

**Citation:** Jemeli, T. A; Munyua, J & Acheng, L. (2020). Relationship between Counselors' Use of Person Centered Principles and Stress Management. *Journal of African Interdisciplinary Studies*, 4(10), 86 – 97.

## **Relationship between Counselors' Use of Person Centered Principles and Stress Management among Cancer Patients at Moi Teaching and Referral Hospital, Kenya**

By

Tenai Jemeli Arusei<sup>1</sup>: Co-authors; Dr. Jennifer Munyua<sup>2</sup> and Dr. Sr. Lucy Acheng<sup>3</sup>  
The Catholic University of Eastern Africa

### **Abstract**

The purpose of this study was to determine the relationship between counselors' use of person-centered principles and stress management among cancer patients at Moi teaching and referral hospital. This is due to the fact that upon diagnosis of cancer on a patient, the news can break the heart before proper preparation is made. The study desired to investigate if counselors' use of person-centered principle contributed to stress management among cancer patients. The study was directed by the following research question; what relationship exists between empathic practices, practice of being genuine and unconditional positive regard by counselors and stress management among cancer patients MTRH? The study was guided by client centered theory. Correlational research design under quantitative paradigm was employed. The target population in this study included Cancer patients receiving psychological treatment at Moi teaching and referral hospital both in-patients and out patients. The total number of cancer patients counseled per month in the oncology clinic was 200 clients. The study adopted purposive sampling procedure and Automatic inclusion. The sample size was determined based on the average attendance at the clinic per month as per Slovin's formula. Sample size was therefore be 133 patients and 1 psychological counselor. This study used questionnaire as data collection instrument. Pilot testing was done on small sample who did not take part in the final study to judge the face validity of the tools while expert's comments and recommendations was used to determine content validity. Test retest method was used to determine reliability of the instruments. The data was analyzed using SPSS software version 21.0. Descriptive statistics was summarized using frequencies, percentages, mean and standard deviation. Inferential statistical tests including Pearson product moment correlation was used assess the relationships and correlations between empathic practices by counselors, practice of being genuine and unconditional positive regard by counselors and stress management among cancer patients at MTRH. A significant relationship was considered at  $p < 0.05$ . Presentation of results was through tables. The study established that there was relationship between empathic practices ( $r = 0.571$ ,  $p = 0.000$ ), practice of being genuine ( $r = 0.723$ ,  $p = 0.000$ ) and unconditional positive regard by counselors ( $r = 0.520$ ,  $p = 0.000$ ) and stress management among cancer patients at MTRH. The study concluded that there was relationship between counselors' use of person-centered principles and stress management among cancer patients at Moi teaching and referral hospital. The study recommended that number of psychological counselors in the oncology department to be increased since there is only one counselor, to enable access of psychological services to all cancer patients since it has proven important in managing stress among cancer patients.

**Key Words:** Person Centered Principles, Counselors, Cancer patients, Stress Management, MTRH, Kenya

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### **Introduction**

Cancer is the second leading cause of death globally (8.8 million deaths in 2015) (WHO, 2017) while in Kenya, it is the third leading cause of death after infectious and cardio vascular diseases (NCDs country pole, 2014). According to Eldoret cancer registry, cervix, breast and oesophagus cancer are the most common among females and oesophagus, skin, Non Hodgkin Lymphoma and prostate cancer among males (Tenge, 2009). Stress refers to a situation where an individual perceive that they cannot adequately cope with the threats to their well beings (Sarafino, 2012). Projection shows shift by 2020 from infectious diseases to psychological disorders including depression (WHO, 2017). The news of cancer diagnosis can break the heart before proper preparation is made. Patients may have fear of death, disruption of life plans, changes in body image and self-esteem, change in lifestyle, financial concerns and they experience varying levels of stress (Artherholt & Fann, 2012). Cancer has become a monster since many individuals die because of this pandemic. People have become terrified such that when diagnosed with cancer they become very depressed, terrified and others even have decided to commit suicide than going through a lot of pain and struggle in trying to cure this incurable disease.

