

# Bereavement Adjustment of Caregivers of Advanced Cancer Patients in Singapore: Preliminary Findings from COMPASS



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#### **AIMS**

This study examined the prevalence of bereavement adjustment difficulties in caregivers of advanced cancer patients in Singapore and its risk factors.

## **BACKGROUND**

- Experiencing grief from the loss of a loved one to cancer is a normal and expected experience, yet some individuals can experience complex bereavement adjustment.
- Difficulty in bereavement adjustment of caregivers of patients with cancer has been associated with heightened risk of depression, perhaps due to the protracted nature of caregiving and witnessing of patient suffering.
- Nevertheless, information on this group of caregivers is limited, especially in Singapore.

# **METHODS**

- The current cross-sectional study utilizes part of the larger COMPASS research project that prospectively captures healthcare utilization, quality of care and QOL indicators of advanced cancer patients and their caregivers in Singapore. The research project is ongoing and interim data is presented.
- Caregivers (n=105) were assessed at six months post-patient death using a self-report survey on:
  - Complicated grief (Brief Grief Questionnaire)
  - Anxiety (HADS, Anxiety subscale)
  - Depression (HADS, Depression subscale)
- The associations between bereavement adjustment with caregiver demographic characteristics (age, gender, spousal status), relationship/ caregiving factors (closeness, time spent caregiving), and caregiver's reaction to patient's death (regret, preparedness for patient death) were examined.

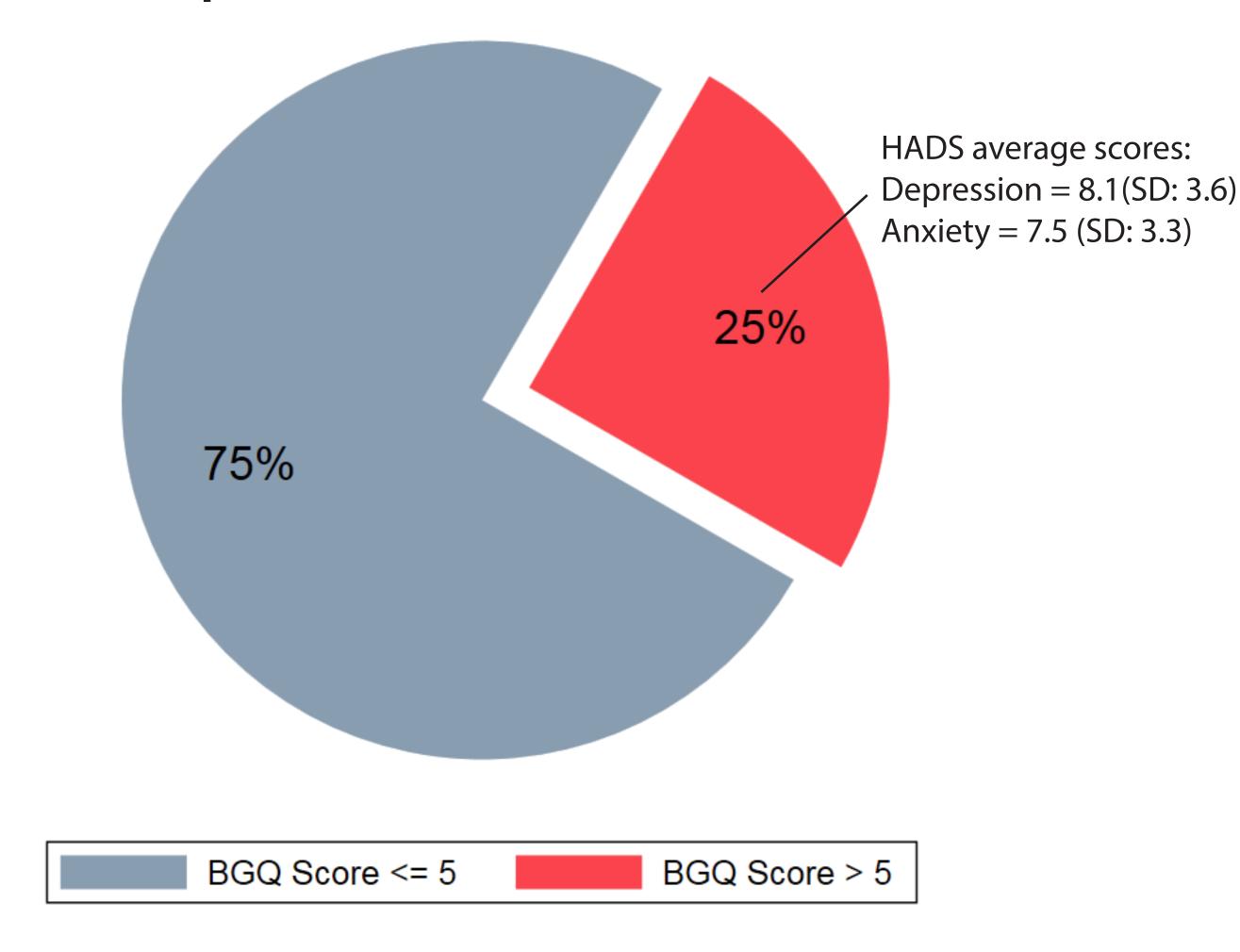
#### **RESULTS**

*Table 1.* Demographics of Caregivers (n = 105)

	Proportion	M (SD)
Age		49.2 (14) yrs
Gender Female	65%	
Race Chinese	76%	
Education Secondary and below University and above	46% 28%	
Relationship to Patient Spouse Child/Child-in-law	45% 46%	
Time spent caregiving		18.2 (19.4) hrs/wk

# **RESULTS (contd.)**

Figure 1. Proportion of Caregivers (n=105) Meeting the Cut-off Score for Complicated Grief (BGQ > 5)



**Table 2.** Potential Predictors of Complicated Grief (n = 105)

Factors	T-statistic	Pearson's r	
Demographics Age Female (vs male) Spouse (vs others)	-0.3252 (p = 0.4838) 0.7596 (p = 0.0861)	-0.0394 (p = 0.6986)	
Relationship/ Caregiving Perceived closeness Time spent caregiving		0.3675 (p = 0.0002) 0.2323 (p = 0.0201)	
Caregiver's reaction to patient's death Regret Preparedness		0.2451 (p = 0.0179) -0.1725 (p = 0.0983)	

### CONCLUSIONS

- Interim results indicate that a proportion of caregivers (25%) met the screening criteria that suggest bereavement adjustment difficulties on the BGQ. Although a mental health professional assessment is ideally required for a diagnosis of complicated bereavement, our findings are indicative of bereavement-related difficulties in our caregiver sample.
- The above finding is further supported by our HADS anxiety and depression scores (M = 7.5, 8.1 respectively) that both meet the suggested cut-off criteria for the HADS in Singapore (cut off  $\geq 5$  and  $\geq 7$ , respectively).
- Our preliminary findings suggest caregiving/ relationship factors, rather than demographic characteristics and caregiver's reaction to patient's death increase the risk of bereavement adjustment difficulties.
- Future studies should continue to build upon these findings in order to identify the needs of caregivers and predictors of their well-being.