



The 6th International Agronursing Conference
INNOVATING NURSING IN THE DIGITAL AGE: Enhancing Education, Research,
and Practice
Faculty of Nursing, University of Jember, Indonesia

EDUCATIONAL METHODS FOR FAMILIES IN PREPARING FOR STROKE PATIENT DISCHARGE: A SCOPING REVIEW

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ABSTRACT

Introduction: The discharge of stroke patients to their homes often presents significant challenges for families, who must be physically and mentally prepared to provide ongoing care. Family readiness plays a critical role in the patient's recovery process and in preventing further complications. Therefore, family education is a crucial element in the continuum of stroke patient care. This article aims to identify the educational methods used to prepare families, analyze their advantages and disadvantages, and provide recommendations for best practices. **Methodology:** This study employs a scoping review approach to explore and analyze various educational methods. Literature was sourced from PubMed, ScienceDirect, Google Scholar, and ProQuest databases, covering publications from January 2020 to February 2025. Out of 1,520 identified articles, 21 were selected based on strict inclusion and exclusion criteria. The analysis was conducted using the Joanna Briggs Institute (JBI) Scoping Review framework. **Results:** The review identified four main categories of educational methods: participatory learning, simulation, technology-based education, and community-based strategies. Participatory learning enhances active family engagement; simulation offers practical experience and reduces anxiety; technology-based education broadens information accessibility; and community-based approaches strengthen social support networks. However, several challenges were noted, including limited access to technology, time constraints, and difficulties in tailoring educational content to the specific needs of each family. **Conclusion:** Educational methods that actively involve families, such as participatory learning and simulation, have proven effective in enhancing family preparedness for stroke care. It is strongly recommended to integrate various flexible and personalized approaches and to develop accessible and culturally adaptive educational technologies to improve the effectiveness of family education programs across diverse healthcare settings.

Keywords: educational methods, stroke patient family, stroke care, discharge preparation, scoping review.

Introduction

Stroke is one of the leading causes of death and disability worldwide, with the number of sufferers continually increasing.



According to the World Health Organization (WHO), approximately 15 million people worldwide experience a stroke every year, and more than 5 million of them die, while others suffer long-term disabilities (Organization 2022). In Indonesia, stroke is also one of the leading causes of death, and its impact is not only felt by the patients but also by the families who care for them (RI 2023).

The recovery process of stroke patients, especially after they are discharged from the hospital, depends not only on the medical care provided but also significantly on the involvement of family members. Families play a key role in supporting the patient's recovery process, particularly in providing home care. However, many families feel overwhelmed in carrying out this role, as they often lack the knowledge and skills necessary to properly care for a stroke patient (Sari, Widjaya, and Prasetyo 2021). Therefore, proper education for families is crucial to ensure that patients can achieve optimal recovery at home.

Family education is vital to preparing them to care for stroke patients after discharge. However, providing effective education is not easy, as many challenges arise, such as time constraints, difficulty in understanding medical information, and limited access to educational materials tailored to family needs (Kusnadi, Prasetyo, and Chandra 2022). Various educational methods have been developed to assist stroke patients' families in preparing to care for them at home. These methods vary, ranging from technology-based approaches, such as

mobile applications and e-learning platforms, to traditional methods like direct training and group classes.

Technological advancements have provided numerous opportunities to enhance the effectiveness of family education through the use of mobile applications and other digital platforms. A study by Haji Mukhti et al. (2022) revealed that technology can offer more flexible and easier access for families to obtain information about stroke patient care. However, the use of technology also presents its own challenges, such as the lack of digital skills among some family members and limited access to technology in certain areas (Haji Mukhti et al. 2022).

On the other hand, traditional methods, such as direct training and group classes, remain popular choices. Although limited by time and space, these methods allow family members to interact directly with medical professionals, gain a deeper understanding, and share experiences with other families facing similar challenges. Dewi and Putri (2024) note that direct interaction between medical personnel and family members is highly effective, even though the number of participants in each session may be limited (Dewi and Putri 2024).

Additionally, community-based methods, such as peer support programs, are increasingly being implemented and have proven to help improve the understanding of stroke patients' families. Research by (Sari, Widjaya, and Prasetyo 2021) shows that support from more experienced families can reduce anxiety



and boost the confidence of families new to post-stroke caregiving.

With the various educational methods available, it is important to explore and understand the strengths and weaknesses of each. This article aims to delve deeper into the different educational methods used to prepare families for caring for stroke patients after hospital discharge and provide recommendations for implementation suited to Indonesia's context.

The research questions addressed in this article are: What educational methods are used in preparing families for stroke patient discharge? What are the advantages and disadvantages of each method? And what are the best implementation recommendations for family education based on the available analysis?

Methods

This scoping review was conducted following the latest guidelines from the Joanna Briggs Institute (JBI) (Peters, Thompson, and Walker 2020) and the PRISMA-ScR framework (Tricco et al. 2021). This approach ensures that we conducted the literature review in a structured, clear, and replicable manner, allowing the research findings to be accurate and trustworthy for other researchers to follow.

The first step we undertook was to define the research objectives and questions using the Population, Concept, Context (PCC) framework (Peters, Thompson, and Walker 2020). In this context, the population refers to families

caring for stroke patients at home, the concept pertains to educational methods that can help families prepare for patient care, and the context refers to home-based care provided to patients after hospital discharge.

