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Assessment of effectiveness of meditation on level of stress among women with reproductive organ cancer

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Abstract

The journey with cancer is a long, stressful and strenuous one. The diagnosis, treatment, and the challenges of survivorship all have potential to increase levels of distress that might influence their adaptation and possibly the course of their disease. The treatment procedure itself may be determined to the emotional well-being of patients. This is where complementary and alternative therapy has stepped into offer holistic treatment for stress reduction. Nurses are in ideal position to assist individuals in the management of stress in their lives.

Objectives: 1. To assess the pre-test level of stress among women with reproductive organ cancer in the experimental and control group.

2. To assess the post-test level of stress among women with reproductive organ cancer in the experimental group and control group.

3. To determine the effectiveness of meditation on stress among women with reproductive organ cancer.

4. To associate the post-test level of stress among women with reproductive organ cancer with their demographic variables.

Methods: The study was conducted by adopting a Quasi-experimental, non-equivalent control group pre and post-test design. 60 women who fulfilled the inclusion criteria were selected by using Non-probability purposive sampling technique.

Results: The results showed highly significant decrease in the level of stress following meditation at $P < 0.001$ level.

Keywords: meditation, stress, reproductive organ cancer

Introduction

“When you treat a disease, First treat the mind”- Chen Jen

Illness changes our relationship to the world. Cancer is an upsetting experience as coping with the symptoms, disability, diagnosis, treatment and their future is a harrowing challenge for the significant proportion of the population. Stress may be viewed as an individual's reaction to any change that requires an adjustment or response, which can be physical and mental (or) emotional. Method of coping with stress is plenty. Among that a single, relatively brief and cost-effective programme that can potentially be applied to cancer patients was meditation.

Need for the study

Stress is often called ‘silent killer’ because the effects may not be readily apparent and may either go undiagnosed or take a long time before permanent damage is done.

Hence stress management has become a life style of the present day. New diagnosis of cancer can be a shock, making to feel out of control and over whelmed especially, in women affected with reproductive organ cancer. Repression and defensiveness increases in women after the diagnosis of cancer is made. Mindfulness meditation, often recommended as an antidote to the stress and pain of chronic diseases, a practice designed to focus one's attention intensely on the moment, noting thoughts and feelings as they occur but refining from judging or acting on those thoughts and feelings. The intent is to deepen awareness of the present, develop skills of focused attention, and cultivate positive emotions.

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Statement of the problem

A study to assess the effectiveness of meditation on level of stress among women with reproductive organ cancer in selected hospital, Chennai.

Objectives

1. To assess the pre-test level of stress among women with reproductive organ cancer in the experimental and control group.
2. To assess the post-test level of stress among women with reproductive organ cancer in the experimental group and control group.
3. To determine the effectiveness of meditation on stress among women with reproductive organ cancer.
4. To associate the post-test level of stress among women with reproductive organ cancer with their demographic variables.

Hypothesis

RH₁ There will be a significant difference in the level of stress among women with reproductive organ cancer who do meditation and who do not.

RH₂ There will be a significant association in the post test level of stress among women with reproductive organ cancer with their demographic variables.

Materials and Methods

Research Approach: Evaluative approach

Research Design: Quasi-experimental non-equivalent control group pre-test and post-test design.

Setting: The study was conducted in selected hospital, Chennai.

Sample: The study sample comprised of women admitted with cervical and ovarian cancer who fulfilled the inclusion criteria.

Sample size: The sample size was 60 women with reproductive organ cancer. In that 30 women were in experimental group and 30 women were in Control group. The samples were further stratified in to 15 women with

cervical cancer and 15 women with ovarian cancer in both experimental and control group.

Sampling technique: Non probability purposive sampling technique

Criteria for sample selection

Inclusion Criteria

1. Women who were newly diagnosed to have reproductive organ cancer and admitted in the ward within a week.
2. Women who were willing to participate in the study.
3. Women who can read and write Tamil.

Exclusion Criteria

1. Women who were psychologically unstable.
2. Women who were seriously ill.
3. Women who were undergone surgery for cervical and ovarian cancer.

