



Implementation of the Bonny Method of Guided Imagery and Music (BMGIM) to complement care provided in selected cancer interim homes in Gauteng

Introduction

The world of cancer care is changing as treatment trends move towards supportive cancer care (Daykin et al., 2006). The need for psychosocial support is justified by an increase in the incidence of patients diagnosed with cancer. With a projected global increase in incidence of cancer the need for supportive cancer care is also on an increase. Nurses are tasked to care for the psychological and social needs of the patients. However, patients and nurses do not always perceive that these needs are being fulfilled. Bonny Method of Guided Imagery and Music (BMGIM) has physical, psychological, social and spiritual effects which can enhance supportive cancer care. However, limited research could be found on the use of BMGIM in the care of cancer patients in South Africa.

Aim & Objectives

The aim of this study was to implement and evaluate the complementary effect of the BMGIM on the physical, psychological and spiritual wellbeing of patients in selected cancer interim homes in Gauteng, South Africa.

The objectives of the study were:

1. To conduct a systematic review to identify methods that have been used to implement the BMGIM in other health care settings, and evaluate the reported effectiveness of the BMGIM in cancer care contexts (**Phase 1**);
2. To implement the BMGIM in selected cancer interim homes in order to introduce an existing music therapy method into a new setting (**Phase 2**);
3. To evaluate cancer patients' experiences during BMGIM therapy, as well as to evaluate the effects of the BMGIM on patients' physical, psychological and spiritual wellbeing for the duration of their stay in the cancer interim home (**Phase 3**).

Research Method

Within the research design of intervention research a prospective intervention study supported by a simultaneous qualitative approach, phenomenology, was conducted.

The population of the study was cancer clients admitted to cancer interim homes in Gauteng. The study took place in phases. In phase one a systematic review was conducted. Evidence gathered in phase one informed the implementation of BMGIM in phase two. Phase three involved evaluation of the effect of BMGIM through administration of a demographic questionnaire, Symptom Distress Scale, Psychological General Well Being Index and Spiritual Index of Well Being. Qualitative data in the form of session summary form, photographs of drawings and an unstructured interview was also collected. A process of data analysis followed.

Findings

The intervention of BMGIM was found to bring about improvements in the physical, psychological and spiritual wellbeing of the participants. In the quantitative domain significant improvements were found in fatigue and quality of pain. Improvements were also found in psychological and spiritual wellbeing though the small sample size influenced the significance of the findings. The qualitative domain findings were encapsulated in five constituents namely Underlying mechanism of action of the BMGIM, Development of coping strategies, Juxtaposition of images and their meaning, Experience of physical wellbeing, Experience of psychological wellbeing, and Experience of spiritual wellbeing and in the essence. The BMGIM was found to be a method through which patients' experienced holistic care.