In this study stress refers to cognitive, emotional and behavioral difficulties that an individual exhibits after having been diagnosed with cancer. The cognitive signs that these individuals exhibits include; depression, hopelessness, suicidal thoughts, low self-esteem, negative thinking and seeing only the negatives and anxiousness. Emotional signs include; inability to relax, sense of isolation and loneliness, tearful attitude, feeling overwhelmed intense anger and moodiness. Behavioural symptoms that these cancer patients shows due to stress are difficulty in relations, eating too much or too little, isolating oneself from others, neglecting responsibilities, withdrawal, suicidal tendencies and attempts and drug and substance abuse. Individuals throughout the world are reacting physically, emotionally and mentally to constant stress. The clinical manifestations of stress are seen in the doctor's office every day. A United nation report labeled stress as the 20<sup>th</sup> century disease a few years later a World Health Organization called it a worldwide epidemic. Projections show a shift by 2020 from infectious diseases to neuro psychological disorders (WHO, 2017).

Person centered therapy encompasses the fact that there is a basic trust to be found in a client's ability to move in a positive direction if the right elements are provided by the counselor (Corey, 2009). Change can most effectively be accomplished through this therapy if the counselor exhibit three main principles of person-centered approach. They are; empathy, genuineness and unconditional positive regards. Empathic practices included: not interrupting the client, dismissing the client's beliefs, being judgmental, recognizing and acknowledging client's emotions (Elliott, Bohart, Watson & Greenberg, 2018). Genuineness included; use of self-disclosure where necessary, honest response about the client's progress, matching verbal and non-verbal, always responding to any questions the clients have, giving the client the room and letting them speak anything that they feel like during the session. Unconditional positive regards by the therapist included; Respect for the client, being non-judgmental and impartial, valuing a person and accepting them as a unique individual,

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acceptance of the client and their views, opinions and beliefs, nurturing and caring for another person and being conscious of their needs, being compassionate, and understanding a person's personal struggle with issues and problems.

### **Statement of the Problem**

Cancer is the second leading cause of death globally and was responsible for 8.8 million deaths in 2015 (WHO, 2017) while in Kenya, it is the third leading cause of death after infectious and cardio vascular diseases (NCDs country pole, 2014). Stress is the unpleasant experience of an emotional, psychological, social, or spiritual nature that interferes with one's ability to cope with cancer and its treatment (Sarafino, 2012). Cancer is a major cause of distress among many people because of its inevitability, pain and suffering that comes with it. Patients may overestimate the risks associated with treatment and the likelihood of a poor outcome. Stress ranges from common normal feelings of vulnerability, sadness and fears, to problems that can be disabling such as depression, anxiety and spiritual crisis. Individuals with cancer diagnosis or treatment regimen may experience varying level of stress including fear of interrupted life plans, change in body image, lifestyle and fear of death (Angachi, 2014). Cancer patients in public hospitals including Mtrh are usually stressed during their cancer journey unlike cancer patients in private hospitals. In Mtrh it could be due to the fact that patients are more than counselors in charge of oncology department since the hospital serves patients from Western Kenya, North rift and South rift regions both inpatient and outpatient services (Angachi, 2014).

Majority of studies have focused on other strategies of stress management among cancer patients. For example, a study by Andrade, Delvin & Lima (2017) outlined that improving conditions of hospital rooms would help in stress management among cancer patients, another study by Jane & Erick (2018) showed that financial well-being would help in stress management among patients with breast and cervical cancer in Kenya. An individual diagnosed with advance cancer may be helped to manage stress by use of family therapy and support group. However, little has been investigated on the relationship between person centered principles by counselors and stress management among cancer patients hence the need for this study.

