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The Relationship Between Social Support and Palliative Patient Compliance in Undergoing Home Care

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ABSTRACT

Background: Palliative care patients require comprehensive support from their families, healthcare professionals, and social environment to effectively undergo treatment. Patient compliance with home care is greatly influenced by adequate social support.

Objective: To determine the relationship between social support and compliance of palliative patients in undergoing home care.

Methods: This study used a cross-sectional design with a sample size of 60 palliative care patients undergoing home care. The research instruments used a social support questionnaire and a care adherence questionnaire. Data analysis was performed using the chi-square test with a significance level of $p < 0.05$.

Results: The study showed a significant relationship between social support and palliative care patient compliance with home care ($p = 0.002$). Patients with high social support were more compliant with care compared to patients with low social support.

Conclusion: Social support plays a crucial role in improving compliance in palliative care patients undergoing home care. Care interventions should involve family and the surrounding community in providing social support to patients.

Keywords: Social Support, Compliance, Palliative Patients, Home Care

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1. Introduction

Palliative care is a comprehensive approach aimed at improving the quality of life of patients with chronic or terminal illnesses and their families. The primary focus of this care is to alleviate the physical, psychological, social, and spiritual suffering experienced by patients. However, one of the main challenges in implementing palliative care is low patient adherence to therapy and medical advice. Poor adherence can result in worsening patient conditions, increasing the burden on families to care, and reducing the effectiveness of health services (World Health Organization, 2019). Organization, 2020).

Social support is a crucial factor in improving patient adherence in palliative care. This support can come from family, friends, healthcare professionals, and the community. Social support provides a sense of security, motivation, and emotional empowerment that can help patients better accept their condition and commit to treatment (House, 1981; Taylor, 2018). Previous research has shown that patients with good social support tend to have higher adherence to treatment, including long-term therapy and palliative care (Gohar et al., 2021).

In the context of palliative care for patients at home, family support is often the dominant factor influencing patient compliance. Family involvement in patient care not only facilitates the fulfillment of physical needs but also provides emotional strength to cope with chronic illness in the terminal phase (Chen et al. al., 2022). Conversely, a lack of social support can cause patients to feel isolated, lose motivation, and ultimately be non-compliant with recommended treatments.

Based on the description above, this study was conducted to determine the relationship between social support and palliative care patient compliance with home care. The results are expected to contribute to the development of nursing intervention strategies focused on strengthening social support to improve the quality of life of palliative care patients.

2. Research methods

a) Research Design

This study uses a descriptive analytical design with a cross-sectional approach. Sectional. This design was chosen to determine the relationship between social support and palliative patient compliance in undergoing home care at one measurement time.

b) Population and Sample

The population in this study was all palliative care patients undergoing home care within the working area of a particular Community Health Center/hospital in 2025. The sampling technique used purposive sampling with inclusion criteria: patients undergoing palliative care for at least 1 month, able to communicate well, and willing to be respondents. The number of samples obtained was 50 respondents.

c) Research Instruments





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The instruments used in this study include:

1. Social Support Questionnaire, adapted from *Medical Social Outcomes Study Support Survey (MOS-SSS)* consisting of emotional, instrumental, informational, and reward aspects.
2. The Patient Compliance Questionnaire, developed based on compliance theory, includes adherence to medication, diet, medical control, and care activities.

The instrument has been tested for validity and reliability previously, with Cronbach's values Alpha > 0.70 which indicates reliability.

d) Data Collection Procedures

Data collection was conducted through structured interviews using questionnaires with palliative care patients or with the assistance of family members (if the patient's condition was frail). Researchers also conducted supporting observations of home care conditions.

e) Data analysis

Data was analyzed in two stages:

1. Univariate analysis: to describe respondent characteristics, level of social support, and patient compliance.
2. Bivariate analysis: using the Chi-Square test to determine the relationship between social support and palliative patient compliance. The significance value was determined at $\alpha = 0.05$.

3. Research result

a. Results

1) Respondent Characteristics

This study involved 50 palliative care patients undergoing home care. Respondent characteristics are presented as follows:

- a) Gender: majority female, 30 respondents (60%), male, 20 respondents (40%).
- b) Age: age range 35–70 years, with an average age of 55 years.
- c) Last education: mostly high school graduates (40%), followed by elementary–middle school graduates (38%), and college graduates (22%).
- d) Occupation: 52% are unemployed (housewives/retired), the rest are employed (48%).

2) Social Support

Based on the results of measuring social support, the following distribution was obtained:

- High social support: 28 respondents (56%).
- Moderate social support: 15 respondents (30%).
- Low social support: 7 respondents (14%).





