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Coping Strategies among Patients with Cancer: A Cross-sectional Study done in Teaching Hospital Karapitiya, Southern Sri Lanka

Weeratunga E.^{1#}, Senadheera C.², Hettiarachchi M.³, Perera B.⁴

¹*Department of Nursing, Faculty of Allied Health Sciences, University of Ruhuna, Sri Lanka*

²*Department of Psychiatry, Faculty of Medicine, University of Ruhuna, Sri Lanka*

³*Nuclear Medicine Unit, Faculty of Medicine, University of Ruhuna, Sri Lanka*

⁴*Department of Community Medicine, Faculty of Medicine, University of Ruhuna, Sri Lanka*

#Corresponding author: eranthiw@ahs.ruh.ac.lk

Background: Coping strategies used by cancer patients to handle the disease contribute to the quality of their remaining life. The literature presents different coping styles and their effects on cancer patients; constructive coping leads to better psychosocial health and improved compliance to treatment.

Objectives: To identify coping strategies used by patients with cancer and their correlates.

Methods: Four hundred heterogeneous cancer patients were recruited from the Oncology unit, Teaching Hospital, Karapitiya, Galle. An interviewer-administered questionnaire including 28-item Brief COPE scale was used to identify the coping strategies and correlates. Higher scores of the scale indicate higher adaptive coping (e.g. instrumental support, emotional support, etc.) or maladaptive coping (e.g. self-distraction, substance use, etc.) whereas lower scores indicated lower coping.

Results: Mean±SD age of the participants was 56±11.92 years. Ninety one percent (n=365) of participants had used a higher level of adaptive coping, and 247 (61%) patients had used a higher level of maladaptive coping. More than 80% of the sample had used adaptive coping strategies, such as instrumental support (n=380), emotional support (n=377), acceptance (n=352), and religion (n=320). Among maladaptive coping, 89% used venting (n=357) and 72% (n=287) used self-distraction. Age was negatively correlated with adaptive coping (e.g. planning and active coping) (p<0.001). Females had higher adaptive coping (65.5±6.6) than males (60.6±7.1); the married group had the highest adaptive coping (64.1±6.8) compared to the unmarried group (60.9±8.4) (p<0.001). Participants with a higher level of education tend to have a higher adaptive coping (64.8±7.1) than the lower educated group (61.0±6.7); adaptive coping was higher among the unemployed subjects (66.0±6.2) than those with employment (62.0±7.4) (p<0.001).

Conclusions: Majority of cancer patients used at least one adaptive coping strategy in the management of the disease. Younger, females, and married patients utilized more adaptive coping; unemployed and patients with more years of education used many adaptive coping methods. Culturally adaptive coping strategies need to be explored in future studies.

Keywords: Adaptive coping, Brief COPE, Maladaptive coping, Sri Lanka

Acknowledgement: Faculty Research Grant-2013, Faculty of Medicine, University of Ruhuna.