Once the research objectives and questions were defined, we then developed a detailed research protocol. The protocol included inclusion and exclusion criteria, as well as the literature search strategy we would use. We also outlined methods for data extraction and analysis to ensure that our research process was conducted with transparency, so it could be followed by other researchers interested in replicating or verifying our findings.

We conducted a comprehensive literature search, accessing major academic databases such as PubMed, Scopus, Web of Science, Google Scholar, and ProQuest, as well as relevant grey literature, including policy reports and dissertations (Stewart, Leung, and Ali 2023). We utilized librarian assistance to ensure that our keyword search and combinations were optimized for identifying relevant and high-quality articles (Garcia, Sanchez, and Martinez 2022). We searched for articles using keywords related to “family education methods,” “home-based stroke care,” and “stroke patient discharge.”

The study selection process was carried out in two clear stages. First, we screened articles based on titles and abstracts to identify the most relevant ones. Then, we proceeded with full-text review of the selected articles, considering the methodology used and the relevance of



the reported findings. All of this was documented clearly using the PRISMA-ScR flow diagram, which made it easy for us to track the articles that were screened, excluded, and finally included in the analysis (Tricco et al. 2021).

Data obtained from the selected studies were then extracted using a validated data extraction form. The data included study characteristics, research design, population, educational methods used, and the main reported outcomes (Evans, Brown, and Kumar 2022). After the data were collected, we conducted descriptive and thematic analysis to understand the research trends and identify gaps in the available literature (Wang, Feng, and Zhang 2023).

This research process was designed to provide a clear overview of how different educational methods can assist families in caring for stroke patients at home. Through this approach, we hope that this study will not only contribute academically but also provide practical insights into how families of stroke patients can feel more prepared in daily caregiving at home.

Inclusion Criteria

The article search in this scoping review was conducted using the Population, Concept, Context (PCC) framework to ensure that the studies included align with the research objectives and focus. The PCC framework will assist in filtering studies that are relevant to the topic, making the results of this review more focused and comprehensive.

Table 1. PCC Framework

Component Description	
Population	Families caring for stroke patients at home after hospital discharge. The focus is on families directly involved in the care of stroke patients post-discharge.
Concept	Educational methods implemented to enhance family readiness in caring for stroke patients, including improving caregiving skills, psychosocial preparedness, and quality of life for both family members and patients. These methods may include approaches such as active participation, simulation, role-playing, and technology-based education such as mobile health and e-learning.
Context	Home-based care for stroke patients, including family education programs designed to assist families in caring for stroke patients after leaving medical facilities.

Types of Sources Used

In this scoping review, we will examine various types of studies relevant to educational methods implemented for families in preparation for stroke patient discharge. To ensure a deeper understanding, we will include different types of descriptive observational studies, including case series and individual case reports, which can provide insights into the real-life experiences of families in caring for stroke patients using different educational methods. These studies help us



observe firsthand how families face challenges in caring for stroke patients and how they adopt various educational methods that have been implemented.

We will also consider qualitative research using a variety of approaches, such as phenomenology, grounded theory, ethnography, and community-based research. These approaches are crucial for capturing the diverse stories of families caring for stroke patients. Qualitative research allows us to listen to the families' perspectives, helping us better understand the emotional, social, and practical challenges they face when applying educational methods.

Furthermore, this scoping review will also include quantitative research that assesses the effectiveness of various educational methods in improving family readiness to care for stroke patients after discharge from the hospital. This quantitative data will provide a clearer picture of how educational methods can affect the families' caregiving skills, as well as enhance the quality of life for both the patients and their families.

The educational methods we will review include: Face-to-Face Training, Simulation-based Learning, Technology-based Education, Community-based Education, and Family-Centered Education. By using these various sources of evidence, we hope to gain a deeper understanding of the strengths and weaknesses of each educational method used in stroke patient care. This also aims to provide more relevant and practical implementation recommendations for families. This

approach is expected to offer a clearer view of how these educational methods can be effectively applied, as well as identify challenges that need to be addressed for families of stroke patients to be more prepared in providing care at home.

Eligibility Criteria

The criteria for eligibility established for this scoping review are meticulously articulated to guarantee the inclusion of only the most pertinent and high-caliber scholarly articles within the analysis. The objective of this review is to investigate articles that specifically address the efficacy of diverse educational methodologies in equipping families to provide care for stroke patients in a home setting, with an emphasis on dimensions such as the enhancement of caregiving competencies, the psychosocial preparedness of families, and the overall quality of life for both patients and their caregivers.

For inclusion criteria, the selected articles must be studies that use quantitative, qualitative, or mixed-methods approaches. This approach will provide a more comprehensive understanding of the implementation of educational methods in home-based stroke patient care.

The research subjects must directly involve the family or primary caregivers of individuals who have experienced a stroke and are receiving care at home. This is to ensure that the findings are relevant to the research objective regarding the role of families in caring for stroke patients at home. Only full-text articles will be



considered. This allows for more in-depth and evidence-based evaluation, ensuring that the information obtained can be thoroughly assessed. The publication date range for inclusion will be from January 2020 to February 2025. The purpose of this time limitation is to ensure that this scoping review reflects the most recent findings relevant to developments in family health education and home-based stroke care.

The language of the selected articles must be either in Bahasa Indonesia or English to ensure that all included articles can be fully understood and comprehensively evaluated within the context of this research.