### **Research Questions**

The study was guided by the following research questions;

- i. What relationship exists between empathic practices by counselors and stress management among cancer patients at MTRH?
- ii. To what extent does practice of being genuine by counselors relate to stress management among cancer patients at MTRH?
- iii. What is the relationship between unconditional positive regard by counselors and stress management among cancer patients MTRH?

### **Theoretical Framework**

The study was guided by client centered theory whose proponent is Carl Rogers (1961, 1980). This theory is based on concepts from humanistic psychology. Carl Rogers believes human tend to develop in a positive and constructive manner if a climate of respect and trust is established. He maintains that there are three attributes that a counselor should maintain when interacting with their patients which are genuineness or realness, unconditional positive regard which is acceptance and caring for the patient and empathic understanding the ability

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to deeply grasp the subjective world of another person, being on the shoe of the patient (Corey, 2009).

According to this theory, counselors should provide safe and conducive environment for their clients and possess the three attributes in order for clients to freely and openly express themselves, improve their well-being, willingness to be a process and increased spontaneity and aliveness. Carl Rogers states that counselors should relate with the patient not as a physician diagnosing a disease but as one human being to another. He referred to the client as a person and not as a patient. When the health practitioners are genuine, accept the cancer patients unconditionally and be on their shoes by being empathetic when communicating with them, the patients will feel they are cared for and they will trust the health practitioners. By doing that, they will be free to ask anything concerning their health condition and treatment that they are not sure and they will adhere to treatment because they will have been explained well what it is and what it entails in a manner of respect and empathy thus helping them cope with stress (Hough, 2007). The role of person-centered counselor is rooted in their ways of being and attitudes, not in techniques designed to get the client to do something. Research on person centered counseling seems to indicate that the attitude of counselors rather than their knowledge, theories or techniques facilitate behavior change in the clients (Corey, 2009). Basically, counselors use themselves as an instrument of change. When they encounter the clients on personal level counselors' role is to be without roles. Their function is to establish a counseling climate that helps the client to grow. The person-centered counselor thus creates a helping relationship in which clients experience the necessary freedom to explore areas of their life that are now either denied, challenging or distorted. The counselor therefore must be willing to be real in the counseling relationship. Through their attitudes of genuine caring, respect, acceptance and understanding, clients are able to loosen their defenses and rigid perceptions that they may be having about cancer and their condition and move to a higher level of functioning (Tolan, 2012). Therefore, in order for the client to achieve psychological contact they must have the capacity to perceive and experience oneself as meaningfully present and to perceive and experience others as meaningfully present. Without psychological contact between the client and the therapist, the subsequent conditions cannot be realized in therapy. This theory was adopted since it clearly explains that the counselor can manage the client's stress as they are going through cancer journey if they use the three core conditions of client centered theory of empathy, genuineness and unconditional positive regards.

