

Research proposal

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Introduction

Palliative care (PC), as defined by the World Health Organization (WHO, 2018), is an approach that improves the quality of life of patients and their families facing problems associated with life-threatening illness. It focuses on the prevention and relief of suffering through early identification, comprehensive assessment, and management of pain and other physical, psychosocial, and spiritual problems. The primary goal of palliative care is not curative treatment, but to provide comfort and ensure the highest possible quality of life for patients and their families.

In recent decades, the demand for palliative care has increased significantly. As there is rising burden of non-communicable diseases such as cancer, cardiovascular diseases, renal failure, and neurological disorders. With advances in medical science, life expectancy has increased, resulting in a growing number of individuals living with chronic and life-limiting illnesses. This has created a greater need for comprehensive palliative care services across healthcare settings.

Background of the study

Palliative care is needed to be provided from the point when a disease is diagnosed to the end of life. There is enough evidence that suggests that palliative care focuses on the management of symptoms, psychosocial support. It is help with decision making , has the potential to improve the quality of care and reduce the use of medical services. In a study conducted by Ermeen K. Wani in 2022 said that Each year 56.8 million people need palliative care, 76% of whom live in low and middle income countries. Globally ,it is estimated that palliative care was needed in 45.3% of all deaths which occurred in 2017[1]

Justification of study

Patient relatives play a crucial role in the care of individuals with serious illnesses. They are often responsible for making healthcare decisions, providing emotional support, and managing day-to-day care. Their understanding and perception of palliative care significantly influence the utilization of such services. Adequate knowledge among patient relatives can lead to better decision-making, improved symptom management, and enhanced quality of life for patients. On the other hand, negative attitudes or misconceptions may result in delayed referrals, unnecessary interventions, and increased suffering.

Problem Statement

A study to assess the knowledge and attitude among patient relatives regarding Palliative care in a selected oncology hospital ,Kolkata ,West Bengal.

Aim of the study

To determine the knowledge and attitude of patient relatives about palliative care.

Objectives of the Study

To assess the level of knowledge among patient relatives regarding palliative care.

To assess the attitude of patient relatives toward palliative care.

To find the relationship between knowledge and attitude of patient relatives regarding palliative care.

Literature Review

Kumari K, Kalyani CV, Jaju R, Arnav A, Kahkasha, Kumar J, Sharanbasappa, Rao SK (2025) conducted by cross-sectional descriptive study among 200 registered nurses working in government and private healthcare facilities in Jharkhand were included in this study. A structured questionnaire comprising demographic questions, 20 knowledge-based multiple-choice questions, and a 30-item attitude scale was used for data collection. Most nurses (57%) demonstrated moderate knowledge of palliative care, and 79% of the participants showed a positive attitude toward palliative care.

Barad D, Panda K, Satpathy S, Jena N, Behera N, Mustafa SG, Dey J, Kumar Prusty JB. (2023) conducted a descriptive study at SUM Nursing College, Bhubaneswar by using three tools (a self-structured questionnaire on sociodemographic data, a standardized questionnaire on knowledge, and a standardized questionnaire on attitude) to assess the level of knowledge and attitude among study participants toward PPC.

Altarawneh WM, Masa'deh R, Hamaideh SH, Saleh AM, Alhalaiqa F. (2023) conducted cross sectional study using an online self-report questionnaire data was collected from 228 nurses working at four hospitals in Amman. The four hospitals were from three different healthcare sectors: one public, one educational, and two private hospitals.

Variables

Research Variables-Knowledge and attitude of relatives of palliative care patient

Operational Definition

1. Knowledge- In this study knowledge refers to the level of correct knowledge score of patient relatives regarding Palliative care, measured by structured questionnaire which will be developed by the Researcher.

2. Attitude- In this study attitudes refers to the feelings, belief perceptions and acceptance of patient relatives toward Palliative Care as measured by a 5 point likert attitude Scale.

3. Patient relatives- In this study patient relatives refer to family members such as spouse, children, parents, siblings or primary caregivers who are directly involved in the care of patients admitted to the selected hospital during the period of data collection.

4. Palliative Care- In this study Palliative care refers to supportive care provided to patients with stage four cancer to improve quality of life as defined by the World Health Organization.

Research Methodology

Research approach: Quantitative Approach

Research Design : Descriptive research design

Settings: Tata medical Center Kolkata, West Bengal

Population: The target population of the study is relatives of palliative care patient above 18 years.

Sample: Patient relatives above 18 years who meet the inclusion criteria

Sampling Technique: Purposive sampling

Sampling Criteria

Inclusion Criteria:

All adult Relatives of palliative patient

Those who are willing to participate and provide consent

Exclusion Criteria : In this study

People with cognitive impairment

People do not know English, Hindi, Bengali

Sample Size Calculation: Total sample size 100

Tools and Techniques for Data Collection:

Section A: Socio-demographic data

Section B: Structured questionnaire for knowledge

Section C: Likert scale for attitude

Steps of Data collection:

The data for final study will be collected from Patient relatives of the selected Hospital

The following steps will be followed

- Self-introduction will be given to the participants and rapport will be established
- Purpose and nature of the study will be explained to each participant.
- Informed consent will be obtained from each participant and they will be assured about the confidentiality of their responses.
- All the participants will undergo detail history taking by structured questionnaire.
- Data will be collected and analysed.

plan for Statistical analysis

Descriptive statistics-Mean, median, and Frequency percentage

Inferential statistics-Chi Square test

References

1. Wani KE, Kumar D, Sahni B, Bavoria S, Bala K. Perceptions of healthcare workers regarding palliative care services in a tertiary care teaching hospital in North India – A mixed-methods observational study. *Indian J Palliat Care* 2022;28:354-9.
2. Filippou P, Hugar LA, Louwers R, Pomper A, Chisolm S, Smith AB, Gore JL, Gilbert SM. Palliative care knowledge, attitudes, and experiences amongst patients with bladder cancer and their caregivers. *Urol Oncol*. 2023 Feb;41(2):108.e1-108.e9. doi: 10.1016/j.urolonc.2022.10.013. Epub 2022 Dec 16.
3. Altarawneh WM, Masa'deh R, Hamaideh SH, Saleh AM, Alhalaiqa F. Nurses' knowledge, attitudes and practices towards palliative care provided to patients diagnosed with cancer. *PLoS One*. 2023 Oct30