

# Appendix A

## Instruments

# Part I Demographic Data Form

Number:		A
Questionnaire date_		
Ageyears		
Gender	( ) Male	( ) Female
Education backgroun	d (	
( ) No education		
( ) Primary school	(1-6 grades)	Y
( ) Junior school	(7-9 grades)	
( ) Senior school	(10-12 grades)	
( ) Diploma (3 year	rs)	
( ) Associate (3 ye	ears)	
( ) University (4	years)	
Living state	( ) with parents	
	( ) with spouse	
	( ) with children	
	( ) with spouse and	d children
	( ) Alone	
Marital status	( ) single	( ) Married
	( ) widow	( ) Divorced
	( ) Separate	
Number of people und	der his/her responsib	pility
	( ) one people	( ) Two people

		(	)	Three people	(	)	Four people
		(	)	Five people	(	)	Six People
Occu	pation (at present tim	e)					
		(	)	worker	(	)	Farmer
	-	(	)	Business	()	1	Teacher
		(	)	Government officer	E	Jy	Soldier
		( >	<del>)</del>	Unemployed	C	)	Housekeeper
	(	)	Ot	her			
Fami	ly income (yuan/	pe:	r I	person/per month)			_yuan
Way	of payment						
( )	Fully reimburse	ed o	or	insurance			
( )	Partial reimbur	sec	f				
( )	Self paid	•					
Date	of burn						
Date	of admission		_				
Diag	mosis			3			
Loca	tion of burn						
(9	Entire body (at	1	as	st five sites of the	e fo	ol]	Lowings:
	face, neck, tru	ınk	, á	arm, hand, or leg)			
( )	Face and hand	)					
( )	Hand						
( )	Low leg						
( )	Others (buttock	:, t	h	igh, and back)			
Exte	nt of burn		гвя	SA, depth of burn			
Тime	s of operation		(	duration of hospital	i 7.2	at i	on days

## Part II Stress Appraisal Scale (SAS)

Direction: Difficulties that can range from minor annoyances to fairly severe pressures, or problems. The frequency and intensity of difficulties can vary from time to time. Difficulties can occur frequently or even not at all. When these difficulties do occur, you may be only somewhat or moderately bothered, or the difficulties may be extremely bothersome.

Listed in the following pages are the number of ways in which a person can feel difficulties. Read each item. If the item did not occur since you have been hospitalization following burn injury, circle zero(0). If the item did occur, indicate by circling a 1, 2, 3, or 4 to indicate how much the item bothered you.

0=Did not occur
2=Somewhat bothersome
4=Extremely bothersome

1=Did not bothersome
3=Moderately bothersome

#### Person

1.	Thought about death	0	1	2	3 4	
2.	Insufficient money for treatment					
	Or hospitalization	0	1	2	3 4	
3.	Changing daily life activities	Λ	7	2	<b>2</b> 4	

4.	Inability to take care of everyday					
	responsibility	0	1	2	3 4	1
5.	Uncertainty of my future	0	1	2	3 4	ŀ
6.	Being lonely	0	<b>\</b> 1	2	3 4	F
7.	Financial insecurity	0	1	2	3 4	Ļ
8.	Inability to express myself	0	1 1	2	3 4	Ļ
9.	My physical illness	70	1	2	3 4	
10.	Uncertainty regarding outcome of					
	The treatment	0	1	2	3 4	:
11.	Pain	0	1	2	3 4	:
12.	My disfigured appearance	0	1	2	3 4	
13.	Itching	0	1	2	3 4	
14.	Declining physical abilities	0	1	2	3 4	
15.	Not getting enough rest/sleep	. 0	1	2	3 4	
16.	Not able to do the things you					
	want to do	0	1	2	3 4	
17.	Fatigue/not enough energy	0	1	2	3 4	
18.	Regrets over past accident	0	1	2	3 4	
19.	Nightmares	0	1	2	3 4	
Envir	conment					
1.	Troublesome patients nearby	0	1	2	3 4	
2.	Sharing the room with other patients.	0	1	2	3 4	
3.	Problem getting along with other					
	care provider	0	1	2	3 4	

4.	Job insecurity	0	1	2	3	4	
5.	My current suffering situation	0	1	2	3	4	
6.	Too many interruption	0	1	2	3	4	
7.	Having to wait	0	<b>1</b>	2	3	4	
8.	Problem of keeping intimate						
	relationship with my lover/spouse	0	71.	2	3	4	
9.	Legal problem	0	1	2	3	4	
10.	Not enough time with my family	0	1	2	3	4	
11.	Prejudice and discrimination						
	from others	0	1	2	3	4	
12.	Too much noise in the room	0	1	2	3	4	
13.	Too much light in the room	0	1	2	3	4	
14.	Too low or too high temperature						
	inside the room	0	1	2 :	3	4	
Note:							
1. SAS includes two dimensions: person (19 items) and							
environment (14 items).							
2. The possible raw score ranges from 0 to 132.							

3. The possible frequency (number of stressors) ranges from

4. The possible stress appraisal score ranges from 1 to 4.

0 to 33.

# Part III Modified Jalowiec Coping Scale (MJCS)

Direction: People react in many ways to crisis and tension. Some people use one way to handle the situation; others use many coping methods. I am interested in finding out what things people do when faced with burned situations. Please estimate how often you use the following way to cope with the situation by picking one number for each item.