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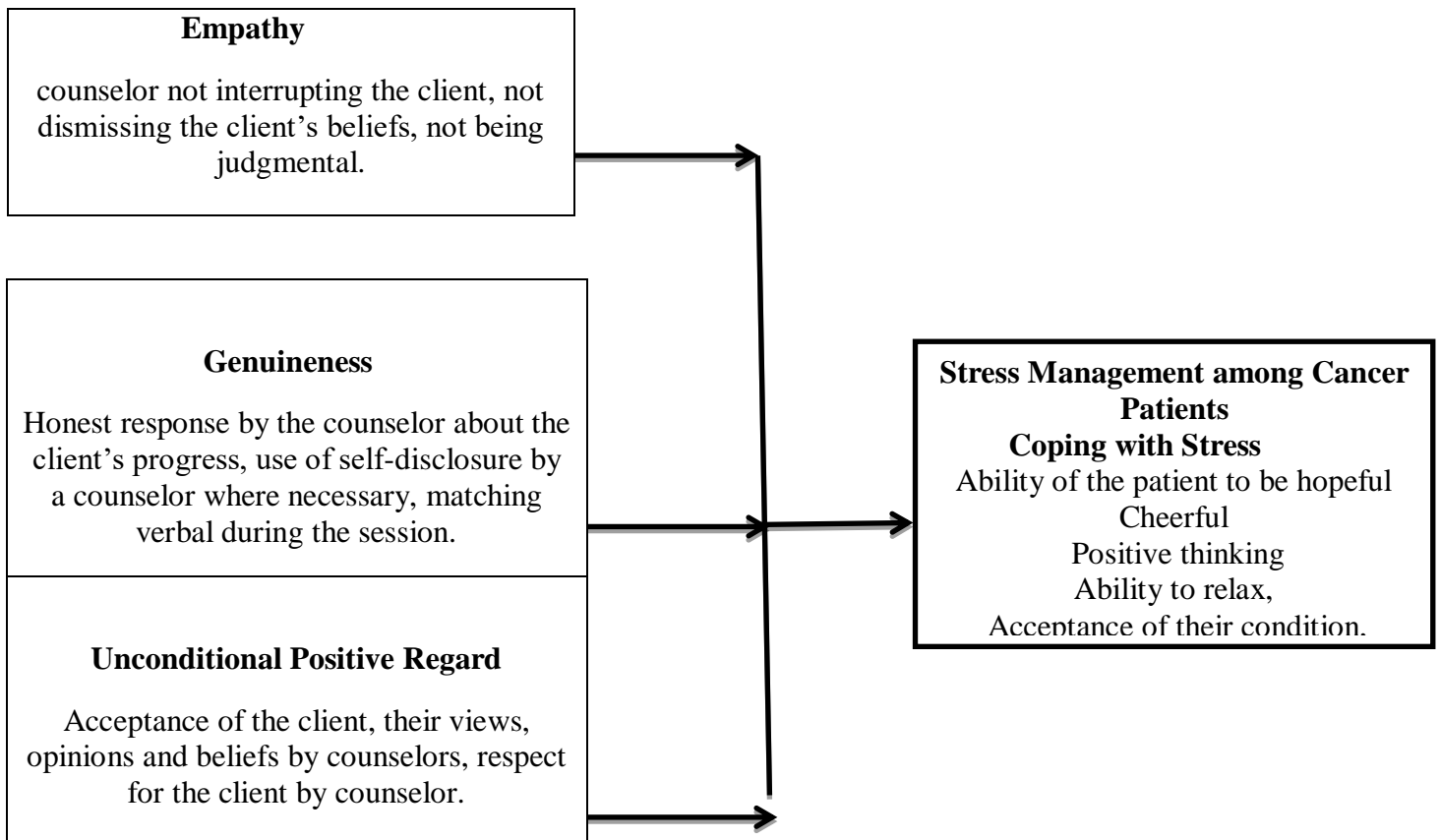
### Conceptual Framework

This study was guided by the following conceptual framework, which was used to explain the interrelationship between the variables.

#### Independent Variables

#### Dependent

#### Person Centered Principles



(Source; Researcher 2019)

### Review of Related Literature

#### Cognitive Behavioral Therapy

CBT is based on the idea that how one thinks, feel and behave all interact together. Specifically, thoughts determine feelings and behavior. Therefore, negative and unrealistic thoughts can cause distress. This therapy helps people to develop alternative ways of thinking and behaving which aims to reduce psychological distress (Greer, 2008). Counselors can use to help patients cope with cancer diagnosis distress by managing their feelings, challenging their negative thoughts and replacing the negative thoughts with more helpful ones. CBT is narrow in scope. This therapy focuses on the individual's capacity to change their thoughts, feelings and behavior but does not address wider problems that these cancer patients face that often have a significant impact on their health and wellbeing in their cancer journey.

