

# BMF CP58: Assessing the needs of healthcare information for assisting family caregivers in cancer fear management

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“[...] under good care and continuing using the panacea, Kingfisher’s appetite for fish had returned. The birds brought tasty fat carp, and so he recovered quickly.”

– In: “Kingfisher’s No-Fish Dietary”; [The Kingfisher Story Collection](#) [1]

## Introduction

The supportive care needs of partners and caregivers of cancer patients are categorized into four domains, namely: 1) emotional and relational needs, 2) practical needs, 3) work and social needs, and 4) healthcare and illness-related needs [2]. Among all aspects, the unmet needs of healthcare information from the healthcare and illness-related domains may affect the family caregiver’s (FCG) role in reducing fear among female cancer patients from the domain of emotional and relational needs.

The current study aims to examine how types of demanded healthcare information affect the FCG’s role in reducing the fear of female cancer patients (i.e., cancer-specific information, caregiver-specific information, therapy-specific information, information on cancer physical needs, information on alternative therapies, and information on support services).

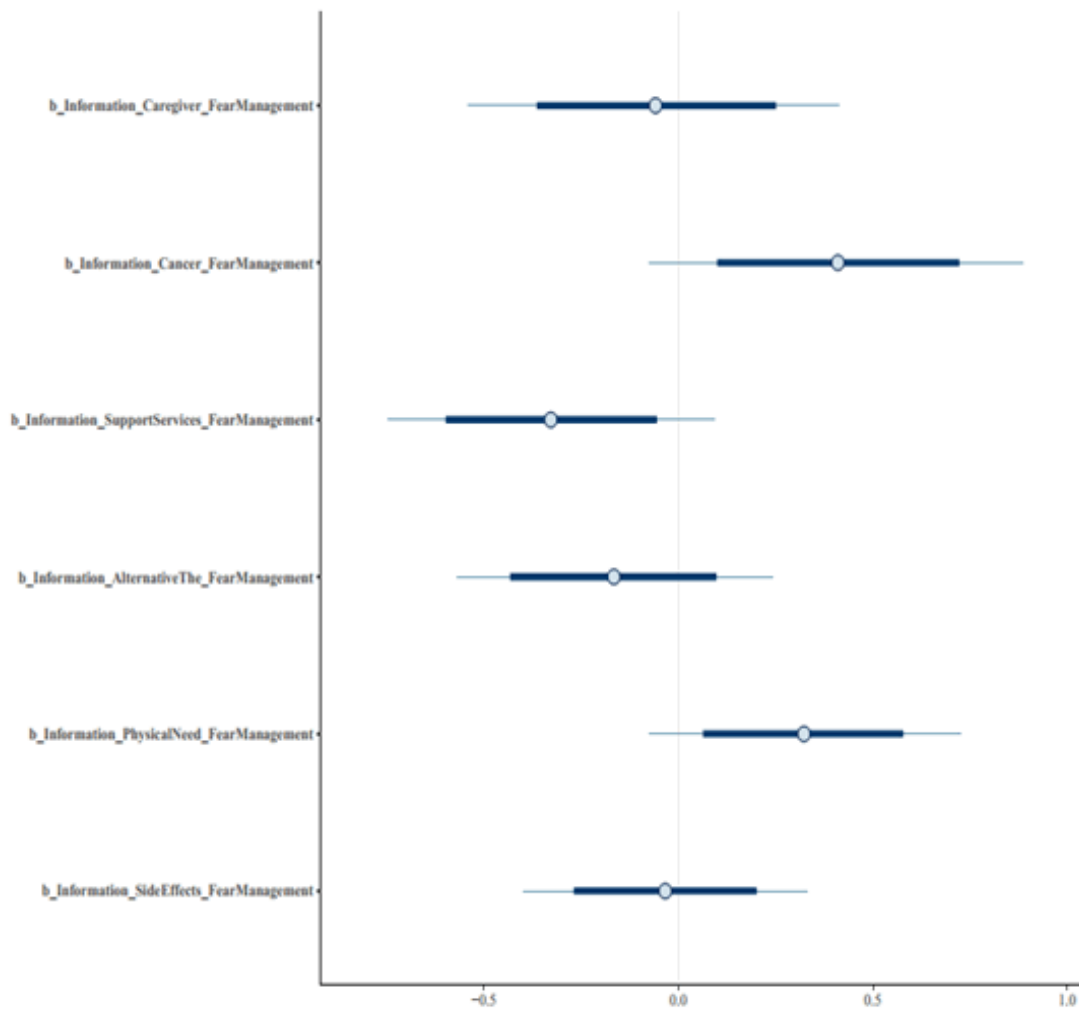
The Ethical Committee of the Faculty of Medicine, Widya Mandala Surabaya Catholic University, East Java, Indonesia, has reviewed this study protocol with an ethical clearance registered certificate of 080/WM12/KEPK/DOSEN/T/2020. The data collection procedure implemented ethical aspects of human subject protection, risk management, anonymity, confidentiality, beneficence, justice, and fidelity. Informed consent was given to all respondents before study participation.

## **Materials and method**

The mindsponge theory was used in conceptual development and interpretation [3]. Bayesian Mindsponge Framework (BMF) analytics was used for statistical analysis on a dataset of 48 spouses (husbands) and 12 other family members (n = 60) in five congested communities of Surabaya, Indonesia [4]. The nursing team at Widya Mandala Surabaya Catholic University, East Java, Indonesia, collected and processed the dataset. The bayesvl R package, aided by the Markov chain Monte Carlo (MCMC) algorithm, was employed for statistical analyses [5]. For more information on BMF analytics, portal users can refer to the following documents [6,7].

## **Findings**

Among the six types of healthcare information, FCGs with higher demand for cancer-specific information and information on cancer physical needs are more likely to need support in reducing the fear of female cancer patients. Meanwhile, FCGs with a higher demand for information on support services are less likely to need support to reduce cancer patients' fear. Other types of information have ambiguous effects on the need for support in reducing cancer patients' fear (see Figure 1).



**Figure 1.** Coefficients' posterior distributions

### Collaboration procedure

Portal users should follow these steps for registering to participate in this research project:

1. Create an account on the website (preferably using an institution email).
2. In the Comment section below this post, put down your name, affiliation, and desired role in the project.
3. Patiently wait for the formal agreement on the project from the AISDL mentor.

If you have further inquiries, don't hesitate to get in touch with us at

[aisdl\\_team@mindsponge.info](mailto:aisdl_team@mindsponge.info)

If you have been invited to join the project by an AISDL member, you are still encouraged to follow the above formal steps.

All the resources for conducting and writing the research manuscript will be distributed upon project participation.

Project coordinator: ***Ni Putu Wulan Purnama Sari***.

AISDL mentor for this project: Minh-Hoang Nguyen.

A nursing practitioner from the Installation of Central Surgery and Anesthesia, Regional Public Hospital of Bali Mandara, Denpasar, Bali, Indonesia, has joined this project: Pande Made Arbi Yudamuckti.

The research project strictly adheres to scientific integrity standards, including authorship rights and obligations, without incurring an economic burden at participants' expenses.

## References

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