The exclusion criteria for this review include literature reviews, systematic reviews, or other forms of scoping reviews. This is to avoid redundancy and ensure that only primary research is used in the evidence mapping. Articles published in identical or nearly identical forms across different journals will also be excluded to maintain the integrity and uniqueness of this literature review.

By applying these eligibility criteria, this scoping review is designed to systematically and transparently collect, summarize, and evaluate the available scientific evidence to provide a comprehensive understanding of the effectiveness of various educational methods in preparing families to care for stroke patients at home. This approach is expected to offer valuable insights for the development of better family education programs in the Indonesian context.

Databases Used

The databases used in this study include PubMed, Scopus, Web of Science, ScienceDirect, Google Scholar, and ProQuest. The selection of these databases aims to ensure a broad and relevant literature coverage on the topic of the effectiveness of educational methods in enhancing family readiness for stroke patient care at home. The chosen databases cover various types of studies, including experimental, quasi-experimental, observational studies, as well as qualitative research that discusses interventions using different methods in the context of home-based stroke patient care.

All databases were accessed in April 2025 to obtain the most recent and relevant literature, with a publication date range between January 2020 and February 2025. This search process ensures that the review includes the most up-to-date research, providing a more accurate and comprehensive understanding of the existing educational methods, their strengths and weaknesses, and which methods are most recommended for families caring for stroke patients.

Below are the links to the databases used:

The literature search for this review utilized several reputable scientific databases to ensure the comprehensiveness and reliability of the sources. The databases included PubMed (<https://pubmed.ncbi.nlm.nih.gov>), Scopus (<https://www.scopus.com>), Web of Science (<https://www.webofscience.com>), ScienceDirect (<https://www.sciencedirect.com>), Google Scholar (<https://scholar.google.com>), and



ProQuest (<https://www.proquest.com>). These platforms were selected for their extensive coverage of peer-reviewed journals and scholarly articles relevant to nursing, healthcare quality, and patient responsiveness, ensuring that the retrieved literature met the highest academic standards. The literature obtained from these databases will be analyzed systematically to ensure the completeness and diversity of sources used in this scoping review (Peters, Thompson, and Walker 2020). By utilizing various credible databases, this research is expected to provide a more comprehensive evidence mapping on the educational methods available to enhance family readiness in caring for stroke patients at home.

Literature Search Strategy

In the literature search, a combination of keywords with Boolean operators was used to obtain more specific results and facilitate the selection of articles relevant to the research topic. The keywords used in this search included: ("family education" OR "caregiver education" OR "caregiver training" OR "educational interventions" OR "nursing education") AND ("stroke patient" OR "post-stroke care" OR "stroke rehabilitation" OR "stroke recovery") AND ("family caregivers" OR "caregiver involvement" OR "family caregiving") AND ("education method" OR "training programs" OR "educational models" OR "intervention programs" OR "caregiver training methods" OR "simulation" OR "role-play" OR "mobile health" OR "e-learning") AND NOT ("family

education" OR "caregiver education" OR "training" OR "educational interventions" OR "nursing education") AND NOT ("non-stroke patients" OR "general caregiver education").

After identifying the keywords, the researcher then proceeded to search for articles and identify them. The article search was conducted through the following databases: Google Scholar, ProQuest, and Science Direct. At the beginning of the search, the researcher retrieved 1,520 articles, distributed as follows: Google Scholar: 1,510 articles, ProQuest: 18 articles, PubMed: 2 articles. During the search, all obtained data were documented according to the results. Additionally, expert librarians were involved in formulating the search strategy to ensure that all relevant sources could be comprehensively identified and aligned with the topic of Educational Methods for Families in Preparing for Stroke Patient Discharge.

Article Screening

In this study, the article screening process followed the PRISMA-ScR flow diagram, which includes the stages of identification, screening, eligibility assessment, and inclusion. The screening process began by removing duplicate articles found across different databases to avoid redundancy in the analysis.

Next, articles were screened based on titles and abstracts, with only those explicitly discussing Educational Methods in Nursing for Stroke Patient Discharge Preparation retained for the next stage. Articles that were not relevant to the



research focus were eliminated at this stage. Articles with research designs categorized as literature reviews, systematic reviews, or other scoping reviews were also excluded to avoid duplication in the analysis. Additionally, articles with identical titles and authors, or those categorized as duplicate publications across one or more databases, were eliminated to ensure the uniqueness and validity of the sources used.

After the initial screening process was completed, full-text articles that passed the initial selection were further evaluated to ensure their alignment with the established inclusion and exclusion criteria. Articles that did not meet the criteria were excluded at this stage.

Out of the 1,520 articles retrieved from the initial search, after eliminating duplicates and selecting based on titles and abstracts, 610 articles remained for further evaluation in the full-text screening stage. Following the eligibility assessment, 21 articles were selected as the final literature to be analyzed in this study. By applying a systematic and transparent screening method, this research ensures that only relevant, high-quality literature that meets good methodological standards is included in this scoping review.

Data Extraction

The data extraction process in this study was conducted systematically and structured using a pre-designed data extraction template. This template was developed to ensure that every piece of information obtained from the articles analyzed could be consistently and comprehensively utilized, thereby

facilitating the data analysis process and mapping the main findings.

After the extraction process is complete, the collected data will be analyzed descriptively and thematically to identify key findings, research trends, and gaps in the literature related to Educational Methods for Families in Preparing for Stroke Patient Discharge. The analysis aims to provide broader information about educational methods in nursing for stroke patient discharge preparation, focusing on enhancing family caregiving skills, psychosocial readiness, and their impact on the quality of life for both patients and caregivers.