#### Cognitive Appraisal Theory

This theory was proposed by Lazarus and Folkman in 1984. Cognitive appraisal is the subjective interpretation made by an individual to stimuli in the environment. They suggested



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two types of coping responses to stress that is emotion focused and problem focused. Emotion focused coping involves trying to reduce the negative emotional responses to stress. Techniques here include distraction to take mind off the issue, suppressing emotions, meditation and emotional disclosure (Cheng, Tsui & lam, 2015). Problem focused coping targets the cause of stress in practical ways such as use of chemotherapy to treat cancer thus reducing stress on cancer patients. Patients who used emotion focused strategies such as eating a lot and drinking to avoid stressful emotions reported poorer health outcomes. (Gomes, Rui, Faria, Susana, Lopes & Heitor, 2016). Patients who used avoidance strategies such as denial deteriorated more quickly than those who faced up their problem.

### **Gestalt Theory**

The founders were Fredrick (Fritz), Perls (1969) and Laura (1976). Gestalt therapy stresses feelings and influence of unfinished business on the behavior of a person. It strives for wholeness of a person integrating feeling, thinking and behavior. The client is challenged to accept their responsibility for internal support than depending on external support therefore they can decide to accept their cancer condition and live positively to avoid stress. For many people the power of the present is lost and they invest their energies in moaning their past and ruminating about how life could and should have been different hence power of the present diminishes. Gestalts have stressed becoming aware of and expressing feelings to the neglect of examining thoughts. If cognitive work is not done, Clients are likely to be left unfinished. Also, clients who have difficulty in imagining and fantasizing may not benefit from this therapy.

### **Research Design and Methodology**

#### **Description of Research Design**

This study employed correlational research design because it aims at describing the strength of the relationship between two or more variables (Creswell, 2014). This method involves collecting data in order to determine whether and to what extent a relationship exists between two or more quantifiable variables.

#### **Description of the Target Population**

According to Alasuutari (2010) a target population is a large population from which a sample is drawn. The target population in this study was Cancer patients receiving psychological treatment at Moi teaching and referral hospital both in-patients and out patients. The total number of patients with cancer counseled per month in the oncology clinic were 200 patients in a month.

#### **Description of the Sample and Sampling Procedures**

##### **Sampling Procedure**

Sampling is the process of selecting a number of individuals for a study in such a way that the individuals selected represent the large group from which they were selected (Babbie , 2014). The study adopted purposive sampling because there are limited number of patients counseled per week in the oncology clinic who are appropriate for the study. In this method the researcher chooses the sample based on who they think would be appropriate for the study (Creswell, 2015). Automatic inclusion was used to recruit Oncology Counselor because there was only one in number at oncology department.

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### **Sample Size Determination**

A sample is a smaller group of subjects obtained from the accessible population (Creswell, 2014). Sample size determination was based on the average number of cancer patients counseled at the oncology clinic per month as per Slovin's formula;  $n=N/(1+N(e)^2)$  where;

n= number of respondents to be sampled,

N=Total number of counseled cancer patients seen per month

e=level of precision; 5%.

The total number of patients with cancer seen per month in the oncology clinic were 200 patients. From the above formula,

$$n = \frac{200}{1 + 200(0.05)^2}$$
$$= 133$$

n= 133 respondents

Automatic inclusion method included one counselor because there was only one psychological counselor in charge of the oncology clinic.

### **Description of Research Instruments**

The study instruments were researcher designed questionnaire for cancer patients and Interview guide was used psychological counselor. The two instruments were used to supplement each other and to give a deeper and wider exploration into research perspective which gave the research more quality. According to Babbie (2014) a questionnaire is a set of questions designed in a form format and is employed by researchers in eliciting information for the purpose of data analysis. The questionnaires contained close ended questions. The items in the questionnaire were rated using using likert scale.

### **Inclusion Criteria**

- i. All counseled cancer patients 18 years and above.
- ii. Counseled cancer patients attending the oncology clinic at MTRH both inpatient and outpatient.
- iii. Counseled cancer Patients who gave an informed consent.

