

Appendix A

Questionnaire

Code number:
I. Demographic Data Questionnaire
Part I: child's demographic data
1. Age:yearsmonths
2. Sex:malefemale
3.Type of cancer:
4. Medical treatment: () Chemotherapy
() surgery
() radiotherapy
() immune therapy
() others, please specify ·
5. Duration of illness:yearsmonthsdays
6. Times of hospitalization:(not include this time)
7. Name of hospital:
Part II: Mother's demographic data
1. Age:years
2. Marital status: marriedsingleseparated
divorcedwidowed

3.	Educational (leve:	1:	()	no formal education				
				()	primary school				
				()	junior high school				
				()	senior high school				
				()	diploma/associate				
				()	undergraduate (Bachelar)				
				() (graduate				
4.	Occupation:	()	f	arı	nei	() worker				
		()	t	eac	∶h∈	er () business person				
		6)	g	ove	err	nment service				
			h	keeper						
			h	eal	ealth personnel					
5.	Family type:	(((n	ucl	.ea	ar family				
		()	е	xte	enc	led family				
		(`)	s	ing	jlε	e-parent family				
6.	Family income	: :			/2,	Yuan/family/month				

II. Dependent-care Agent Performance Questionnaire

The following items are behaviors that you do or do not do for your child with cancer. Please indicate by circling the appropriate number that represents to what extent you do or do not do each behavior after your child has been diagnosed as having cancer. There is no RIGHT nor WRONG answer. Your honest indication is the only correct answer.

The following numbers in the right column have the different answer meanings:

- 1 = never- what you never do at any time.
- 2 = Occasionally what you sometimes do.
- 3 = Frequently what you usually do.
- 4 = always what you consistently do all the time.

Questions

- I encourage or take my child to be in place with fresh air.
 I make sure that my child is provided with foods from each of the four basic food groups.
 I remind or let my child to drink 3-5 glasses of clean water a day.
 When the weather is hot or when my child has been active, I encourage him/her to drink more water.
 I 2 3 4
- 27. I praise my child when he/she is doing well.
- 1 2 3 4
- 28. I encourage my child to be increasingly independent.
- 1 2 3 4

	•				
	•				
	•				
31.	I make sure my child takes his/her				
	medicine as ordered.	1	2	3	4
32.	I bring my child in for clinic visit as				
	appointed.	1	2	3	4
51.	I encourage the family to do things				
	together.	1	2	3	4

Appendix B

Letter asking for testing content validity of instrument

October 12, 1998

Dear nursing expert:

I am a Chinese graduate nursing student. I am going to conduct a research of "dependent-care agent performance of mothers for children with cancer". I will use Dependent-care Agent Performance Questionnaire (DCAPQ) as one part of my instrument, which is modified from Moore and Mosher's (1997).

The modified DCAPQ will be used to identify the dependent-care agent performance of mothers for their children with cancer in Chengdu, China. It includes three dimensions: universal, developmental, and health deviation.

To be sure of the content validity, I would like to invite you to evaluate this questionnaire first. Please indicate your comments about the relevance and clarity of each item, and give the mark which indicates agree, disagree, and revise it at the right side of each item.

Thank you very much for your consideration and help.

Sincerely yours,
Zhao Xiufang

Appendix C

List of experts for the validation of the instrument

Experts in Chiang Mai University, Thailand:

Assoc. Prof. Wanwilai Chumpirom

Assist. Prof. Dr. Seepan Kantawang

Assist. Prof. Dr. Prakin Suchaxaya

Assist. Prof. Dr. Sujitra Tiansawad

Assist. Prof. Dr. Chawapornpan Chanprasirt

Experts in West China University of Medical Sciences, P. R. China:

Professor Qiu Xiaoyang
Associate Professor Yang Chongli
Professor Hu Renyi

Appendix D

Verbal explanation

My name is Zhao Xiufang and I am a nurse of the Second University Hospital of West China University of Medical Sciences (WCUNS). I am conducting a nursing research project for my master's degree study that I would like to explain to you in order to see if you would be willing to participate in the project.

The purposes of this study are to learn about your caring activities for your child with cancer. Therefore, nurses can establish special nursing interventions or teaching program to help you caring for your child better. If you agree to participate, you will be interviewed and complete the questionnaire. It will take you about 25 to 30 minutes. All of you responses and information will remain confidential and your identity will not be revealed.

There are no known risks to participate in this study. However, you may have motivation to learn more how to care your child. If you have any question at any time about the study, I will be glad to answer them. If you agree to participate in this study and later change your mind, you may withdraw your consent verbally and stop your participation at any time. You should also know that whether

you participate or not, will in no way affect the care of your child in the hospital.

Zhao Xiufang

CURRICULUM VITAE

Surname, name

Mrs. Zhao Xiufang

Date of birth

March 29, 1970

Curriculum vitae

1991,9-1994,6

Associate degree in nursing science

Faculty of Nursing, West China

University of Medical Sciences (WCUMS)

Chengdu, P. R. China.

1985,9-1988,7

Diploma in nursing science in Health School, WCUMS, Chengdu, P. R. China,

Experience

1997,9-present

Master degree student of CMB in Xian

Medical University

1992,9-1997,8

Nursing staff and clinical instructor

for diploma nursing students at

pediatric ward of the Second University

Hospital, WCUMS

1988,7-1992,9

Nursing staff at pediatric ward of the

Second University Hospital, WCUMS