

**NURSING RESEARCH REVIEW FORM**

1st Review

Manuscript # 2005/201  
Manuscript title: Family caregiving in heart failure  
Manuscript type: Regular  
Number of text pgs.: 13  
Number of figures: 1  
Number of tables: 5  
Reviewer: Janice Crist  
Stat reviewer assigned?: No -- do you recommend a stat reviewer?

**Please evaluate the following with these choices: (1) adequate, (2) inadequate (describe in written review) or (3) not appropriate (describe in written review)**

Problem statement: 2\*  
Attention to relevant literature: 2\*  
Theoretical framework: 2\*  
Research design: 2\*  
Data analysis: 1  
Discussion of results: 2\*  
Organization: 2\*  
Writing style: 1

**Please rate the following topics 1-5 (with 5 being the highest rating):**

Value of topic: 4  
Probable reader interest in topic: 4  
Importance of present contribution to nursing: 4  
Priority of topic for publication: 4  
Rank this manuscript for its value: 4

**Reviewer's Recommendation (please type "X" after your choice):**

Accept without revisions  
Accept with revisions X  
Maybe accept with revisions  
Do not accept

**Comments for Editor only:**

**\* I gave a "2" above even when minor changes would bring it up to "1-Adequate." I recommend we accept if comments are addressed.**

**Please provide a comprehensive and integrated review of this manuscript.  
Be sure to present a balanced view of the manuscript's strengths and weaknesses.**

NURSING RESEARCH  
MS# 2005/201

This manuscript describes an important and interesting study that should be added to the caregiving literature. The following is my critique.

Problem Statement: The problem statement is convincing and comprehensive.

Literature Review: Fairly comprehensive; However, I was surprised not to see inclusion of Archbold & Stewart's work that has provided important knowledge about and support for comprehensive interventions regarding caregiver strain. This would also have been interesting to address in the Discussion area.

Theoretical Framework. Appropriate; but need more. The framework should be explained with another paragraph about the relationships portrayed by the model.

Style of presentation: Very professionally written and easy to follow, enjoyable to read because of the clarity, except that

(1) wording was changed slightly between abstract, body of the paper, and tables. For example:

- Abstract: line 5 uses 'control' yet in body, uses "perceived control;
- Line 13 uses poorer mental health yet in the body, uses perceived mental health.
- Line 14 uses negative caregiver outcomes and the body uses perceived negative outcomes.
- Body of paper: Page 7, Line 16 uses control over the patient's heart problems but in other parts of the paper uses control over managing the patient's heart problems.

These are examples but a word search should be done for all variables, including in the figure and tables.

(2) In the results, it would be helpful to give the data. For example, page 10, line 13, add (33 1/3 %) after "caregivers", as you did in line 22. I also would recommend using the exact value given in the table; for example, line 23, instead of rounding off to forty – three percent.

Research design: a clear, descriptive design, appropriate for the small study. I would like for more to be written about

- the procedure, p. 6, line 23, give the setting where the questionnaire administration took place (in the home or place of preference?) this is of interest to others who conduct research with caregivers.
- Sample: how was the size of sample determined; was this the amount that was projected; were there eligible people who declined? Did the current sample differ from characteristics from the larger sample, which may have skewed results? Participants are described as "white," which is a US Census designation for race, but it would be more comprehensive to address ethnicity, simply by specifying whether the "white" participants

were non-Hispanic white? Cultural differences would be important to acknowledge, if there were a mix of Anglo and Latino participants. Latino caregivers experience burden and control very differently from Anglo caregivers. I assume all were non-Hispanic, but this is not known unless it is specified. (p. 5, line 16; p. 6, line 6).

Data analysis: Appropriate; but

- in the data analysis description, p. 9, wasn't Spearman's rho also used in aim 3? (lines 3-4).

- on page 10, was physical functioning left out for a reason (see physical health, line 22)

- for ease of understanding results when midpoints are discussed (for example, p. 9, line 13), it would be helpful to the reader to add midpoints to Table 1, perhaps adding an extra column after the Possible and Actual Range column.

Organization: In general, well organized. However, the order of discussion of variables varies and is somewhat confusing going from the abstract, body, and figure and table. For example, p. 7, Perceived control over the patient's heart problems (LINE 16) was discussed in the abstract before difficulty (lines 2-15); Table 1 lists mental health subscale before general health subscale but it is discussed in a different order in the paper.

Overall, a well-written paper. Except for the literature and sample issues, my comments have more to do with presentation (order of variables and more numerical data), which can be easily remedied.