### **Exclusion Criteria**

- i. Cancer patients diagnosed with cancer but had not received any psychological counseling.
- ii. Patients who were unwilling to give an informed consent to participation in the study.
- iii. Patients who were too sick and unable to participate.
- iv. Children 18 years and below diagnosed with cancer and were attending oncology clinic at MTRH.

### **Validity of the Instruments**

Validity is the process of establishing whether the research instrument is measuring what it is supposed to measure (Berg & Lune, 2012). The instruments were amended according to the expert's comments and recommendations who are more conversant in the area of counseling theories and stress management to judge the validity of the questionnaire and the questions in the written task. This helped the researcher determine if the questionnaire will answer all the questions with the aim of ensuring that relevant data was collected. The opinion of experts played an important role in determining the validity of the research instruments.

Face validity was carried out by Pretesting of instruments on small sample during pilot study to judge validity of the questions so as to ensure it is not misunderstood or

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misinterpreted by respondents (Cooper & Schindler, 2006). Content validity was determined by doing a thorough literature review study on which content of the questionnaire was based on.

### **Pilot Testing**

Piloting is trying out of research instruments on the respondents who were not used in the main study (Cohen, Manion, & Morrison, 2011). Pilot testing was done on a small representative sample to ascertain the feasibility of the study. The pilot testing was done in Ampath centre on cancer patients who were not included in the study. Piloting ensured that the research instruments did not have potential misunderstanding.

### **Reliability of the Research Instruments**

This refers to the consistency of instruments (Alasuutari (2010). It is the degree to which a research instrument yields consistent results of data after repeated trials. Test retest method was used to determine reliability of the instruments to find out if there was any weakness so that it could be corrected. In this case reliability of instruments of the research was done by administering questionnaires twice on a small sample of respondents in a pilot study and the two scores obtained were then computed and compared. The two scores were subjected to Pearson correlation analysis to compute reliability coefficient. An alpha value of 0.7 was considered reliable as suggested by Kothari (2004).

### **Description of Data Collection Procedures**

Permission to carry out the study was sought after getting introductory letter from The Catholic University of Eastern Africa Gaba campus. The researcher then used the letter to seek ethical approval and CEO approval from Institutional Research and Ethics Committee (IREC) Moi Teaching and Referral Hospital/ Moi University Ethics and Research Committee then obtained research permit from National Commission for Science, Technology and innovation (NACOSTI). After obtaining the permit, Informed consent to the cancer patients who met the inclusion criteria was signed before data collection. Consent explanation to the patients on what participation entail, Voluntarism, potential risks and benefits, the participant's ability to withdraw from the study at any time without negative repercussions as addressed in the consent documents was put in place. To ensure confidentiality the study used numbers instead of names. Access to data was limited to the researcher only. The patients who did not wish to participate in the study had right to do so and they were not discriminated nor denied any benefits. Data analysis is the process through which the data that has been collected is examined (Tromp & Kombo, 2006). The researcher used quantitative and qualitative analysis after collection of data from the field. Data obtained was organized, coded and analyzed using Statistical Package for Social Sciences (S.P.S.S) software version 21.

Descriptive statistics was summarized using frequencies, percentages, mean and standard deviation, to establish the socio demographic data of the respondents such as age, gender and stage of cancer. Also, to establish counselor's use of person-centered principles and stress management among cancer patients. Inferential statistical tests including Pearson product moment correlation was used assess the relationships and correlations between empathic practices by counselors, practice of being genuine and unconditional positive regard by counselors and stress management among cancer patients at MTRH. A significant relationship was considered at  $p < 0.05$ . Presentation of results was through tables. Taket (2010) noted that, ethical issues are important in every research thus must be considered. In



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these considerations the following measures were undertaken: In line with human ethics procedures the researcher sought permit from the National Commission for Science, Technology and innovation (NACOSTI) and Institutional Research and Ethics Committee (IREC) Moi Teaching and Referral Hospital/ Moi University Ethics and Research Committee which is aimed at approval and ensuring the ethical acceptability of the research involving human participants and CEO approval letter to conduct research in Moi Teaching and Referral Hospital also introductory letter from the university.

