

PATIENT CARE: FAMILY SUPPORT AND IMPACT ON QUALITY OF LIFE IN PATIENTS WITH STROKE

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ABSTRACT

Stroke sufferers require effective healthcare to improve their quality of life. The role of the family is crucial in supporting stroke sufferers in their efforts to meet their needs and improve their quality of life. This study aims to investigate the role of family support in enhancing the quality of life for stroke patients. This research employs a *narrative review approach*. During the search process, researchers utilized two databases: *PubMed* and *EBSCO*. The results of the research show that support coming from the family can influence the emotions of stroke sufferers so that they are motivated to continue participating in treatment and rehabilitation. Apart from that, a relationship of mutual trust between the family and medical staff can foster independence and lead to positive outcomes in the therapy process. Conclusion: Social support has a significant impact on the quality of life of stroke patients and plays a role in increasing motivation for rehabilitation.

Keywords: Family support, Quality of life, Social support, Stroke.

INTRODUCTION

A stroke is a condition that can affect an individual's ability to carry out daily life processes. Stroke is a severe medical condition that occurs when the blood supply to part of the brain is cut off, which then causes brain cell death. Stroke can cause death or disability, depending on the severity and extent of the area affected by brain cell damage. Stroke is a public health problem throughout the world, with an increase in the prevalence of stroke sufferers every year (1).

According to the World Stroke Organization (WSO), stroke is the second leading cause of death in the world and the third leading cause of disability in the world. According to the World Health Organization (WHO), in 2002, the death rate caused by stroke was 56/100,000. Individuals aged 45 years have a risk of complications that can cause death, which is 15.6%, and this continues to increase every year (2). The prevalence of stroke in Indonesia in 2013 was 1,236,825 (7.0%) individuals diagnosed with stroke. West Java is the region with the most people suffering from stroke, namely 533,895 (16.6%) individuals.

The number of deaths (mortality) and disability-adjusted life-years (DALYs) due to stroke has increased substantially, with the majority of strokes occurring in lower-middle-income countries. According to the Centers for Disease Control and Prevention (CDC), the risk of death caused by stroke can also be influenced by age, gender, race, ethnicity, socioeconomic status, and the culture of a region. Apart from that, several risk factors can cause individuals to experience a stroke, including hypertension, diabetes mellitus, obesity, dyslipidemia, and unhealthy lifestyles (smoking, consuming alcohol, and lack of physical activity) (3).

Stroke is one of the causes of disturbances in the body's systems, both physiologically and psychologically, such as physical disorders (weakness or paralysis in one or more limbs), loss of sensation and coordination in the limbs, swallowing disorders (dysphagia), and speech problems (aphasia). vision problems (hemianopia and impaired sense of security and comfort (pain). Apart from that, stroke can also cause cognitive and emotional disorders such as decreased ability to think, learn, remember, and solve problems, as well as anxiety and depression. Some descriptions of the cognitive impact of stroke include attention deficit, executive dysfunction, memory loss, and apraxia (4).

Therefore, patients with stroke require good health care to prevent complications that can cause death. Most stroke sufferers can prevent complications by modifying risk factors that can make the condition worse. One of the preventive measures that can be taken in patients with stroke is to improve a healthy lifestyle and control blood sugar, blood pressure, and cholesterol levels to minimize the occurrence of blockages in blood vessels (atherosclerosis), which can worsen the individual's overall health condition. (5)(1).

Making lifestyle changes can have a good impact on stroke sufferers. Besides avoiding complications, lifestyle changes can improve the quality of life for individuals with stroke. Quality of life is a concept that broadly reflects a person's physical, mental, social, and emotional health. Quality of life is influenced by various factors, including the severity and location of the stroke, the level of recovery and rehabilitation, the presence of comorbidities and complications, the availability of social support and resources, and the patient's coping skills. In patients with stroke, improving the quality of life is something that is of particular concern and a challenge in maintaining the stability of the body's condition. Comprehensive and individual care that focuses not only on medical needs but also on psychosocial needs obtained from family and social support is essential to improving the quality of life for stroke sufferers. Family or social support can provide assistance in meeting the needs of patients with stroke.

