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# **Perspectives of Family Caregivers on the Need for an Intermediate Care Model for Older Stroke Survivors in Nigeria: A Qualitative Study**

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**Professor Hafiz Khan**, *PhD, Chartered Statistician*

The research is part of a doctoral study conducted on intermediate care model in Nigeria.

- How does an intermediate care model affect the quality of life of older people after a stroke?

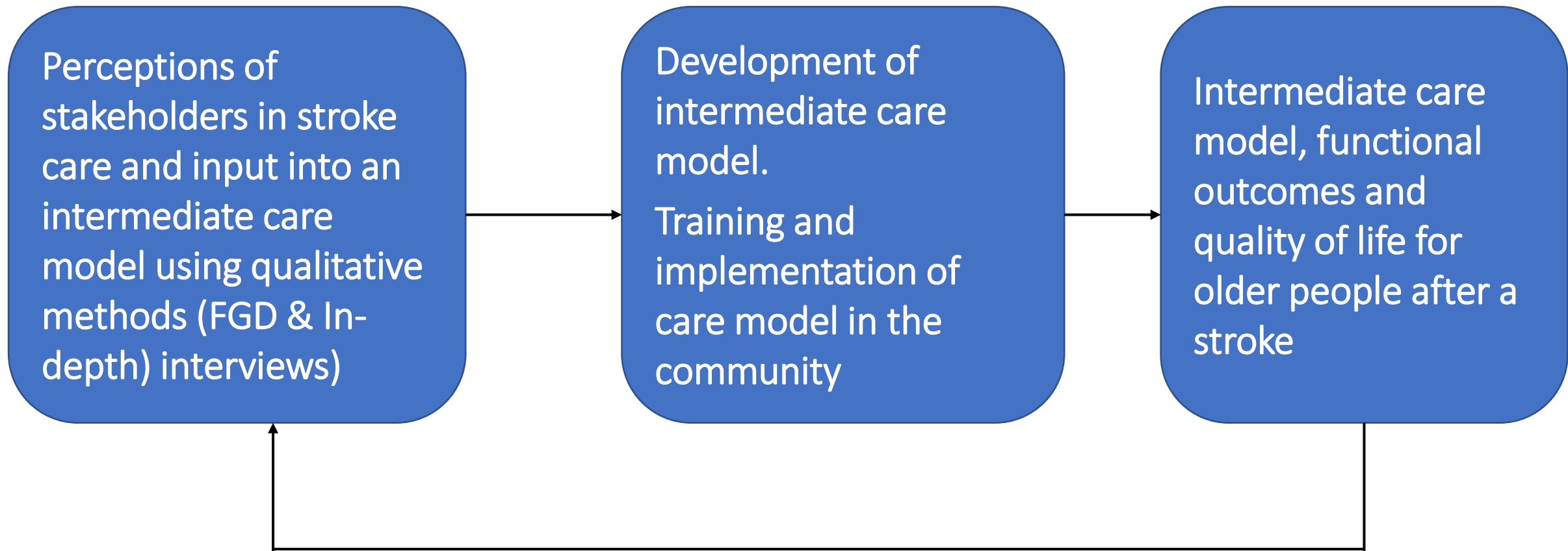
- About 75% of strokes occur in people aged 65 years and over. This figure is expected to rise in line with aging populations (Yousufuddin & Young, 2019).
- Stroke is a lifelong chronic disease leading to disability and dependence. Physical, cognitive, and emotional consequences can be managed through rehabilitative care from acute setting to post-acute phase (Wissel et al., 2013).

- Stroke impact on society and the workplace with caregivers often leaving their jobs to provide care for a family member (Litzelman et al., 2015).
- Intermediate care is important for functional independence in stroke survivors leading to lower hospital re-admissions or emergency department visits (Peng et al., 2017; Oquendo et al., 2024).

- In Nigeria, there is no integrated care model for post-acute stroke management in the community.
- A high social and economic burden associated with stroke survival means a comprehensive post-acute care model is vital for addressing the individual needs of stroke survivors, caregivers, and communities (Wissel et al., 2013).

## OBJECTIVE

- This study aimed to explore family caregivers' perceptions on the need for an intermediate care model in Nigeria for older people after a stroke.



**Fig 1:** Conceptual framework of intermediate care model

A cross-sectional qualitative study conducted in February 2023

A purposive sampling technique used for identifying participants (family caregivers of stroke patients)

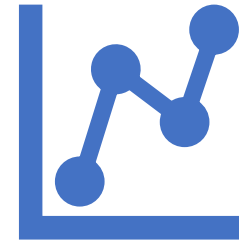
3 focus group discussions involving 18 family caregivers of stroke patients



