, whether in tertiary health centers, community centers, or at home. (Macrae et al., 2020).

The online method carried out in Jakarta has received support from the local government and health agencies, both puskesmas and hospitals. Likewise, health workers and health cadres have also used it. Families as companions to patients who undergo palliative services also use the online facility for registration or consultation, even though all families use it.

METHODS

This research method is a qualitative research design with a phenomenological approach model with techniques to collect in-depth interview data on six participants. Snowball sampling data retrieval method. Data analysis techniques using the Colaizzi nematode. This study was conducted in October 2022. Participants are families who have family members suffering from cancer who are undergoing outpatient treatment with an age range of 35-55 years with a patient treatment period of 3 to 10 years and they are domiciled in West Jakarta.

RESULTS

The Research was carried out by conducting in-depth interviews with 6 participants using interview guidelines instruments that had been prepared by the researchers. In this study, the researcher only discussed 2 themes, namely practical and easy-to-use applications and the services provided.

Theme 1 (Easy practical and easy-to-use application)

Theme 1 found that families say the support gained when doing online registration is an easy-to-use app. The statement was only expressed by one participant, namely the 6th Participant. Here are the results:

"Every time I will do maintenance and treatment I always use an online application because, in my opinion, it is practical and easy to use". (Participant 6).

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The results of the interview above showed that only one participant mastered the online application well, the other five participants did not use it, because they had never tried and had considered it to be done. The results of the interview above showed that only one participant mastered the online application well, the other five participants did not use it, because they had never tried and had considered it to be done.

The result of the participant's statement turned out that telenursing is indeed very necessary to make it easier for families to register and consult. The characteristics of participants who use online applications are young mothers who do not lack technology, meaning that here, age greatly affects the use of applications.

Theme 2 (The service provided is satisfactory)

Theme 2 found that families get satisfied with online services. In this theme, only 1 participant was revealed, and five participants did not disclose because they had not tried to use the online method. Here are the results of the interview: "I am satisfied with the online system because it is easy and quick to respond to if I have got a schedule and health workers who will serve me and my son just visited". (Participant 6).

According to him, there is also no differentiator between online and direct dating services. Although registration is online, treatment and other actions related to taking drugs and other medical actions are carried out directly, but if the consultation is biased to be carried out online.

DISCUSSION

Tema 1 (Easy application practical and easy to use)

Online medications and treatments are increasingly being used, as are oncology treatments. One of them is done to avoid COVID-19 infection (Tsamakis et al., 2020).

This is according to the statement of participants in addition to the use of easy and practical applications also fear of being infected if they visit the hospital too often. In addition, her time can also be used to do her daily work as a housewife.

The above statement is under the statement of the palliative care cadre of cancer patients, that during the COVID-19 pandemic it continues to help patients online, for fear of being infected with COVID-19. online even though it is not yet maxed out.

Online services include healthcare services provided using audio and video technology. It was originally developed to provide basic care to rural and underserved patients, but it turns out that an increase in patient satisfaction, providing efficient and quality care, and minimizing costs has also led to the higher implementation of telehealth. (Gajarawala & Pelkowski, 2021). Consultations delivered by phone and video are just as effective as face-to-face. Patient satisfaction with telephone and video consultations has also increased. In addition, teleconsultation saves patients more time in basic care consultations delivered by phone and video are just as effective as face-to-face. Patient satisfaction with telephone and video consultations has also increased. In addition, teleconsultation saves patients more time in basic care (Carrillo de Albornoz et al., 2021).

Seeing the conditions above, only one participant uses an online application, it is necessary to socialize patients and families about the use of online applications, so that they are able and willing to use online applications. This can help patients and families benefit from using the online application both at the time of registration and during consultation.

Theme 2 (Satisfactory service provided)

The telenursing method or online treatment in advanced cancer patients is one of the methods used in approaching families and patients during the COVID-19 pandemic so that patients and families avoid COVID-19 infection. Telenursing methods can be carried out if health workers and patients and families are also ready and supportive.

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Respondents used digital health technologies related to clinical information systems, mobile networks, text messaging, teleconferencing, and Wi-Fi. The technology is used to communicate with healthcare workers, access web- or mobile-based palliative care resources, collect or manage patient data, and provide education-related information. (Mills et al., 2021).

Currently, the DKI Jakarta government also facilitates online applications and consultations can be via the telephone, Whatsapp, or other social media. But those who take advantage of the facility are still very few, where out of 6 participants only 1 o participants use it.

This will be a problem for families who do not master technology and indeed prefer and are more satisfied with the face-to-face method, so it is necessary to socialize with patients and families regarding the use of online applications and online consultation methods through the media they like. COVID-19 has become a significant economic problem, affecting their income. (Thom et al., 2021). The same thing was also expressed by participants that the cost of buying data and credit is also sometimes a problem for participants who do not use it.

The results of the review of 10 articles found that the form of nursing services with telenursing proves that distance services can save time and funding but for unsatisfactory quality related to the implementation of nursing services (Afik & Pandin, 2021).

Knowledge and communication skills via telephone should be improved according to the needs of the patient. Telenursing methods can be developed to find better ways to communicate with patients after the hospitalization process to prevent clients from returning to the hospital. Telenursing requires an integrated system to support telemonitoring so that clients can be monitored on an ongoing basis to maintain patient health (Piscesiana & Afriyani, 2020).

Seeing the conditions above, the telenursing method can be done, it's just that it still pays attention to the abilities of the family, patients, and health workers, which means that this telenursing method must still be evaluated and combined with the face-to-face method.

Obstacles to visiting are incorrect camera positioning, insufficient technical and staff resources, problems with three-way connectivity, and lack of call closure. Recommendations include emotional self-preparation, increased availability of technology, and preparing conversational topics. (Rose et al., 2022).

Virtual visits during the ongoing pandemic but also to continue virtual visits outside of pandemic conditions. This will benefit family members who suffer from poor health, live far away, cannot afford to travel, and those who have work and care commitments, thereby reducing access inequalities and promoting family-centered care. (Rose et al., 2022).

This can be a challenge for the government as well as health workers to conduct training or education related to mastery of communicating online properly so that telenursing can run optimally. Similarly, patients and families must be willing and learn to communicate online so that telenursing methods are as effective as face-to-face methods.

CONCLUSION

This study concludes that families and patients must be given socialization about mastering applications and online consultations so that they are able and willing to use these online methods.

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