Description of the tool

Section A

It consists of demographic variables such as age, Marital Status, Number of Children, Educational status, Occupation, Income and site of cancer.

Section B

John D. Catherine & T .Mac Arthur’s perceived stress scale is a standardized tool which was modified by the investigator after extensive review of literature and consultation with medical and nursing experts. The scale has ten questions with 5 positive items and 5 negative items. Each item was self-interviewed. The minimum score is 1 and the maximum score is 10. The total score is 50. To evaluate the level of stress the score was interpreted as follows.

- 1- 20 – Normal
- 21- 30 – Mild
- 31- 40 – Moderate
- 41- 50 – Severe

Data analysis and interpretation

Table 1: Frequency and percentage distribution of pre-test level of stress among women with reproductive organ cancer in the experimental and control group n=60

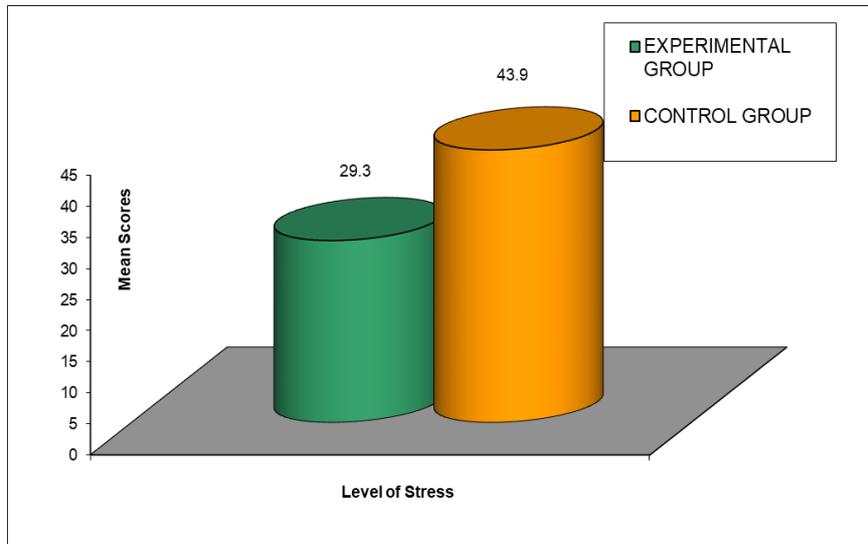
S. No	Levels of stress	Experimental group n=30				Control group n=30			
		Cervical cancer		Ovarian cancer		Cervical cancer		Ovarian cancer	
		No	%	No	%	No	%	No	%
1	Mild	0	0	0	0	0	0	0	0
2	Moderate	2	13.3	3	20	2	13.3	4	26.6
3	Severe	13	86.7	12	80	13	86.7	11	73.4

Table 2: Frequency and percentage distribution of post-test level of stress among women with reproductive organ cancer in the experimental and control group n=60

S. No	Levels of stress	Experimental group (n=30)				Control group (n=30)			
		Cervical cancer		Ovarian cancer		Cervical cancer		Ovarian cancer	
		No	%	No	%	No	%	No	%
1	Mild	11	73.4	10	66.7	0	0	0	0
2	Moderate	4	26.6	5	33.3	3	20	5	33.3
3	Severe	0	0	0	0	12	80	10	66.7

Table 3: Comparison of mean scores level of stress among women with reproductive organ cancer between experimental and control group n=60

S. No	Group	Mean	S.D	Mean difference	't' Value
1	Experimental group	29.30	5.84	14.6	t = 7.839, d.f = 58 ***p<0.001
2	Control group	43.9	4.8		

**Fig 1:** Comparison of mean scores level of stress between experimental and control group

There was no significant association of level of stress among women with reproductive organ cancer in experimental group, but the control group showed a significant association between the demographic variables like age and income among women with reproductive organ cancer.

Conclusion

The findings concludes that the women in the experimental group had significant reduction in the level of stress when compared with the control group.

Recommendations

1. Similar study can be conducted with large sample size.
2. Similar study can be conducted by using true experimental research design.
3. Similar study can be conducted in other medical and surgical conditions.

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