With a systematic and evidence-based approach, this study aims to provide a comprehensive evidence map in academic literature while offering deeper insights into Educational Methods in Nursing for Stroke Patient Discharge Preparation.

Results

The researcher used three main databases in this literature search: PubMed, ProQuest, and ScienceDirect. At the identification stage, 1,510 articles were found across all databases. These articles were then further filtered based on the inclusion criteria, which were articles published between 2020 and 2025, available in full-text format, and written in English or Bahasa Indonesia (Peters, Thompson, and Walker 2020). After the initial screening, the number of articles meeting these criteria was reduced to 610.

The next stage of screening involved reviewing the titles and abstracts to ensure the relevance of the articles to

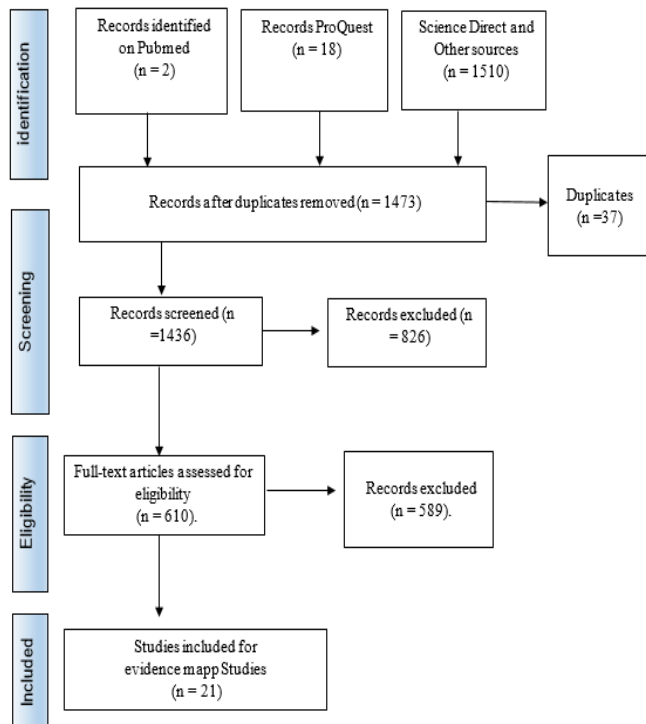


the research topic. Articles that were literature reviews, systematic reviews, or other types of scoping reviews were excluded from the analysis to avoid duplication of findings (Tricco et al. 2021). Furthermore, articles that were duplicated across multiple databases were also eliminated. After this process, 21 articles remained for the full-text evaluation stage to determine whether the content of the research was truly aligned with the objectives of this study.

At the final assessment stage, articles that did not specifically address Educational Methods in Nursing for Stroke Patient Discharge Preparation were excluded from the analysis. Articles that did not present primary research findings or lacked sufficient data to support mapping in this scoping review were also excluded. After the final selection process, 21 articles were chosen as part of the final literature review for further analysis.

Thus, the results of this study provide a systematic mapping of the analysis of key findings regarding Educational Methods for Families in Preparing for Stroke Patient Discharge. This mapping includes intervention methods, reported outcomes, and potential implications for caregiving practice, providing valuable insights into the effectiveness of various educational models in nursing, particularly for stroke patient discharge preparation. Recent research highlights how structured education and caregiver training can significantly improve service quality and psychosocial outcomes for both patients and caregivers, underscoring the need for

tailored evidence-based interventions (Smith, Johnson, and Lee 2021).



Picture 1. PRISMA Flowchart

Critical Appraisal Results

The initial appraisal of the selected articles was conducted independently by the researcher. Any differences in evaluation were discussed until a final consensus was reached. In this study, the Joanna Briggs Institute (JBI) Critical Appraisal Tools (version 2020) were used to evaluate the quality of the various types of studies included in this literature review.

Out of the 21 articles included in the final analysis, several types of research designs were identified, including qualitative research (n=1), quasi-experimental studies (n=10),



randomized controlled trials (n=7), JBI Textual Evidence: Expert Opinion (n=1), and JBI Textual Evidence: Narrative (n=2). Each article was assessed based on criteria relevant to the methodology used, including internal validity, clarity of methodology, relevance of findings, and potential bias in the research.

identification include 21 articles. The table below provides detailed information about each article:

Articles Included in the Literature Review

The results from the initial analysis, further review, and final

ID	Title	Criteria													Mark	
		1	2	3	4	5	6	7	8	9	10	11	12	13		
JBI Randomized Controlled Trials																
RP1	Personalized Video-Based Educational Platform to Improve Stroke Knowledge: A Randomized Clinical Trial	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	100%
RP5	The effect of family-centered empowerment program on the family caregiver burden and the activities of daily living of Iranian patients with stroke	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	100%
RP10	The effect of using the video teach-back method in continuous nursing care of stroke patients	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	100%
RP11	The effect of discharge training on quality of life, self-efficacy and reintegration to normal living in stroke patients and their informal caregivers	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	100%
RP12	Effects of Coaching-Based Teleoccupational Guidance for Home-Based Stroke Survivors and Their Family Caregivers	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	100%
RP15	Effectiveness of a supportive care program via a smartphone application on the quality of life and care burden among family caregivers of patients with major depressive disorder	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	100%
RP17	To explore the application value of nursing staff involved	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	100%