The objectives, issues, risks and benefits of the study were conveyed to the participants. Formal consent was obtained from the participants prior to administration of the questionnaires. The participants who agreed to participate were informed that they were free to withdraw from the study at any time, the privacy of the participants and the confidentiality of data obtained from the participants was strictly maintained in such a manner that the participants cannot be identified in the report or any related publications. Information about the researchers, the study and the intent of the study was provided.

### **Results and Discussion**

The purpose of this study was to determine the relationship between counselors' use of person-centered principles and stress management among cancer patients at Moi teaching and referral hospital. This is due to the fact that upon diagnosis of cancer on a patient, the news can break the heart before proper preparation is made. The study desired to investigate if counselors' use of person-centered principle contributed to stress management among cancer patients. The study was directed by the following research question; What relationship exists between empathic practices, practice of being genuine and unconditional positive regard by counselors and stress management among cancer patients MTRH? The study was guided by client centered theory.

Correlational research design under quantitative paradigm was employed. The target population in this study included Cancer patients receiving psychological treatment at Moi teaching and referral hospital both in-patients and out patients. The total number of cancer patients counseled per month in the oncology clinic were 200 clients. The study adopted purposive sampling procedure and Automatic inclusion. The sample size was determined based on the average attendance at the clinic per month as per Slovin's formula. Sample size was therefore be 132 patients and 1 psychological counselor. This study used questionnaire and interview guide as data collection instrument. Pilot testing was done on small sample who did not take part in the final study to judge the face validity of the tools while expert's comments and recommendations was used to determine content validity. Test retest method was used to determine reliability of the instruments. The data was analyzed using SPSS software version 21.0. Descriptive statistics was summarized using frequencies, percentages, mean and standard deviation. Inferential statistical tests including Pearson product moment correlation was used assess the relationships and correlations between empathic practices by counselors, practice of being genuine and unconditional positive regard by counselors and stress management among cancer patients at MTRH. A significant relationship was considered at  $p < 0.05$ . Presentation of results was through tables.

### **Empathic Practices by Counselors and Stress Management among Cancer Patients**

The findings of the study ( $r = 0.571$ ,  $p = 0.000$ ). The  $p$  value obtained was  $p = .000$  which was less the level of significance 0.05 revealed that there is relationship between empathic practices by counselors and stress management among cancer patients at MTRH. From the findings it was deduced that majority of cancer patients admitted that counselors in Moi teaching and referral hospital at the oncology clinic were empathic in that they do not

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interrupt patients during the counseling session, do not dismiss the beliefs which patients hold, understands patient's situation without judging them, recognize and acknowledge client's emotions and listen actively to clients and give them ample time to express their issues and concerns. From the findings it was deduced that empathic practices of counselors contributed to patient's ability to cope with stress during their cancer journey. Therefore, there was relationship between empathic practices by counselors and stress management among cancer patients at MTRH.

### **The Practice of being Genuine by Counselors and Stress Management among Cancer Patients**

The findings of the study ( $r= 0.723$ ,  $p= 0.000$ ). The  $p$  value obtained was  $p= .000$  which was less the level of significance  $0.05$  revealed that there was relationship between practice of being genuine by counselors and stress management among cancer patients at MTRH. The findings revealed that majority of cancer patients admitted that counselors in Moi teaching and referral hospital at the oncology clinic use self-disclosure where necessary to help patients deal with their condition better, provide honest response about client's health progress regardless of how deteriorating it was, throughout the session match verbal and non-verbal communication, provide positive response on each question that clients have regardless of how petty it is and give clients room to speak anything that is burning. From the findings it was deduced that Practice of being genuine by counselors contributed to patient's ability to cope with stress during their cancer journey. Therefore, concluding that there was relationship between practice of being genuine by counselors and stress management among cancer patients at MTRH.

