### RESEARCH METHODOLOGY

This section is regarded as the blue-print for any research activity specific to the study design in an explicit manner. The present study evaluates the socio-economic, prescriptive, and prospective health seeking behaviour of tobacco related cancer patients. This study is basically based on the primary data and supported by some secondary information. The samples of the study are the patients reported to CCH and SMCH. The patients visit to CCH and SMCH are huge in number in every year, which is too vast to tackle in a research work. In view of this, the present study has adopted purposive sampling method and two types of sampling collection techniques were used in the present study, the first stage is purposive technique. After that the researcher decided to start collecting information from the samples. As per the objectives of the study, only persons suffering from cancer were interacted and with the outmost caution the samples were collected and it was completely purposive in nature. This chapter also discussed the development of framework which is most important to carry on or conduct and analysis a particular study. The following are the various points in this chapter which will be discussed in detail with the following sub-headings. These are:-

- 1. Statement of the problem
- 2. Objectives of the Study
- 3. Rationale of the Study
- 4. Research Design and Sampling
- 5. Tools of Date collection and Statistical Analysis of data
- 6. Limitation of the study
- 7. Organization of the study
- 8. Conceptual definitions

# **Statement of the problem:**

After going through the review of literatures, it has been found that the rate of incidence of cancer, especially the tobacco related cancer, is increasing day by day and studies on health seeking behaviour of tobacco related cancer patients are not found in a good number. If we look into the report of 2003-04 of 'National Cancer Registry Programme' of Indian Council of Medical Research, the leading sites of cancer in Silchar town is Larynx (in male) and Breast (in female).

PBCR Report of Cachar District of 2007-08 states that the total number of cancer cases of Cachar District in 2007-08 is 2495 (1555 male & 940 female). Out of the total number of cancer cases, the tobacco related cancer is 942 in male and 265 in female.

It is clear that the incidence of cancer, especially the tobacco related cancer is increasing at an alarming rate in the North East as well as in the Cachar district. The study is significant in this particular field to explore the health seeking behaviour of tobacco related cancer patients in Cachar with contextual understanding. The, prime motto of the study is to fulfill the following objectives.

# **Objectives of the Study:**

The specific objectives of the study are:

- To know the correlation between Socio-economic status and Health Seeking Behaviour of tobacco related cancer patients of Cachar District.
- 2. To get an idea of the Prospective and Prescriptive Health Seeking Behaviour of the male and female patients in the study area.
- 3. To assess the Problems and Constraints in accessing Treatment and suggest possible Social Work Intervention to improve the situation.

## **Rationale of the Study:**

Cancer is spreading at an alarming pace in India. From the data of NCRP, ICMR, it has been found that the incidence of cancer, especially the tobacco related cancer is spreading in a high rate in the North-East India in comparison to the other parts of the country. It means the consumption of tobacco is higher in northeast than the rest parts of the country and this leads to the high rate of tobacco related cancer incidence in northeast. In this connection, this study is to explore the nature and incidence of tobacco related cancer in Cachar district. The study would explore the socioeconomic and cultural factors of patients suffering from tobacco related cancer as well as the health seeking behaviour of patients suffering from tobacco related cancer. The study also suggests the implications for social work interventions in the context of Cachar district.

# **Methodology:**

## **Research Design**

For the purpose of the present study, "Descriptive Research Design" has been used to gather information. The Descriptive Research Design is generally used to describe a behavior or type of subject. Thus, the

descriptive research design helps to acquire a lot of information through description.

#### Sources of data

Both primary and secondary data have been collected for the study. The secondary data have been collected from government reports, annual reports of "Population Based Cancer Registry" (a project under National Cancer Registry Programme, sponsored by Indian Council of Medical Research) of Cachar District and Hospital Based Cancer Registry (a project under National Cancer Registry Programme, sponsored by Indian Council of Medical Research) of Cachar Cancer Hospital to understand the prevalence tobacco related cancer among the males and females in Cachar District.

The primary data have been collected from the cancer patients through direct interview. Information has been collected mainly on the health seeking behaviour of patients suffering from cancer as well as the problems and constraints in access to health service.

#### **Tools of Data Collection**

Collection of data is the most important part of a research study for having valid and reliable data on the basis of which the inferences have been drawn. It is also necessary to select the reliable and valid tool of data collection for getting authentic information from the respondents. The

researcher followed an interview schedule based on survey with face to face interaction. Depending on the objectives of the study, the following tool of data collection has been developed and used.

Accordingly, the interview schedule of the study has been designed and divided into many sections namely:-

- 1. <u>Demographic Profile</u>: This section contains the information about the socio-economic background of the respondents, age, gender, family income, family size, educational qualification, where all the questions have been categorized.
- 2. <u>Knowledge and awareness</u>: Here, awareness and knowledge of the respondents about tobacco related cancer and challenges are examined
- 3. <u>Tobacco chewing and smoking habits</u>: This part includes the information about the tobacco chewing and smoking habits of respondents and their responses to the disease and treatment.
- 4. Prescriptive and prospective health seeking behaviour of respondents.

In addition, interview guide has been used for the doctors, nurses etc. to elucidate the information about the health care seeking behaviour of the patients.

The study is based on the primary data collected through quantitative and qualitative methods. Case studies constitute the qualitative method, while field survey is the method of quantitative data collection. Field survey with structured household interview schedule has been conducted to probe into the health seeking behaviour of cancer patients in Cachar district. Case studies have also been used to get an in-depth understanding of the problem.