Table 1 Association between sessions for SDS

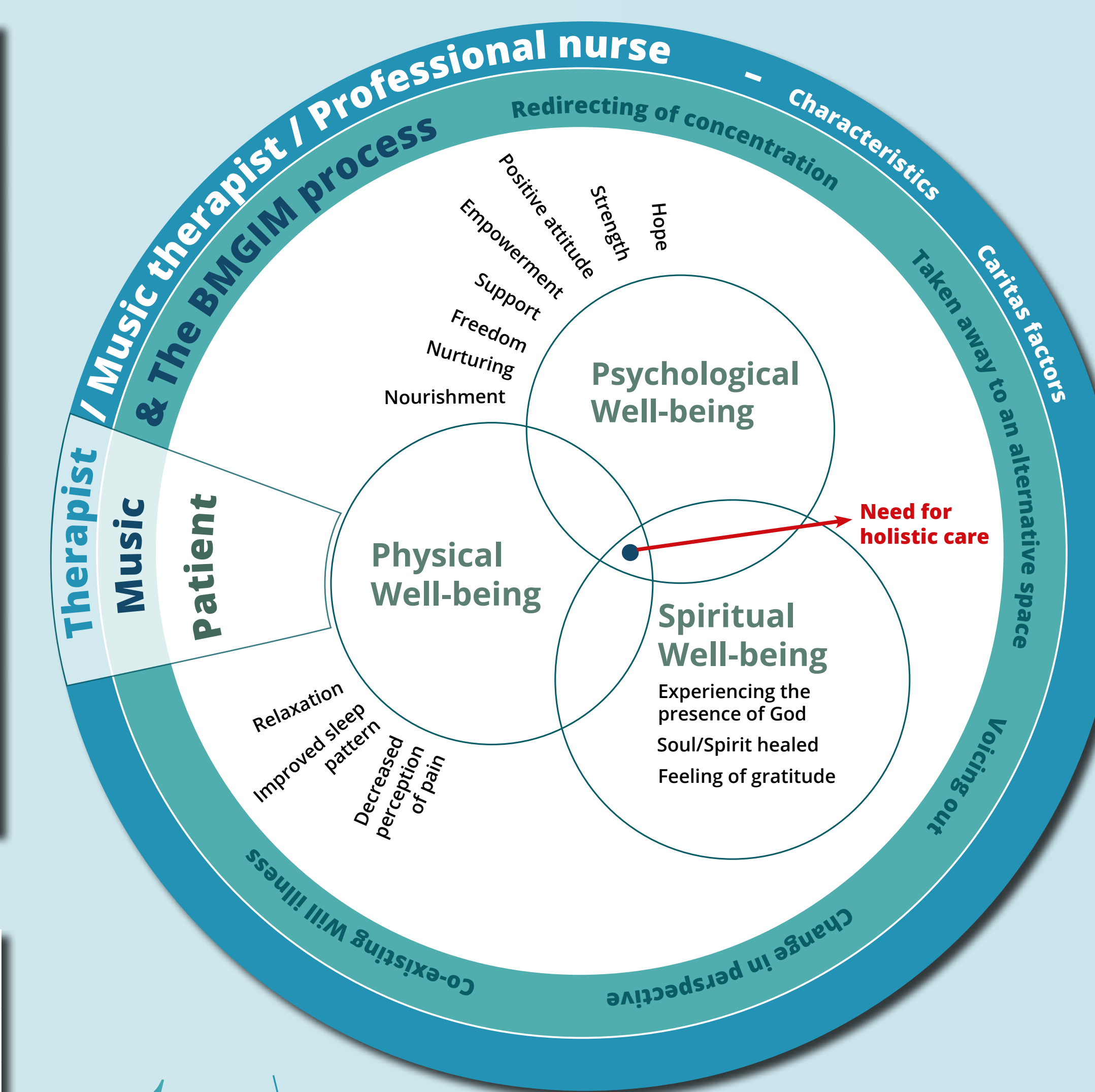
CONSTRUCTS	Fisher' Exact test	Fisher' Exact test	Fisher' Exact test
	Session 1 versus 2	Session 2 versus 3	Session 1 versus 3
Nausea1	0.591	0.115	0.619
Nausea2	0.008	0.013	0.718
Appetite	0.040	0.347	0.011
Insomnia	0.024	0.348	0.281
Pain1	0.882	0.761	0.658
Pain2	0.040	0.004	0.000
Fatigue	0.005	0.036	0.015
Bowel	0.000	0.002	0.237
Concentration	0.002	0.037	0.152
Appearance	0.025	0.173	0.560
Breathing	0.010	0.259	0.005
Outlook	0.877	0.187	0.570
Cough	0.004	0.458	0.065

Table 2 Probability values of dimensions of PGWBI between session 1 and session 3

DIMENSIONS	PROBABILITY VALUE (p-value)
Anxiety	0.4555
Depressed mood	0.0700
Positive wellbeing	0.2034
Vitality	0.0604

Table 3 Probability values of dimensions of SIWB between session 1 and session 3

DIMENSIONS	PROBABILITY VALUE (p-value)
Spirit SA = Self-efficacy	0.0054
Spirit SB = Life scheme	0.0322



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