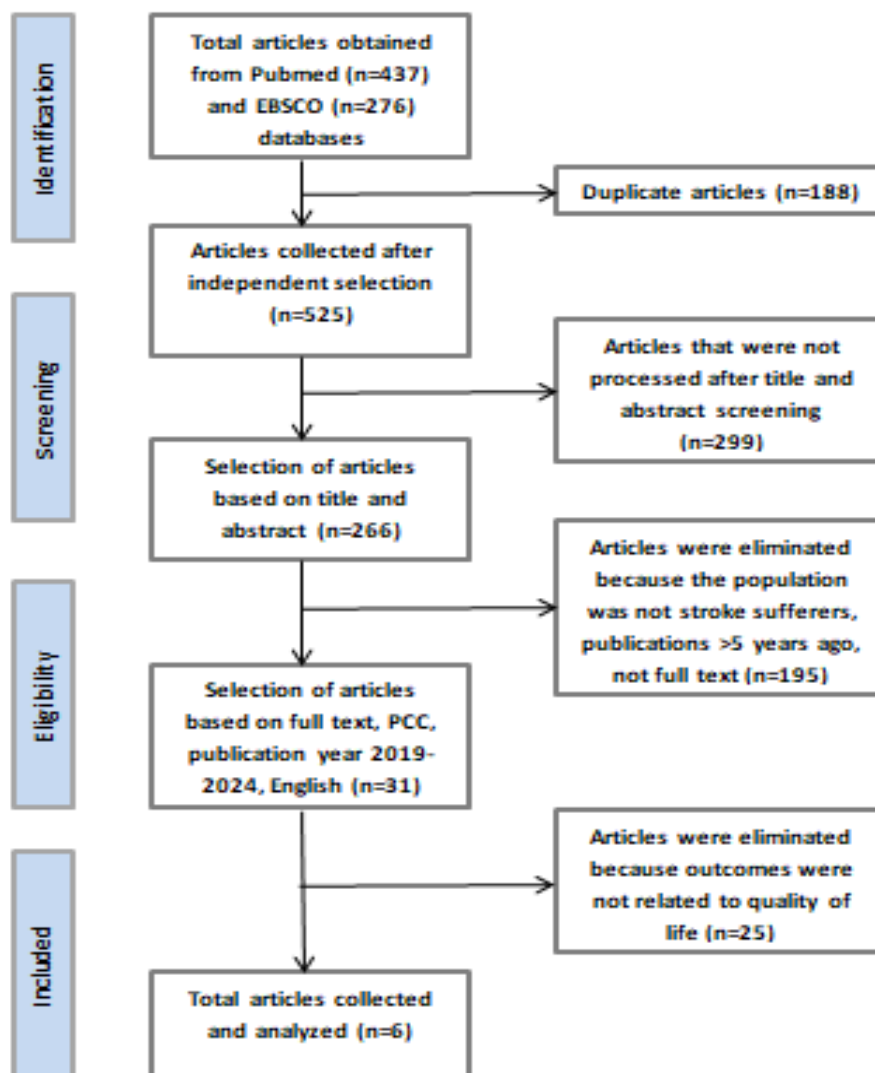
Apart from that, support from family plays a vital role in helping to improve the quality of life for stroke sufferers. Family support can include providing information, practical help, and emotional support to stroke sufferers. Family members can play a role in finding information related to stroke and assisting in stroke sufferers' daily living activities (activities of daily living). Families can also provide emotional support to stroke sufferers by being listeners and encouraging them to express their feelings. The role of family support has a significant impact on stroke sufferers in overcoming anxiety, sadness, and even depression that may arise in stroke sufferers (6).

However, there is a lack of research explaining the relationship between family roles and efforts to improve the quality of life for stroke sufferers. Family members often demonstrate limited willingness to actively engage in understanding the condition of stroke patients, instead relying primarily on medical services for care and support. Therefore, this literature review aims to determine the impact of family support on improving the quality of life for stroke patients.

METHODS

This research uses a narrative review approach. In the process of searching for articles, researchers used two databases, PubMed and EBSCO, using keywords that have been

adapted to the Mesh Terms: “family support”[MeSH Terms] OR (“social support”[MeSH Terms] AND (“quality of life”[MeSH Terms] OR (“well being”[MeSH Terms]) AND (“stroke patients”[MeSH Terms]) OR (“stroke survivors”[MeSH Terms])). This study employed the PCC framework to develop eligibility criteria: Population, stroke patients; Concept, social or family support; Context, quality of life. The inclusion criteria for this study are stroke patients, social support or family support, quality of life, articles published within the last five years (2019-2024), open access, and published in English. Meanwhile, the exclusion criteria include literature reviews, repositories, and articles that are irrelevant to the research topic. This research aims to investigate the impact of social support on the quality of life of stroke patients. Articles were then extracted into the following categories: Design, Sample, Variable, Instrument, and Analysis (DSVIA) (Table 1).



RESULT

The reviewers identified 713 studies from three databases, namely PubMed, EBSCO. All studies were loaded, and 188 duplicates were removed, leaving 525. Two reviewers selected

articles based on titles and abstracts, removing 519 that did not meet the predefined inclusion criteria. Subsequently, the full texts of 6 articles were evaluated for eligibility, and reasons for excluding each article were provided. A total of 6 articles were analyzed in this study.