1=Never		2=Occasionally	3=Often	4:	=Al	ways
1.	Worry			1	2	3
2.	Cry	,		1	2	3
3.	Hope that	things will get	better	1	2	3
4.	Laugh it	off, figuring th	at things			
	could not	be worse		1	2	3
5.	Think thr	rough different w	ays to solve			
	the probl	em or handle the	situation	1	2	3
6.	Try to pu	t the problem o	ut of your			
	mind and	think of somethi:	ng else	1	2	3
7.	Let someo	ne else solve the	e problem			
	or handle	the situation	• • • • • • • • • • • • • • • • • • • •	1	2	3
8.	Day-dream	; fantasize being	g in a			
	Pleasant	place	• • • • • • • • • • • • • • • • • • • •	1	2	3

9.	Do anything just to do something			
	even if your not sure it will work	1	2	3
10.	Talk the problem over with someone			
	who has been in the same type of			
	situation		2	3
11.	Get prepared to expect the worst	>) >1	2	3
12.	Get mad, curse, swear	1	2	3
13.	Accept the situation as it is	1	2	3
14.	Try to look at the problem			
	objectively and see things all sides	1	2	3
15.	Try to maintain some control			_
	over the situation	1	2	3
16.	Try to find purpose or meaning in the	-	-	J
	situation	1	2	3
17.	Pray; put your trust in God/super		۷	3
	power/amulet/charm		_	
1.0			2	3
18.	Get nervous	1	2	3
19.0	Withdraw from the situation	1	2	3
20.	Blame someone else for your problems			
	as the situation you are in	1	2	3
21.	Actively try to change the situation	1	2	3
22.	Take out your tension on someone			
	else or something else	1	2	3
	Take off by yourself; want to			
	Be alone	1	2	3

24.	Resign yourself to the situation			
	because thing look hopeless	1	2	3
25.	Do nothing in the hope that the			
	Situation will improve or that			
	the problem will take care of itself	1	2	3
26.	Seek comfort or help from family			
	Or friends	1	2	3
27.	Try to find out more about the			
	situation so you can handle it better	1	2	3
28.	Try out different way of solving			
	the problem to see which work the best	1	2	3
29.	Resign yourself to the situation			
	because its' your fate, so there is no			
	sense trying to do anything about it	1	2	3
30.	Try to draw on past successful			
	experience to help you handle			
	the situation	1	2	3
31.	Try to break the problem down			
	into smaller pieces so you			
	can handle it better	1	2	3
32.	Go to sleep, figuring things will			
	look better in the morning	1	2	3
33.	Set specific goals to help			
	you solve the problem	1	2	3

34.	Don't worry about it, everything			
	will probably work out fine	1	2	3
35.	Set up the next best thing to			
	what you really wanted	1	2	2

### Note:

- 1. This Scale includes 35-item which represent 35 ways of coping involving two functions of coping: 20-items of problem-focused coping, 15-items of emotion-focused coping. Problem-focused coping (15-items): 6. 7. 9. 10. 13. 14. 15. 16. 21. 27. 28. 30. 31. 33. 35. Emotion-focused coping (20-items): 1. 2. 3. 4. 5. 8. 11. 12. 17. 18. 19. 20. 22. 23. 24. 25. 26. 29. 32. 34.
- 2. The possible raw score for problem-focused coping and emotion-focused coping range from 15 to 60 and 20 to 80 respectively.
- 3. The possible mean score for both problem-focused coping and emotion-focused coping range from 1 to 4.

#### APPENDEX B

### Verbal Explanation

My name is He Lianxiang and I am a nurse of the First Teaching Hospital of Hunan Medical University. I am conducting a nursing research project that I would like to explain to you in order to see if you are willing to participate in the project.

The purpose of the study is to identify the stress and coping of burned adult hospitalized patients who are scheduled to be discharged. If you agree to participate in this study, you will be asked to complete a form and a questionnaire that measures stress and coping during the course of hospitalization. It will take you about one hour to complete the questionnaires. You can either complete the questionnaire by yourself, or if you are unable to read or write. I will read each of the items to you and mark your choices on the questionnaire for you. You may choose not to answer to some or all of the questions, if you do not want to. You may ask questions or stop at any time. All of your responses and the information from your hospital record will remain confidential and your identity will not be reveal

There is no known risk or cost in participation except for the time it takes to answer the questions. Before or after completing the questionnaire, you may receive consultation regarding your problems related to rehabilitation and constructive surgery as you like. There are no other known benefits for you except the chance to share your ideas in this research which may help other patients in the future.

Are you willing to participate?

For further information please contact me at the following address:

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## LIST OF VALIDATORS

Name Title Area of experience

Dr. Ouyporn Tonmukayakul Instructor Nursing Administration

Dr. Sirirat Panuthai Lecturer Medical nursing

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### CURRICULUM VITAE

Surname, name

Ms.He Lianxiang

Date of birth

Oct. 15, 1964

Education

Deploma in nursing

The Nursing school of Hunan Medical

University in 1986

Associate degree of nursing

Hunan Medical University (HMU) in

1991

## Experience

Jul. 1986-June 1987 Nurse in Department of Medical

Nursing of the First Teaching

Hospital of HMU.

Jul. 1987-June 1988 Nurse in General Surgical

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Jul. 1989-June 1991 Studying in the Senior Nursing

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Jul.1991-Aug.1994 Nurse in Burns and Plastic Surgical

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Sept.1994-Jan.1995 Attending the training course of English at the English Training Center of HMU.

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