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Using the Satir Family Tools to Reduce Burnout in Family Caregiver

運用沙維雅的家庭治療工具舒緩家庭照顧者的倦怠感

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Abstract

Self-esteem problems of family caregivers have been documented in the literature, but none of the studies linked caregiver burnout with the Satir family tools. The purposes of this research study is to test a nursing intervention model, Self-directed skills (SDS), to determine the effectiveness of the model on primary family caregivers (PFCs) who provide 60 to 75 percent of the care of an African-American homebound frail elderly relative without relief for greater than six months. The research question tested was: What is the effect of the SDS intervention on family caregiver burnout of African-American family caregivers of homebound frail elderly? The research hypotheses for the study were (1). Subjects in the experimental study group will report a higher level of self-esteem after administration of the SDS intervention compared to subjects in the control group. (2). There will be decreased caregiver burnout in experimental subjects after SDS intervention compared to subjects in the control group. The sample consisted of 60 PFCs selected by random sampling (30 experimental and 30 control group participants). This article will focus on the qualitative data generated from the study of the thirty experimental group research participants. The results indicated the PFC's burnout score was statistically significant post intervention. The findings also suggested that coping patterns of African-American PFCs of frail elderly in the home is costly, both physically and emotionally.

Nursing implications from this study are focused on nursing practice, theory, and education. Nursing Practice – Change in PFCs should be evaluated at 6 month intervals; health care policies and outcome measure should be designed to support and help pay PFCs for home care of the frail elderly; home care nurses need to increase their sensitivity to PFCs spiritual dimensions; and counseling and coordinating PFCs and care recipients needs can be addressed by community case managers. Nursing theory and education – The Satir Model is teachable to family therapists and nurses in both undergraduate and graduate programs; nurses who are educated in the Satir Model can facilitate change in PFCs and the caregiving behavior; family health care can be promoted by using the Satir Model as a nursing intervention tool. Nursing research questions generated from the qualitative data were: what roles does religiosity play as a coping strategy for African-American PFCs in reducing caregiver burnout? And should the personal accomplishment subscale on the Maslach Burnout Inventory be sensitive enough to note caregiver burnout differences among PFCs pre- and post-interventions?

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本文描述了一個驗證自我導向技能訓練(SDS)對舒緩家庭照顧者倦怠感的有效性研究。研究對象是非洲裔美國家庭照顧者,他們為家中的體弱長者提供六到七成的照顧,而且在參與研究前的6個月持續提供照顧。有60位照顧者參與了研究,被隨機分配到實驗組和控制組,其中實驗組接受自我導向技能訓練,而控制組不參加,然後比較兩組的倦怠感和自尊感。研究發現參與了自我導向技能訓練的照顧者明顯比不參加者倦怠感低,證明自我導向技能訓練能有效幫助家庭照顧者舒緩倦怠感。

者討論了如何在健康護理干預中更好地運用沙維雅模式來提供自我導向技能訓練。首先,訓練效果可能需要6個月才能顯現出來,而且要運用有效的測量工具,個案經理在整個過程中可以發揮作用。其次,經過適當的培訓,護士和家庭治療者能學會在自我導向技能訓練中運用沙維雅模式來促進家庭照顧者的改變,所以沙維雅模式在護理健康干預中可以有非常有效的運用。最後,作者對未來的研究提出了建議,例如進一

步探索有效且敏感的測量工具等。

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