

# Self Care Abilities of Patients in a Referral Hospital of North India

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*A descriptive study was undertaken to assess the self-care abilities among the admitted patients at Nehru Hospital, PGIMER Chandigarh during the year 2004. Various self-care abilities studied were regarding feeding, bathing, dressing and toileting. Out of total 650 patients included in the study, 394 (45.2%) had feeding deficit, 291 (44.84%) had bathing deficit, 238 (36.73%) had dressing deficit and 197 (31.88%) had the deficit of toileting. As per the severity of deficit, mild deficit was present in 121 (19.6%), moderate in 91 (14.70%) and severe deficit was present in 59 (9.6%) of the patients.*

## Introduction

Self-care is the voluntary regulation of one's own human functioning or development that is necessary for individual to maintain life, health and well-being. Self care refers to the individual assuming preventive or therapeutic health care activities, often in collaboration with health care professionals. It plays an important role in the overall management of disease. The essence of self-care is control, responsibility, freedom, expanded option and an improved quality of life. Disease, injury and mental or physical malfunctioning may limit what a person can do for himself, since such state may limit his ability to reason, to make decisions and to engage in activity to accomplish self-care goals. The changes in the current health care delivery system have influenced the decision of nursing profession to place an increased emphasis on promoting self-care. With this background the present study was

undertaken with an objective to assess and to describe the self care abilities of the hospitalised patients.

## Materials and Methods

The study was conducted at Nehru Hospital, Post Graduate Institute of Medical Education and Research, Chandigarh during the year 2004. A total of 650 patients from all the wards of the hospital except Psychiatric ward, Paediatric / Neonatology unit and de-addiction unit were included in the study. Data was collected through observation, questioning and record analysis. Various tools used to collect data were: *Patient profile sheet* containing six items of identification and seven items of demographic data; *General assessment proforma* having seven items including information about vital signs and therapeutic profile of the subjects; *Selfcare ability assessment scale* including four items of daily activities living i.e. feeding, bathing, dressing and toileting. The deficit was described as **no deficit**, **mild**, **moderate** and **severe deficit** i.e. doing activities independently, performing activities

with assistance, nurses / relatives doing the activities with patients' cooperation and no efforts performed by the patients in doing the activities respectively. Descriptive and inferential statistics was used to analyse the data.

## Results and Discussion

The mean age of the subjects was  $42.79 \pm 15.7$  years. There were more (59.54%) male patients. The mean income of the subjects was Rs 8530  $\pm$  9.07 per month. About half (50.23%) of the subjects were from urban area. Majority of the subjects had problems pertaining to musculoskeletal (12.31%), gastrointestinal (12.15%) and cancer (11.54%). Maximum number of the subjects (90.61%) were adult. The average pulse, temperature and respiration of the subjects under study were  $86.1 \pm 15.6/\text{min}$ ,  $37.5^\circ\text{C} \pm 0.2^\circ\text{C}$  and  $21.86 \pm 2.6$  7min respectively. The mean systolic and diastolic blood pressure was  $121.70 \pm 15.6$  mmHg and  $78.14 \pm 9.6$  mmHg, respectively. Although most of the subjects (80.31%) were on oral intake, others were on Ryle's tube, jejunostomy and gastrostomy

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feed and also on IV fluids. Five hundred and fourteen (79.08%) subjects were voiding themselves and 73.54% subjects had normal bowel elimination whereas 22.77% had constipation. The various causes of activity elimination were weakness, paralysis, IV fluids, surgery, edema, dyspnea, drains, foot problems, abdominal distention, vaginal bleeding, fatigue, loss of vision, fever, stiffness and other therapeutic modalities.

More than 50% of the subjects had no feeding or bathing problems and more than 60% of the subjects were not dependent for dressing and toileting. In total it was found that 346 (56.08%) of the subjects were able to take care of themselves for activities of daily living whereas 121 (19.6%) needed little assistance from nurses / relatives in doing so. In 91 (14.75%) subjects nurses / relatives were doing the activities with patient's cooperation, whereas 59 (9.56%) subjects were totally dependent upon the nurses / relatives. However the opposite results have been reported by Jonie Kayser in which 72% of the patients

were totally dependent, 22% were cooperating with the nurses / relatives in doing the activities and only 8% required assistance in performing the activities of daily living. In the present study it was found that 294 (45.24%) had feeding deficit, 291 (44.84%) had bathing deficit, 238 (36.72%) had dressing deficit and 197 (31.87%) had deficit in toileting. In another study conducted by Manton it was found that 11% of the patients had deficit in eating 45% had bathing deficit which is similar to the present study, 22% had deficit in dressing and 25% were deficit in toileting. Yet another study has revealed that 17.5% of the patients had eating deficit each in eating and dressing, 27% had bathing deficit, and 25% were deficit in toileting. As far as wards were concerned, all the (100%) patients were independent in radiotherapy ward in doing the activities of daily living. Majority of the subjects i.e. 100% were dependent in intensive care unit and emergency complex.

With the in-depth study of self capabilities, the investigators were able to identify vari-

ous areas in self care deficit pertaining to feeding, bathing, dressing and toileting. Based upon these findings appropriate planning can be done in future as the self care deficits of the patients are of paramount importance not only in planning their care but also in developing their self care abilities. The idea is further supported in literature, as self-care is a growing dimension of health care that needs and deserves further research and innovation.

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