

**Differences in Perceived Family Needs As
Identified By Matched Pairs of Neuroscience Nurses and Family
Members of Neurologically Impaired Patients**

**An Abstract of
A Thesis**

**Presented to The Graduate Faculty of
Western Connecticut State University**

by

Elizabeth M. Werner-Young

**In Partial Fulfillment
Of the Requirements for the Degree
Master of Science in Nursing**

This study investigated the differences between the identification of family needs as viewed by the neuroscience nurse and the identification of family needs as viewed by family members of the neurologically impaired patient. The population for this study consisted of a convenience sample of 10 dyads of neuroscience nurses and family members of patients admitted to one neuroscience unit in a Connecticut hospital. Criteria for the family member's inclusion was identified by specific patient diagnoses, including traumatic brain injury, cerebral vascular accident, and spinal cord injuries.

Of the 10 dyads forming the sample for this study, there were two male and eight female family members, 19 to 70 years of age. All subjects completed a demographic data sheet developed by the researcher and the 45-item Critical Care Family Needs Inventory (CCFNI) (Leske, 1986; 1991; Molter, 1979) between day 5 and day 10 of the patient's admission to the neuroscience unit.

The first research hypothesis predicted that there would be a significant difference between the neuroscience nurses' identification of family members' needs and family members' identification of their needs. The 2 X 5 dependent groups ANOVA did not provide support for this

hypothesis. The analysis showed that the average CCFNI score for the nurses ($\bar{x} = 133.41$; $SD = 10.57$) did not differ significantly from the average CCFNI score of the family members ($\bar{x} = 137.10$; $SD = 16.30$), $F(1,9) = 0.31$, $p > .05$. The second research hypothesis predicted that, after combining the subscale scores for the nurses and family members, there would be a significant difference in the subscale scores of the CCFNI. The results of the 2×5 dependent groups ANOVA supported this hypothesis. The results of the repeated measures factorial showed that the five subscales were not considered equally important by the combined nurse and family member subjects, $F(4,36) = 27.58$, $p < .05$. Assurance ($\bar{x} = 3.85$) and Information ($\bar{x} = 3.37$) needs were significantly more important than Proximity ($\bar{x} = 3.17$), Comfort ($\bar{x} = 2.85$), and Support ($\bar{x} = 2.78$) for the combined subjects. The third research hypothesis predicted that the responses of the nurses on the five CCFNI subscales would differ significantly from those of the family members. This hypothesis was also supported. The 2×5 dependent groups factorial showed that the needs identified as important by the nurses were not the same needs identified by the family members, $F(4,36) = 2.99$, $p < .05$. On the average, the family members

identified Comfort and Assurance needs as significantly more important than the nurses.

The findings suggest that the need for Assurance, and Information regarding the patient's condition are high priorities for family member's of neurologically impaired patients. In addition, the analysis revealed a significant interaction between the group and subscale, implying that the subscales considered most important by family members were not considered in the same way by the nurses.