## **Administration of Tools**

Administration of tools for collecting data is the next important step in any research survey. In the present study, face to face interview has been conducted through the interview schedule rather than the self filling questionnaire survey, telephonic or mail-survey etc. By using the face to face survey method, various things can be defined and explained more thoroughly.

A pilot study has been conducted by visiting the sources, established contacts with officials and the patients. Then the interview schedule have been pre-tested in the field by interviewing 20 patients in order to see how well it serves the purpose of obtaining needed data.

Accordingly, necessary changes have been made to the interview schedule to make it easily administrable.

The data collection phase started in the month of November 2011. To begin with, the patients have been explained about the research study and requested to spare some time to give the information. The patients have been interviewed after signing the consent form i.e. with their due permission.

Above all, at the beginning the researcher built rapport with the respondents with utmost care. According to Tony Robins, "Rapport is the ability to enter someone else's world, to make him feel that you understand him/her, that you have a strong common bond."

The researcher built good rapport with the respondents which helped the researcher to develop trust between the respondents and the researcher. Due to these skills, much information related to the present study have been collected by the researcher.

# **Sampling**

### Universe

The universe of the study is the Tobacco Related Cancer (TRC) cases of PBCR of Silchar Medical College and Hospital and HBCR of Cachar Cancer Hospital of Cachar District. The patients, reporting to the institutes, constitute the respondents for the study.

## Sampling Technique

Purposive sampling technique has been used for the present study.

## **Research Questions**

In view of the proposed study, as discussed above, the study raised the following research questions for persuasion. The research questions are as follows:-

- 1. What are the respondent's attitudes towards the cancer disease and its treatments?
- 2. Why the cancer affected people are not willing to go for treatment even after diagnosis?
- 3. How the respondents feel prior to, during and following their treatment for cancer?
- 4. Whether, due to this illness their social functioning gets affected?

# Sample Size

In order to carry out the study around 150 cancers patients have been interviewed from the universe. And in order to substantiate the study, at least five doctors engaged in the treatment, tobacco related cancer patients, ten supporting staffs dealing with TRC patients and family members have been interviewed.

# **Analysis of Data**

In the study, both quantitative and qualitative kinds of analysis have been done. The responses from the information proforma and interview schedule have been coded for analysis and tabulation. The quantitative data collected through interview schedule have been compared with the qualitative findings of informal discussion. Both quantitative and qualitative data have been analyzed in descriptive manner to support the objectives of the proposed study. All these data have been gathered and entered into an electronic database of SPSS version 14.0 for Windows followed by analysis and interpretation of the data.

#### **Hurdles Faced:**

During data collection for the research, the researcher has faced many difficulties in getting permission from the sources. The researcher has made a presentation of the synopsis to convince them about the following of the Professional ethics in dealing with the patients. The process of actual data collection has started only after gaining the permission from both the institutes under study. Another problem has arisen during interviewing the patients, where some of the patients sometime have refused to interact or give reply, as the study is based on the patients suffering from tobacco related cancer. The process of data collection has taken a longer time in finding the tobacco related cancer patients reporting to these institutions.

## **Limitations of the Study:**

Although this study has gained some academic insight into health seeking behaviour of tobacco related cancer patients in Cachar District, there are several limitations which the researcher has not crossed but the limitations need to be taken into consideration in assessing the study. First of all, the size of the sample is relatively small. All the participants are from Cachar Cancer Hospital and Silchar Medical College & Hospital in Cachar District specifically. Secondly, participants' health-seeking behaviour has been assessed mainly through face-to-face interaction and their living status cannot be assessed only through direct interview.

# **Operational Definitions:**

## **Tobacco Related Cancer**

The number and relative proportion of cancers associated with the use of tobacco has been worked out according to the monograph of the International Agency for Research on Cancer (IARC 1987). The anatomical sites of cancer that have been associated with the use of tobacco (TRC) as per that monograph include lip, tongue, mouth, pharynx including oropharynx and hypo pharynx, esophagus, larynx, lung and urinary bladder.

# **Health Seeking Behaviour**

Health behaviour refers to all those things humans do to prevent diseases and to detect diseases in asymptomatic stages. Illness behaviour refers to all those activities designed to recognize and explain symptoms after one feels ill, and sick role behaviour refers to all those activities designed to cure diseases and restore health after a diagnosis has been made.

# **Prospective**

Expected or expecting to be something likely to happen particular in the future.

# **Prescriptive**

A prescriptive approach to something involves telling people what they should do, rather than simply giving suggestions or describing what is done.

# **Population Based Cancer Registry (PBCR)**

Population Based Cancer Registry is a project under National Cancer Registry Programme, an Indian Council of Medical Research (ICMR) project. It registers all the cancer cases who reside within the defined area of registry from hospitals, nursing homes, private laboratories etc.

# **Hospital Based Cancer Registry (HBCR)**

Hospital Based Cancer Registry is a project under National Cancer Registry Programme, an Indian Council of Medical Research (ICMR) project. It registers all the cancer cases; visit the concerned hospital for treatment, irrespective of areas.

## **Socio-Economic status**

Socio-economic status (SES) is evaluated as a combination of factors including income, level of education, and occupation. It is a way of looking at how individuals or families fit into society using economic and social measures that have been shown to affect individuals' health and well-being.