Interviews  
audio-  
recorded



Interviews  
transcribed  
verbatim by  
research  
assistants



Raw data organized  
and analysed  
thematically using  
NVivo 12 software



Emerging themes  
identified in findings,  
supported by  
participant quotes

| Theme                                      | Subtheme and quotes  |
|--|--|
| <b>1. Experiences in stroke management</b> | <ul style="list-style-type: none"><li data-bbox="657 554 1834 731">■ <b><i>Financial implications</i></b><br/>“it’s an illness that can cause someone to become poor”<br/>“/ssue of money and you running around to get drugs”</li><li data-bbox="657 802 2211 979">■ <b><i>Stress</i></b><br/>“It is difficult, the kind of stress we pass through in hospital another thing ”<br/>“the stress was much because stroke is not a simple illness”</li><li data-bbox="657 1051 1860 1228">■ <b><i>Pain</i></b><br/>“The pain is too much for him, body ache, leg pain, side ”<br/>“She has been having headaches for a week ”</li><li data-bbox="657 1299 2135 1413">■ <b><i>Memory deficit</i></b><br/>“Her answers did not match the questions she could not recognize us”</li></ul> |

| Theme                                       | Subtheme and quotes  |
|---|--|
| <b>1a. Experiences in stroke management</b> | <ul style="list-style-type: none"><li data-bbox="647 444 2428 729">▪ <b>Information and or support received at the facility</b><br/><i>“He should have some minutes of walking with assistance”</i><br/><i>“They said high blood pressure (BP) can cause it and we didn’t know he has that”</i></li><li data-bbox="647 825 2364 1039">▪ <b>The usefulness of the information</b><br/><i>“We were given instruction to buy a walking stick, it was very helpful because she can walk.”</i></li><li data-bbox="647 1135 2428 1420">▪ <b>Unmet needs for information and social support training</b><br/><i>“What I need much training on, is the aspect of seizure”,</i><br/><i>“Will patient be using it for life, or it will have stopover for some time, and maybe some drugs will be added or removed? ”</i></li></ul> |

| Theme                                       | Subtheme and quotes  |
|---|--|
| <b>1b. Experiences in stroke management</b> | <ul style="list-style-type: none"><li data-bbox="649 525 2364 588">▪ <b>Preferred manner of receiving information and training</b></li></ul> <p data-bbox="649 678 2509 778"><i>“Experts on stroke can lecture us to know more about the disease”</i></p> <p data-bbox="649 906 2527 1045"><i>“I would have suggested that there should be more doctors so that time of giving information to patients will be convenient”</i></p> |

| Themes  | Subtheme and quotes  |
|---|--|
| <b>2. Identification of home-based care needs</b> | <ul style="list-style-type: none"><li data-bbox="652 482 2542 696">▪ <b>Home-based care needs of older stroke patients</b><br/><i>“If they can get her this digital measuring BP machine ... You can get them the walking stick”</i></li><li data-bbox="652 786 2542 1143">▪ <b>Reasons for care need</b><br/><i>“They don’t have enough strength”</i><br/><i>“If we don’t care for them, the illness will get worse, and it can lead to paralysis of the whole body or death... we don’t want him to die now”</i></li><li data-bbox="652 1243 2542 1428">▪ <b>Activities at home to meet the care need</b><br/><i>“When the physiotherapist is no longer there, we assist them with it”</i></li></ul> |

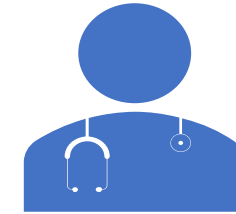
| Themes   | Subtheme and quotes  |
|--|--|
| <b>2a. Identification of home-based care needs</b> | <ul style="list-style-type: none"><li>▪ <b>Challenges in implementing home care needs</b><br/><i>“At times, as we are taking care of him, we will think that he is perfectly well then, he relapses again”</i><br/><i>“Carrying her alone is a big challenge”</i></li><li>▪ <b>Intermediate care for a stroke survivor after discharge from hospital</b><br/><i>“If they can be given drugs for free”</i><br/><i>“Wheelchair for carriage”</i></li></ul> |

| Themes   | Subtheme and quotes   |
|--|---|
| <b>2b. Identification of home-based care needs</b> | <ul style="list-style-type: none"><li data-bbox="616 525 2458 968"><b>Who should be primarily involved in the intermediate level of care?</b><br/><i>“Children is very, very important”</i><br/><i>“Family is the closest person to the patient before the doctor”</i><br/><i>“Nurses... They can come home maybe once in six months”</i><br/><i>“Government should have a program”</i></li><li data-bbox="616 1059 2374 1345"><b>Benefits of instituting an intermediate level of care</b><br/><i>“the distance you travel to go to the hospital will be reduced”</i><br/><i>“It will aid recovery and that will also help both the patient and caregiver to resume their various daily works”</i></li></ul> |

| Themes   | Subtheme and quotes  |
|--|--|
| <b>2c. Identification of home-based care needs</b> | <ul style="list-style-type: none"><li data-bbox="639 491 2548 862">▪ <b>Problems associated with establishing an intermediate level of care</b><br/><i>“lack of money”</i><br/><i>“too much stress on the caregiver can result in the patient not having enough quality care”</i></li><li data-bbox="639 948 2548 1176">▪ <b>Motivations for caregivers and patients to adopt an intermediate care model</b><br/><i>“appreciating the caregiver by giving them things”</i></li></ul> |



The results highlight family caregivers' readiness to adopt an intermediate care model help promote the recovery of elderly stroke patients.



Formal caregivers should extend substantial support and comprehensive training to family caregivers for reduced burden and improved patient outcome.

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# Questions?

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