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Spring 2020

Healthcare satisfaction in lung cancer survivors: A cross-sectional secondary data analytic study

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Healthcare satisfaction in lung cancer survivors: A cross-sectional secondary data analytic study

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Introduction

- Lung cancer is commonly associated with high levels of psychosocial distress and symptom burden.
- Although healthcare institutions utilize metrics of satisfaction with their services, research on healthcare satisfaction in lung cancer is sparse and presents an inconsistent array of predictors.
- Understanding the most significant predictors of healthcare satisfaction may point healthcare institutions towards key areas of assessment and intervention for lung cancer survivors.
- Based on prior research, we hypothesized that ethnic background, income level, supportive care needs, psychosocial wellbeing, and physical functioning would predict levels of healthcare satisfaction in our sample of lung cancer survivors.

METHOD

- Secondary data analysis of surveys collected at baseline ($N = 187$) from lung cancer survivors from two hospitals in southern California.
- Assessments included trauma symptom and depressive symptom severity, quality of life, symptom burden, supportive care needs, and demographic characteristics.
- Hierarchical regression models evaluated whether specific predictors were independently associated with levels of healthcare satisfaction.

RESULTS

Characteristics of the study sample

- 81% of our sample was of a Caucasian background and 57% female gender.
- On average, lung cancer survivors were 66 years of age ($SD = 10.66$), completed 13 years of education ($SD = 2.68$), earned an annual family income of $55k ($SD = $55k$), diagnosed with cancer 50 weeks ago ($SD = 66$ weeks), and were somewhat to very satisfied with their healthcare ($M = 52.83$, $SD = 8.53$).

Table 1. Full hierarchical regression model predicting healthcare satisfaction ($R^2 = .34$)

	Beta	t (p)	Tolerance (VIF)
Information Needs	-.43***	-6.05(.00)	.70(1.42)
Psychological Needs [a]	-.18*	-2.14(.03)	.52(1.91)
Time since diagnosis	-.13*	-2.10(.04)	.99(1.01)
Symptom burden	.04	.48(.63)	.55(1.83)
Quality of life	.08	1.02(.31)	.65(1.54)

Note. Full model statistics: F(6, 180) = 15.28, $p < .001$. * $p < .05$, ** $p < .01$, *** $p < .001$
[a] Psychological needs was a significant predictor in the full model when depressive symptom severity was removed from the model due to multicollinearity issues.
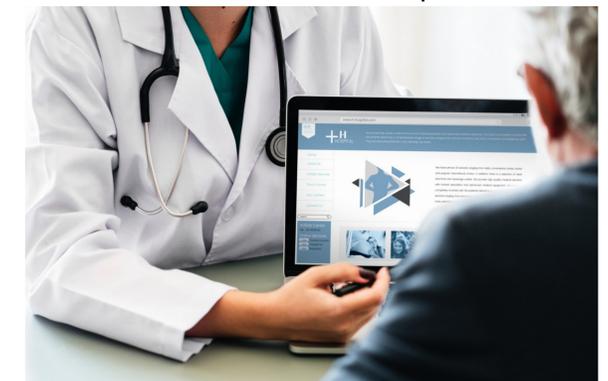
Conclusions

Key Findings

- Supportive care needs, especially psychological needs and information about one's cancer and how it can be addressed, appear to be important factors that may predict healthcare satisfaction in lung cancer survivors.
- Our findings also suggest that those survivors who have survived their cancer for a longer period of time may be less satisfied with their healthcare experience.

Limitations

- Causal inference is limited due to cross-sectional study design.
- Self-report data (e.g., time since diagnosis).
- High proportion of Caucasian lung cancer survivors (81%).
- Higher proportion of female lung cancer survivors (57%).
- Large standard deviations of some variables (e.g., income).

Clinical Implications

- Our findings suggest that routine assessment of lung cancer survivors' supportive care needs is important for addressing their concerns and feeling more satisfied with their healthcare experience.

Directions for future research

Future research can expand on our findings in the following ways:

- Longitudinal assessments examining whether there is an interaction between time since diagnosis and unmet supportive care needs on healthcare satisfaction.
- Examining healthcare satisfaction and supportive care needs in more ethnically diverse samples.