### **Counselors' use of Unconditional Positive Regard and Stress Management among Cancer Patients**

The findings of the study ( $r= 0.520$ ,  $p= 0.000$ ). The  $p$  value obtained was  $p= .000$  which was less the level of significance  $0.05$  revealed that there was relationship between Counselors' use of unconditional positive regard and stress management among cancer patients at MTRH. The findings revealed that majority of cancer patients admitted that counselors in Moi teaching and referral hospital at the oncology clinic respect clients during counseling session, value and accept clients as unique individuals, accept client's views, opinions and beliefs without being Judgmental, are caring and show being conscious of patient's needs and lastly are compassionate, and understands patient's personal struggle that they encounter on cancer journey. From the findings it was deduced that Counselors' use of unconditional positive regard contributed to patient's ability to cope with stress during their cancer journey. The findings concluded that there was relationship between Counselors' use of unconditional positive regard and stress management among cancer patients at MTRH.

### **Conclusion and Recommendations**

#### **Empathic Practices by Counselors and Stress Management among Cancer Patients**

The study found out that empathic practices of counselors contributed to patient's ability to cope with stress during their cancer journey. The study established that counselor's empathic practices such not interrupting patients during the counseling session, not dismissing the beliefs which patients hold, understanding patient's situation without judging them, recognizing and acknowledging client's emotions and listening actively to clients and giving them ample time to express their issues and concerns play a big role in stress management among patients. Therefore, the study pointed out that there was relationship between empathic practices by counselors and stress management among cancer patients at MTRH.

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### **The Practice of being Genuine by Counselors and Stress Management among Cancer Patients**

The study established that Practices of being genuine by counselors such as use self-disclosure where necessary to help patients deal with their condition better, providing honest response about client's health progress regardless of how deteriorating it was, throughout the session matching verbal and non-verbal communication, providing positive response on each question that clients have regardless of how petty it is and giving clients room to speak anything that is burning contributes to patient's ability to cope with stress during cancer journey. Therefore, the study concluded that there was relationship between practice of being genuine by counselors and stress management among cancer patients at MTRH.

### **Counselors' use of Unconditional Positive Regard and Stress Management among Cancer Patients**

The findings revealed that majority of cancer patients admitted that counselors in Moi teaching and referral hospital at the oncology clinic respect clients during counseling session, value and accept clients as unique individuals, accept client's views, opinions and beliefs without being Judgmental, are caring and show being conscious of patient's needs and lastly are compassionate, and understands patient's personal struggle that they encounter on cancer journey. From the findings it was deduced that Counselors' use of unconditional positive regard contributed to patient's ability to cope with stress. The study therefore established that there was relationship between Counselors' use of unconditional positive regard and stress management among cancer patients at MTRH.

### **Recommendations**

Psychological support services are an important component of cancer treatment. A major challenge for all psychological services is the achievement of access and utilization of the service since there is only one psychological counselor at oncology clinic. Psychological support can help cancer patients learn to cope with psychological and social issues associated with cancer diagnosis. This can reduce levels of depression and anxiety, among patients and help cope with the illness. The study recommends that number of psychological counselors to be increased at oncology clinic as there is only one counselor in oncology clinic since the service plays an important role in patients' ability to cope with stress during cancer journey according to the findings of the study. Education of communities on cancer issue and psychological services will increase early screening and routine checkup and help detect the disease in its early stage. This will help in management of stress among the cancer patients since the disease would have been managed early before it is advanced and prevent progression of the illness hence better outcome. Similar studies can be undertaken to assess the impact of other psychological theories in managing stress among cancer patients and other patients also suffering from other illness. Comparative studies can be undertaken in private and government hospitals to compare their approaches in managing stress and to determine their effectiveness.

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