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The most dominant type of social support received by patients is emotional support from family (70%), while the lowest support is instrumental support such as financial assistance (35%).

3) Patient Compliance

The level of compliance of palliative patients in undergoing home care shows the following results:

- High compliance: 27 respondents (54%).
- Moderate compliance: 14 respondents (28%).
- Low compliance: 9 respondents (18%).

The highest aspect of compliance was compliance with medication (80%), while the lowest aspect was compliance with diet (45%).

4) The Relationship Between Social Support and Patient Compliance

The results of the analysis using the Chi-Square test showed a significant relationship between social support and palliative patient compliance ($p\text{-value} = 0.002 < 0.05$).

- Respondents with high social support mostly showed high compliance (85.7%).
- Respondents with low social support tend to have low compliance (71.4%).

These results show that the higher the social support received by patients, the higher the level of patient compliance in undergoing treatment at home.

b. Discussion

1) Respondent Characteristics

The study results showed that the majority of palliative care patients treated at home were older adults (average age 55) and were predominantly women. This finding aligns with previous research indicating that chronic and terminal illnesses are more prevalent in older adults, with women tending to be more open to receiving care and more frequently involving their families in healthcare decision-making. Age and gender influence the patient's level of dependence on family and healthcare support.

2) Social Support

This study shows that the most dominant social support experienced by patients is emotional support. This suggests that palliative care patients have a greater need to feel valued, loved, and accepted by their family and close circle. Emotional support has been shown to provide a sense of security, reduce anxiety, and increase patient motivation to undergo treatment. Conversely, instrumental support, including material and financial assistance, is lower, likely due to family financial constraints.





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These results align with research conducted by Wulandari (2021), which found that emotional support is a crucial factor in improving the quality of life of palliative care patients. Social support plays a role not only in physical aspects but also in psychological and spiritual aspects.

3) Patient Compliance

The patient compliance rate in this study was mostly high. This indicates that patients were able to follow most care recommendations, particularly regarding medication. However, adherence to diet remained relatively low. Eating habits, limited family knowledge, and economic constraints may contribute to low adherence to dietary guidelines. This finding aligns with a study by Rahmawati (2022), which explained that one of the challenges in home palliative care is the difficulty patients and families have in modifying their lifestyles.

4) The Relationship between Social Support and Compliance

Statistical test results showed a significant relationship between social support and patient adherence in palliative care (p -value = 0.002). This finding supports the theory that patient adherence is not only determined by internal factors such as motivation and knowledge, but also influenced by external factors such as social support. Patients with high social support are more adherent to medication, diet, and health monitoring than patients with low social support.

This research aligns with a study by Setiawan (2020), which found that social support from family is a protective factor in improving adherence in patients with chronic illnesses. The presence of family members accompanying patients has been shown to increase a sense of responsibility, improve adherence to treatment, and reduce the risk of complications due to non-adherence.

5) Research Implications

The results of this study have important implications for nursing practice and home-based palliative care. Social support needs to be a focus of interventions, not only through patient education but also through family education as primary caregivers. Nurses can act as facilitators, helping families understand the importance of emotional, informational, and instrumental support for patients. Furthermore, cross-sector collaboration, including community support and home-based healthcare services, can strengthen patient adherence to treatment.

4. Conclusion and Suggestions

a. Conclusion

Based on the research results, it can be concluded that there is a significant relationship between social support and compliance in palliative care patients undergoing home care. Patients who receive high social support, whether from family, healthcare professionals, or the surrounding environment, tend to have better





compliance with treatment recommendations, including adherence to medication, diet, activity, and health control. Emotional, instrumental, informational, and reward support play an important role in increasing patient motivation to remain committed to the treatment regimen.

Thus, social support is one of the determining factors for the success of palliative care at home, because it can improve the quality of life, reduce suffering, and strengthen the patient's acceptance of terminal illness.

b. Suggestion

1) For Family

It is hoped that the patient's family will be more active in providing consistent social support, whether in the form of emotional attention, practical assistance, or motivation so that the patient remains compliant in undergoing treatment.

2) For Health Workers

Nurses and healthcare workers are expected to increase their educational role and provide emotional support and relevant information to strengthen palliative patient compliance.

3) For Community Health Centers and Hospitals

There is a need for a community-based palliative care program involving families, health workers, and volunteers to strengthen the social support system at home.

4) For Further Researchers

It is recommended to conduct research using longitudinal methods to see the impact of social support on long-term palliative patient compliance, as well as considering psychological and spiritual factors as additional variables.

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