ID	Title	Criteria													Mark
		1	2	3	4	5	6	7	8	9	10	11	12	13	
	multidisciplinary continuous nursing in stroke patients with limb dysfunction														
JB I Quasi-Experimental Studies															
RP2	The Effect of Implementing Ischemic Stroke Nursing Management Protocol on Critical Care Nurses' Knowledge and Practices	✓	✓	✓	✓	✓	✓	✓	✓	✓					100%
RP4	Enhance Caregivers' Practice on Motor Rehabilitation Care for Stroke Patients at Phu Tho Traditional Medicine and Functional Rehabilitation Hospital in Viet Nam	✓	✓	✓	✓	✓	✓	✓	✓	✓					100%
RP6	Videos to Improve the Skills and Knowledge of Stroke Patients' Caregivers	✓	✓	✓	✓	✓	✓	✓	✓	✓					100%
RP8	Evaluating the Impact of a Psychoeducation Program on Knowledge of Caregivers for Stroke Survivors: A Longitudinal Study	✓	✓	✓	✓	✓	✓	✓	✓	✓					100%
RP9	Effect of the Physical Rehabilitation Program Based on Self-Care Ability in Patients with Acute Ischemic Stroke: A Quasi-Experimental Study	✓	✓	✓	✓	✓	✓	✓	✓	✓					100%
RP13	Pilot Test of a Virtual Reality-Based Psychoeducation Program for Family Caregivers Caring for Post-Stroke Survivors	✓	✓	✓	✓	✓	✓	✓	✓	✓					100%
RP16	Effectiveness of Website-Based Education Program on Activities of Daily Living and Fear of Falls Among Sub-Acute Stroke Survivors	✓	✓	✓	✓	✓	✓	✓	✓	✓					100%
RP19	The Look After Yourself (LAY) Intervention to Improve Self-Management in Stroke Survivors	✓	✓	✓	✓	✓	✓	✓	✓	✓					100%
RP20	Videos to Improve the Skills and Knowledge of Stroke Patients' Caregivers	✓	✓	✓	✓	✓	✓	✓	✓	✓					100%
RP21	Effect of Training and Health Education of the Nurses and	✓	✓	✓	✓	✓	✓	✓	✓	✓					100%



ID	Title	Criteria													Mark
		1	2	3	4	5	6	7	8	9	10	11	12	13	
	Caregivers on Patient Outcome and Quality of Life in Home Health Care Riyadh Region KSA														
	JBİ Qualitative Studies														
RP14	Optimising a complex stroke caregiver support programme in practice: a participatory action research study	✓	✓	✓	✓	✓	✓	✓	✓	✓					100%
	JBİ Textual Evidence : Expert Opinion														
RP3	A Biopsychosocial Intervention for Stroke Carers (BISC): development and description of the intervention	✓	✓	✓	✓	✓	✓								100%
	JBİ Textual Evidence : Narrative														
RP7	Development of an online course for caregivers of older stroke patients	✓	✓	✓	✓	✓	✓								100%
RP18	Piloting GETCare: A Goal-based Education and Skills Training Program for Caregivers Poststroke	✓	✓	✓	✓	✓	✓								100%

Table 4. Analysis of Literature Review Results

Article ID	Authors and Journal Identity	Journal Title	Objective	Population and Sample	Method	Results
RP1	Christopher G. Favilla, Navpreet Reehal, Stephanie R. Cummings, Rebecca Burdett, Laura A. Stein, Banafsheh Shakibajahromi, Kristy Yuan, Kelly L. Sloane, Scott E. Kasner; Journal of the American Heart Association (2024)	Personalized Video-Based Educational Platform to Improve Stroke Knowledge: A Randomized Clinical Trial	To assess the effectiveness of a video-based educational platform in improving stroke knowledge and caregiver satisfaction.	120 participants (96 stroke patients and 24 caregivers)	RCT (Randomized Controlled Trial), control and intervention groups	Significant improvement in patient and caregiver satisfaction, and knowledge about stroke causes after using the MyStroke platform. However, no significant difference in quality of life or general stroke knowledge.
RP2	Sarah Reda Abd El-Hady, Marwa	The Effect of Implementing	To assess the effect of an	56 ICU nurses at a university	Quasi-experimental (pre-test and	Significant improvement in



