Identifying Family Members Who Are Likely to Perceive Benefits From Providing Care to a Person With a Primary Malignant Brain Tumor

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The body of literature on family caregiving has begun to capture and document many aspects of the overall caregiving experience. The majority of research has focused on negative reactions (e.g., burden, depressive symptoms) that result when family members assume the role of caregiver and are forced to make sacrifices and major life changes to adapt to their new responsibilities. Recent studies suggest that benefits and rewards also can be associated with providing care (e.g., personal growth, discovering a sense of purpose) that coexist with the less-favorable reactions (Boerner, Schulz, & Horowitz, 2004; Kramer, 1997; Tarlow et al., 2004).

Although research has shown that these positive aspects of caring (PAC) can be present within the caregiving experience, studies have yet to identify family caregivers who are and are not likely to perceive benefits and rewards from providing care. To help family caregivers maintain their emotional health and potentially improve the quality of patient care delivered in the home, identifying how caregivers’ perception of the benefits and rewards of providing care change over time as a function of patient and caregiver characteristics is vital.

The purpose of the current study was to identify changes in PAC from the time of diagnosis to four months following the diagnosis in family caregivers of care recipients with primary malignant brain tumors. The authors also sought to identify variables that predict PAC four months after the diagnosis. Specifically, the authors sought to determine the impact of sociodemographic factors, caregivers’ perceived social support, mastery, neuroticism, and marital satisfaction on PAC.

**Background**

The experience of a family caregiver is rarely one that initially presents itself as an opportunity. Under