Introduction: There is much evidence that cancer and its treatment has an impact on the lives of cancer patients’ families, as well as on the patients themselves. At present, however, there is no
questionnaire to assess the quality of family life among families with a member with cancer. The purpose of this study was to develop a Family Quality of Life Questionnaire (FQOL) for use with families with an adult cancer patient.

Method(s): The questionnaire assessed four domains of family life: Family interactions, family roles, family communication, and family emotional support. There were three phases to questionnaire development. In Phase 1, items were generated from a literature review and a semi-structured interview with 12 families with a member with cancer. In Phase 2, the items were reviewed for content validity by ten cancer experts. In Phase 3, the FQOL questionnaire was piloted with 151 cancer patients and 151 family members. The dimensionality of the measure was examined using confirmatory factor analysis, and reliability and construct validity were examined.

Results: Results indicated that the FQOL questionnaire was multi-dimensional. Results from Phase 1 and 2, and Cronbach's alpha coefficients supported the four a priori domains, but results of confirmatory factor analysis did not support these four domains and need to be further examined. The internal consistency and test-retest reliability of subscales and total scores were adequate. Convergent validity was supported for the total FQOL scores, Family Interaction, and Family Communication subscales for all participants, but the Family Role and the Family Emotional Support subscales had inconsistent findings and thus received mixed support for convergent validity. Discriminant validity was partially supported in these samples.

Discussion & Conclusions: The FQOL questionnaire will require some additional development but this study represents an important first step. The FQOL questionnaire will be useful as a research instrument to measure FQOL of cancer families to assess how different treatments affect the family, and for health care providers to assess patients’ FQOL so interventions can be developed to improve the FQOL of their patients.

Abstract History: This abstract has not been presented or accepted for presentation in whole or in part at the SNRS or other scientific meeting.

Financial Disclosure: No, I (or a member of my immediate family) have not received something of value* from or own stock (or stock options) in a commercial company or institution related directly or indirectly to the subject of my presentation.

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