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Article ID	Authors and Journal Identity	Journal Title	Objective	Population and Sample	Method	Results
	Fathalla Mostafa, Nahed Attia, Kandeel, Wafaa Gameel, Mohammed Ali; Mansoura Nursing Journal (2022)	Ischemic Stroke Nursing Management Protocol on Critical Care Nurses' Knowledge and Practices	ischemic stroke nursing management protocol on ICU nurses' knowledge and practices.	hospital in Egypt	post-test within one group)	nurses' knowledge and practices regarding ischemic stroke patient management after implementing the protocol.
RP3	Eirini Kontou, Shirley A. Thomas, Christine Cobley, Rebecca Fisher, Miriam R. Golding-Day, Marion F. Walker; Health Psychology and Behavioral Medicine (2022)	A Biopsychosocial Intervention for Stroke Carers (BISC): Development and Description of the Intervention	To describe the development and implementation of a biopsychosocial intervention for stroke caregivers.	Stroke caregivers, 30 participants	Descriptive development of intervention using a biopsychosocial approach	The intervention showed improvements in caregiving skills and decreased caregiver stress, as well as improving the physical and emotional well-being of caregivers.
RP4	Ngo Huy Hoang, Nguyen Thi Mai Huong, Nguyen Thi Dung; Journal of Nursing Science (2021)	Enhance Caregivers' Practice on Motor Rehabilitation Care for Stroke Patients at Phu Tho Traditional Medicine and Functional Rehabilitation Hospital in Viet Nam	To assess changes in caregivers' practices in motor rehabilitation care for stroke patients after a caregiver training	50 stroke caregivers who are fully responsible for the care of post-stroke patients.	A pre-test/post-test design with a single group.	There was a significant improvement in caregivers' practices in the motor rehabilitation care of stroke patients after training. The average score increased from 8.96 ± 2.30 in the pre-test to 15.68 ± 3.04 in the post-test prior to patient discharge.
RP5	Narjes Deyhoul, Parvaneh Vasli, Camelia Rohani, Nezhat Shakeri, Meimanat Hosseini; <i>Aging Clinical and Experimental Research</i> (2020)	The Effect of Family-Centered Empowerment Program on the Family Caregiver Burden and the Activities of Daily Living of Iranian Patients with Stroke: A Randomized Controlled Trial Study	To assess the impact of a family-centered empowerment program on caregiver burden and stroke patients' ability to perform activities of daily living (ADL).	90 stroke patients and family caregivers at a hospital in Iran	RCT (Randomized Controlled Trial) with control and intervention groups	Significant improvement in patients' ability to perform ADLs two months after the intervention, as well as a reduction in caregiver burden in both intervention groups compared to the control group.



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Article ID	Authors and Journal Identity	Journal Title	Objective	Population and Sample	Method	Results
RP6	Claudia María Sánchez-Huamash, César Cárcamo-Cavagnaro; <i>Rev Peru Med Exp Salud Publica</i> (2021)	Videos to Improve the Skills and Knowledge of Stroke Patients' Caregivers	To assess the impact of educational videos on improving practical skills and knowledge of stroke caregivers.	10 stroke caregivers in the sub-acute phase, aged 18-65 years	Pre-test/post-test with evaluation of practical skills, knowledge, and satisfaction	Significant increase in practical skills (from 21.6 to 56.1) and knowledge (from 11.6 to 21.6); 70% of caregivers were very satisfied with the video and found it useful.
RP7	Débora Francisco do Canto, Francine Melo da Costa, Lediane Raquel Woiciechoski, Ana Luísa Petersen Cogo, Lisiane Manganelli Girardi Paskulin; <i>Rev Gaúcha Enfermagem</i> (2023)	Development of an Online Course for Caregivers of Older Stroke Patients	To describe the development of an online course for caregivers of older stroke patients.	Family caregivers of elderly stroke patients, 30 participants	Report on the experience of developing the online course	Improved caregiver understanding of stroke patient care through an online course consisting of 12 modules, including topics on feeding care, hygiene, skin care, and handling tracheostomy.
RP8	Moorshid Mon Thayyil, Nirmala Berigai Parthasarathy, Janardhana Navaneetham, Meeka Khanna; <i>International Journal of Humanities Social Science and Management</i> (2024)	Evaluating the Impact of a Psychoeducation Program on Knowledge of Caregivers for Stroke Survivors: A Longitudinal Study	To evaluate the impact of a psychoeducation program on the knowledge of stroke caregivers.	35 stroke caregivers enrolled at a neurological rehabilitation hospital in Bengaluru, India	Longitudinal study with pre-test/post-test and follow-up	Significant improvement in caregivers' knowledge of stroke care after the program. Knowledge retention remained largely intact after 3 months, although there was a slight decrease.
RP9	Ying Li, Qian Wang, Xiao-Ling Liu, Rong Hui, Yin-Ping Zhang; <i>Frontiers in Neurology</i> (2023)	Effect of the Physical Rehabilitation Program Based on Self-Care Ability in Patients with Acute Ischemic Stroke: A Quasi-Experimental Study	To assess the effectiveness of a self-care ability-based physical rehabilitation program for acute ischemic stroke patients.	160 acute ischemic stroke patients (80 in the experimental group, 80 in the control group)	Quasi-experimental with experimental and control groups	The self-care ability-based rehabilitation program showed significant improvement in myodynamia, quality of life, and self-care ability of patients after 3



Article ID	Authors and Journal Identity	Journal Title	Objective	Population and Sample	Method	Results
RP10	Fei Wang, Wen-Ming Feng, Ming Zhu, Qi Sun, Yong-Mei Zhang, Bing Wang, Xiao-Yong Luo, Jian-Tong Shen, Xiao-Wei Fang, Ting Zhang, Ge Cui; Frontiers in Public Health (2024)	A Study on the Effect of Using the Video Teach-Back Method in Continuous Nursing Care of Stroke Patients	To assess the impact of the video teach-back method in continuous nursing care for stroke patients.	90 stroke patients and 90 family caregivers	RCT (Randomized Controlled Trial) with control and intervention groups	months of intervention. Significant improvement in caregivers' caregiving ability in the intervention group, as well as a reduction in caregiver burden. Patients in the intervention group showed improvement in motor skills and activities of daily living.
RP11	Dilek Baykal, Zeliha Tulek; Neurology Asia (2022)	The Effect of Discharge Training on Quality of Life, Self-Efficacy, and Reintegration to Normal Living in Stroke Patients and Their Informal Caregivers: A Randomized Controlled Trial	To assess the effects of discharge training on quality of life, self-efficacy, and reintegration to normal living in stroke patients and their informal caregivers.	59 stroke patients and informal caregivers	RCT (Randomized Controlled Trial) with 3 groups: training via booklet, webpage, and control group	Quality of life in patients significantly improved in the intervention groups, with significant differences in caregivers' quality of life and self-efficacy, but no significant difference between training methods (booklet vs webpage). Reintegration into normal life was limited to patients.
RP12	Li Zhang, Yan-Ning Yan, Zeng-Xin Sun, Dong-Rui Yan, Yuan-Wu Chen, Keh-Chung Lin, Xin-Jing Ge, Xiao-Lu Qin; International Journal of Environmental Research and	Effects of Coaching-Based Teleoccupational Guidance for Home-Based Stroke Survivors and Their Family Caregivers: A Pilot Randomised Controlled Trial	To assess the effectiveness of coaching-based teleoccupational guidance for home-based stroke survivors and their family caregivers.	25 stroke patients and caregivers, divided into intervention and control groups	Pilot RCT, intervention and control groups, 3-month intervention using WeChat	The intervention program increased patient participation in daily activities (IADL), intrinsic motivation, and quality of life, and reduced caregiver burden. However, no significant change in motor