Table 1. The main result of this study

No .	Title, Year and Author of Article	Research purposes	Methods and Instruments	Research Population and Sample	Research result	Conclusion
1	Quality of life and social support: Perspectives of Saudi Arabian stroke survivors. Alshahrani A. M. (2020) Arab Saudi	This study assessed the quality of life and social support of Saudi Arabian people who suffered a stroke.	Method: Cross-sectional study and Correlation Instrument: Multidimensional Scale of Perceived Social Support (MSPSS) and World Health Organization QOL-BREF (WHOQOL-BREF)	Population : Stroke patients Sample: 123 patients	Respondents rated support from friends the lowest ($M = 3.63$, $SD = 1.52$). Only family income ($F = 2.81$, $p = .042$) and family structure ($t = 2.61$, $p = .015$) were significantly related to respondents' perceived social support. Respondents with monthly family income below 10,000 SAR had worse environmental domains than patients with higher monthly family income. The physical domain on the WHOQOL-BREF was	This research provides evidence of the influence of social support on the quality of life of stroke sufferers in Saudi Arabia.

					considered the lowest domain by respondents, with an overall average score of 28.57.	
2	<p>Social work support and unmet social needs in life after stroke: a cross-sectional exploratory study.</p> <p>Lehnerer, S., et al. (2019).</p> <p>Jerma</p>	<p>This study evaluates the impact of providing social support in relation to the quality of life of stroke patients.</p>	<p>Method: Cross-sectional exploratory study</p> <p>Instrument: Nikolaus score (social situation), the EuroQoL (quality of life), the German Burden Scale for Family Caregivers (caregiver burden), the modified Rankin Scale (disability/dependence), the Stroke Impact Scale (function and degree of disability), and the Stroke Survivor Needs Questionnaire (unmet needs)</p>	<p>Population : Stroke rehabilitation patients</p> <p>Sample: 57 patients</p>	<p>Patients with lower-than-average Nikolaus scores had higher levels of disability. Thirty percent of all patients have never received professional social support.</p>	<p>Unmet social needs are associated with a lower quality of life and a higher caregiving burden.</p>
3	<p>Social support, functional outcome and quality of life among stroke survivors in an urban area.</p> <p>Butsing, N., et al. (2019).</p> <p>Thailand</p>	<p>This study aims to assess quality of life and its specific domains, as well as identify the impact of functional outcomes and social support on quality of life.</p>	<p>Method: Cross-sectional study</p> <p>Instrument: WHOQOL-BREF, Barthel Index, the 16-item social support questionnaire</p>	<p>Population : stroke patient</p> <p>Sample: 358 stroke patients</p>	<p>The lowest average quality of life scores were in the physical and psychological domains. Quality of life scores among stroke respondents will be lower when patients have worse functional outcomes.</p>	<p>Social and functional support influence the quality of life of stroke sufferers.</p>

					Emotional and functional support was found to be the strongest predictor of psychological health in this study. It should be used to promote the recovery process and prevent stroke patients from avoidable complications.	
4	Relationship between social capital and quality of life among adult stroke patients: a cross-sectional study in Anhui Province, China. Ji, K., Bai, Z., Zhao, Y., Sang, L., Wang, D., & Chen, R. (2022). China	This study aims to explore the relationship between social capital and quality of life among stroke patients in Anhui Province, China.	Method: Cross-sectional study Instrument: Stroke Impact Scale (SIS) questionnaire and Integrated Questionnaire for the Measurement of Social Capital (SC-IQ)	Population : 420 stroke patients Sample : 340 stroke patients	The quality of life scores of the higher social capital group increased by 28.28, 21.17, 13.46, 25.56, and 19.30, respectively, on each dimension when compared with the lower social capital group.	Patients with higher levels of social connectedness, social support, trust, reciprocity, and cohesion had better quality of life.
5	Mediating Effects of Rehabilitation Motivation	This study aims to identify the mediating effect of	Method : Cross-sectional descriptive study Instruments :	Population : Stroke patients	Results showed that social support's effect on	This study shows that social support from health professionals

