Evaluating the Self-Care Agency of Patients Receiving Outpatient Chemotherapy

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Dramatic advances have been made in cancer treatment in recent years, enabling patients to leave the hospital more quickly and stay home while still undergoing treatment. As a result, the percentage of outpatients has been on the rise. Healthcare providers engaged in actual outpatient treatment, however, spend so much energy implementing daily procedures safely that they have little time remaining to provide patient education or carry out any other systematic patient support programs. Although self-care generally is believed to be what people do to help themselves, differences exist between Western countries and Japan in the interpretation of self-care. In Japan, obtaining necessary support from the family and friends that one relies on also is viewed as essential. Patients’ self-care agency must be assessed if nurses are to make the most of patients’ abilities; however, evaluation criteria for that purpose have yet to be established. Development of a method for evaluating the self-care agency of patients receiving chemotherapy on an outpatient basis is needed to ensure further advancement in this area of nursing.

Some studies concerning patients’ self-care use Orem’s theory, which revolves around a person-centered model in which the nurse identifies the patient’s self-care needs and then works as collaboratively as possible with that patient to meet those needs, to clarify the links between patients’ self-care behavior and their health conditions (Orem, 1991). A questionnaire concerning patients’ self-care agency and health conditions, prepared by Honjo (2000) on the basis of Orem’s theory, targeted middle-aged patients suffering from chronic illnesses and revealed links between patients’ self-care agency and their health conditions. Although the questionnaire was not designed specifically for outpatient chemotherapy, the factor most strongly related to self-care agency was a sense of fulfillment. That suggests a need to incorporate a sense of fulfillment in patients’ self-care actions to ensure continuous health management. Education programs also are available that encourage patients to take self-care actions in response to side effects of chemotherapy. For instance, a care package is available that provides patients with basic knowledge and information concerning the side effects of chemotherapy and techniques to cope with them, in addition to providing a nurses’ telephone counseling service (Larson et al., 1998). In Larson et al. (1998), mouth inflammation and other side effects showed signs of improvement with use of such education programs.

In Western countries, several questionnaires have been formulated to assess patients’ self-care agency, including the Perceived Self-Care Agency Questionnaire (Hanson & Bickel, 1985), Denyes Self-Care Agency Instrument (Denyes, 1982), Appraisal of Self-Care Agency (Evers, Isenberg, Philipsen, Senten, 1985), and the Praisal of Self-Care Agency (Evers, Isenberg, Philipsen, Senten, 1985). In Larson et al. (1998), mouth inflammation and other side effects showed signs of improvement with use of such education programs.

At a Glance

− Nurses’ cultural viewpoints may affect their evaluation of the self-care agency of patients receiving chemotherapy on an outpatient basis.
− Nurses can make use of patients’ self-care agency to control the side effects of chemotherapy.
− In the context of the Japanese culture, patients who rely on their families are seen as having higher self-care agency.

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Digital Object Identifier: 10.1188/11.CJON.668-673