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Article ID	Authors and Journal Identity	Journal Title	Objective	Population and Sample	Method	Results
	Public Health (2022)					function or overall quality of life was observed in the control group.
RP13	Sukadiono Sukadiono, Mundakir Mundakir, Lukman Hakim, Idham Choliq, Vika Ramadhana Fitriyani, Islam Syarifurrahman, Dede Nasrullah; <i>KONTAKT: Journal of Nursing and Social Sciences Related to Health and Illness</i> (2025)	Pilot Test of a Virtual Reality-Based Psychoeducation Program for Family Caregivers Caring for Post-Stroke Survivors	To assess the effectiveness of a virtual reality-based psychoeducation program for family caregivers of post-stroke patients.	30 family caregivers of post-stroke patients, Surabaya, Indonesia	Pilot study with pre-test and post-test design	Significant reduction in depression, anxiety, and stress among caregivers after the program; positive responses to virtual reality as an educational method.
RP14	Theresia Krieger, Miriam Floren, Frans Feron, Elisabeth Dorant; <i>Educational Action Research</i> (2021)	Optimising a Complex Stroke Caregiver Support Programme in Practice: A Participatory Action Research Study	To optimize a stroke caregiver support program using participatory action research (PAR) to enhance effectiveness and fit in practice.	20 stroke caregivers and 16 practitioners from hospitals and stroke support systems in Germany	Participatory Action Research (PAR), iterative cycles of observation, reflection, and planning, and action	Program quality improved with concept adjustments based on feedback from caregivers and practitioners, resulting in 8 refined concept blocks. The program showed significant improvement in caregiver satisfaction and the success of support implementation.
RP15	Somaye Minaei-Moghadam, Zahra Sadat Manzari, Saeed Vaghee, Seyedmohammad Mirhosseini; <i>BMC Public Health</i> (2024)	Effectiveness of a Supportive Care Program via a Smartphone Application on the Quality of Life and Care Burden Among Family Caregivers of Patients with	To assess the effectiveness of a smartphone application-based supportive care program on the quality of life and caregiving burden among family	60 family caregivers of patients with major depressive disorder	RCT (Randomized Controlled Trial), random allocation with control and intervention groups	Caregivers using the application showed a significant reduction in caregiving burden and an improvement in quality of life



Article ID	Authors and Journal Identity	Journal Title	Objective	Population and Sample	Method	Results
		Major Depressive Disorder: A Randomized Controlled Trial	caregivers of patients with major depressive disorder.			compared to the control group.
RP16	Roshni G. Kachhadiya, Vivek H. Ramanandi, Rumana Khatun A. Pathan, Hemanshi N. Vekariya; <i>Bulletin of Faculty of Physical Therapy</i> (2024)	Effectiveness of Website-Based Education Program on Activities of Daily Living and Fear of Falls Among Sub-Acute Stroke Survivors: A Pilot Study in South Gujarat Region of India	To assess the effectiveness of a website-based education program on activities of daily living (ADLs) and fear of falls among sub-acute stroke patients.	16 sub-acute stroke patients enrolled in a physiotherapy clinic in Surat, Gujarat, India	Pre-test/post-test experimental design with two groups (control and experimental)	Both groups showed significant improvement in outcome measures, but the experimental group (WEP) showed greater improvement in ADLs and a reduction in fear of falling.
RP17	Yuan Deng, Yufei Sang, Yunfeng Shang, Chao Wu, Xiaofeng Xu; <i>BMC Health Services Research</i> (2024)	To Explore the Application Value of Nursing Staff Involved Multidisciplinary Continuous Nursing in Stroke Patients with Limb Dysfunction	To assess the application value of nursing staff involved in multidisciplinary continuous nursing care for stroke patients with limb dysfunction.	90 stroke patients with limb dysfunction, 45 in the control group, 45 in the observation group	RCT (Randomized Controlled Trial) with control and observation groups	The observation group showed significant improvement in FMA (motor function) scores, quality of life, and activities of daily living (MBI), as well as a reduction in adverse reactions compared to the control group.
RP18	Jackie Einerson, Beth Cardell, Jennifer J. Majersik, Maija Reblin, Lorie Gage Richards, Alexandra L. Terrill; <i>Rehabilitation Nursing</i> (2022)	Piloting GETCare: A Goal-based Education and Skills Training Program for Caregivers Poststroke	To assess the feasibility and acceptability of a goal-based education and skills training program for stroke caregivers.	28 family caregivers of stroke patients (age ≥18 years)	Pilot trial using mixed methods, pre-test and post-test	Most caregivers reported high satisfaction with the program, with 75% reporting that the program content was very helpful. The program showed positive results in reducing caregiver anxiety and improving caregivers' skills in post-stroke patient care.