	<p>between Social Support and Health-Related Quality of Life among Patients with Stroke. Int. J. Environ. Res. Public Health</p> <p>Lee, Y.; Won, M. (2022)</p>	<p>rehabilitation motivation on the relationship between social support and HRQoL in stroke patients.</p>	<p>HRQoL</p>	<p>aged over 19 years</p> <p>Sample : 176 stroke patients</p>	<p>HRQoL was mediated by rehabilitation motivation (B = 0.004, 95% bias-corrected bootstrap confidence interval = 0.002, 0.006). Social support for stroke patients had a positive effect on HRQoL, and rehabilitation motivation was found to have a partial mediating effect on this relationship.</p>	<p>and family after a stroke can improve patient HRQoL by encouraging positive rehabilitation motivation.</p>
6	<p>Analysis Support Families With Quality Of Life After Stroke Patients</p> <p>Saputro, H., Camo, M. I., Suraksono, B., Sari, D. K., & Kardjati, S. (2019).</p>	<p>The aim of this study was to determine the relationship between family support and the quality of life of post-stroke patients at the Karsa Husada Batu Neurology Clinic.</p>	<p>Method : Cross-Sectional study</p> <p>Instruments : n/i</p>	<p>Population : stroke patient</p> <p>Sample : 35 stroke patients</p>	<p>The research results showed that 16 respondents, or 45.8% of respondents, received sufficient family support. Respondents who had a sufficient quality of life were 15 respondents or 42.7%. With Spearman Rho, a significance value was</p>	<p>Post-stroke patients have physical and psychological health problems, level of dependency, social relationships, environment, and personal beliefs. Therefore, they need emotional support, appreciation, encouragement, and information, especially from the</p>

				obtained (p-value = 0.00) < ($\alpha = 0.05$), which was proven to be a relationship between family support and the quality of life of older adults after a stroke at the Karsa Husada Batu Neurology Polytechnic.	family as the closest people, so as to improve the quality of life of post-stroke patients.
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DISCUSSION

A stroke can cause motor paralysis, requiring the patient to rely on others for assistance with daily activities. Apart from that, it disrupts the function of mood and behavior. This sometimes causes patients to feel useless because of the many limitations they have due to the disease they suffer from. Therefore, evaluating the quality of life of stroke sufferers is essential. Quality of life is a complex concept of physical, mental, and social well-being, which is embedded in the context of culture, environment, and value systems (7).

In connection with the high incidence of stroke and its consequences, social support for stroke patients is very important in recovering functional status to a large extent because it has a positive impact on quality of life. Social support has been extensively researched in relation to health and well-being. The research results by Alshahrani (2020) (8) indicated that social support has a positive effect on the quality of life of adult stroke survivors in Saudi Arabia. Findings reveal that receiving social support from relatives can improve psychological health. Support coming from the family was found to be a predictor of improved social relationships and environmental domains. Previous research found that stroke patients who communicate less with other people will experience feelings of loneliness over time. Therefore, research by Ji et al. (2022) suggests that various types of support systems, consisting of both mental and material support, should be developed. Additionally, patients' relatives, family members, friends, and neighbors should be encouraged to have more frequent contact with them (9).

According to research by Butsing et al. (2019) (10), social support can be categorized into four dimensions: emotional, informational, functional, and financial support. Emotional and functional support was the study's strongest predictor of psychological health. It should be used to promote the recovery process and prevent stroke patients from avoidable complications. Previous research assessing the quality of life of stroke patients using the

WHOQOL-BREF questionnaire also reported that patients who had caregivers had higher psychological and social relationship scores than patients without caregivers (11).

Research by Lee & Won (2022) suggests that social support has a positive relationship with rehabilitation motivation. Stroke patients with high levels of social support exhibit higher rehabilitation motivation, and social support from family members has also been found to have a positive effect on rehabilitation motivation (12). In particular, stroke patients may be motivated to continue participating in rehabilitation treatment while receiving support from healthcare professionals for their goals and experiences of success and failure of rehabilitation treatment. In stroke patients with higher social support, HRQoL was found to improve in those with higher rehabilitation motivation compared to those with lower rehabilitation motivation. Therefore, improving functional outcomes and social support is crucial for enhancing the quality of life for individuals affected by stroke.

In addition, previous research indicates that stroke patients who have a trusting relationship with family members and medical personnel exhibit an optimistic mood and behavior, which promotes independence, disease coping, and positive therapy outcomes (13). A study also showed that socially isolated stroke patients were more likely to experience recurrent strokes and had a higher mortality rate (14). Therefore, an excellent social support and trust system has a positive role in the health of stroke patients. The possible mechanism is that social support and trust foster mutual respect and support in social interactions, making it easier to achieve self-satisfaction and engage in self-reflection.

CONCLUSION

This study reveals the significant impact of social support on the quality of life of stroke patients. High social support greatly influences the emotional condition and motivation of stroke patients during rehabilitation and their motivation to improve their functional status. In addition to improving the patient's functional abilities, this can also help prepare the patient and their family members to care for themselves and their loved ones upon discharge from the hospital. Interventions to improve their physical, psychological, and social well-being must be implemented in a culturally appropriate manner. Social support, particularly from family members and relatives, is essential to ensure the highest quality of life. Social participation among these patients should be encouraged. Community- and hospital-based activities aimed at increasing physical activity and social interaction among stroke survivors can be developed and implemented.

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