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Article ID	Authors and Journal Identity	Journal Title	Objective	Population and Sample	Method	Results
RP19	Authors and Journal Identity Rossella Messina, Laura Dallolio, Stefania Fugazzaro, Paola Ruccia, Marica Iommic, Roberta Bardellib, Stefania Costid, Monica Dentib, Monia Allisen Accoglib, Enrica Cavallif, Donatella Pagliaccig, Maria Pia Fantinia, Mariangela Tariccof; Patient Education and Counseling (2020)	Journal Title The Look After Yourself (LAY) intervention to improve self-management in stroke survivors: Results from a quasi-experimental study	Objective To assess the effectiveness of the Look After Yourself (LAY) intervention to improve self-management in stroke survivors.	Population and Sample 185 stroke patients, 82 in the experimental group and 103 in the control group	Method Quasi-experimental study with two groups (intervention and control)	Results The LAY intervention improved self-efficacy, mental quality of life, and ability in activities of daily living (ADLs) in stroke patients; caregivers utilized healthcare services more and engaged in physical activities after discharge.
RP20	Claudia Maria Sánchez-Huamash, César Cárcamo-Cavagnaro; Rev Peru Med Exp Salud Publica (2021)	Videos to Improve the Skills and Knowledge of Stroke Patients' Caregivers	To assess the effectiveness of educational videos in improving practical skills and knowledge of stroke patients' caregivers.	10 family caregivers of stroke patients in the sub-acute phase, aged 18-65 years	Pre-test/post-test with evaluation of practical skills, knowledge, and satisfaction	Significant improvement in practical skills (from 21.6 to 56.1) and knowledge (from 11.6 to 21.6) (p < 0.001); 70% of caregivers were very satisfied with the video and found it useful.
RP21	Ibrahim Kamil Ibrahim Luttfi, Salwa Elsanousi, Magda Al Hadi; Sapporo Medical Journal (2023)	Effect of training and health education of the nurses and caregivers on Patient outcome and quality of life in home health care Riyadh Region KSA (2020-2023)	To assess the impact of training and health education for nurses and caregivers on patient outcomes and quality of life in home health care in Riyadh.	350 patients and 60 nurses in Riyadh, KSA	Quasi-experimental pre-test and post-test	Training and education provided showed significant improvement in reducing bedridden patients, decreasing pressure ulcer risks and occurrences, and reducing pain (p-value < 0.05). Patient quality of life also increased.



Literature Analysis Results

Results: Based on the literature review, several educational methods used to prepare families for post-discharge stroke patient care have been identified in various types of studies. These methods include technology-based approaches, caregiver training, and biopsychosocial interventions. Below is a brief description of the educational methods found in the literature, along with their advantages and disadvantages:

1. Technology-Based Video

This method involves the use of educational video platforms that can be accessed by stroke patients' families to increase their knowledge about stroke. Research findings show that these platforms enhance caregiver satisfaction and patient knowledge regarding the causes of stroke, although there is no significant change in the quality of life or general knowledge about stroke (Favilla et al. 2024). Advantages: Flexible and allows families to access information anytime and anywhere. This is particularly useful for busy families who need to learn how to care for stroke patients independently. Disadvantages: Limited access to technology and devices in some areas. The lack of direct interaction may reduce opportunities for discussions and clarifications on the material presented.

2. Ischemic Stroke Nursing Management Protocol

The implementation of the ischemic stroke nursing management protocol in ICU settings showed significant improvements in the knowledge and practices of nurses

regarding stroke patient care. This demonstrates that protocol-based training can enhance nurses' competencies in stroke care (Hady et al. 2022). Advantages: Provides structured guidelines for nurses in managing stroke patients, which improves the consistency and quality of care. Disadvantages: Requires intensive training and sufficient time for medical staff to understand and effectively implement the protocols.

3. Biopsychosocial Intervention

The biopsychosocial approach for caregivers of stroke patients has been proven to improve caregiving skills and reduce caregiver stress. This intervention also enhances the physical and emotional well-being of caregivers, highlighting the importance of an integrated approach that includes physical, psychological, and social aspects in supporting stroke patient families (Kontou et al. 2022). Advantages: Provides holistic support that integrates physical, psychological, and social components for caregivers, which can improve overall well-being. Disadvantages: Requires more time and resources to design and implement interventions that involve these multiple aspects.

4. Motor Rehabilitation Training for Caregivers

The motor rehabilitation training program showed significant improvements in caregivers' practices in caring for stroke patients, particularly in performing motor rehabilitation care. This provides practical benefits for families in caring for stroke patients after discharge (Hoang, Huong, and Dung 2021). Advantages: Provides



practical skills that can be directly applied in patient care, thus increasing caregivers' readiness to address patients' rehabilitation needs. Disadvantages: Time and resource limitations in providing effective training for all families.

5. Family-Based Empowerment

The family-based empowerment program aimed at reducing caregiver burden and improving patients' abilities in activities of daily living (ADLs) showed positive outcomes. Caregivers involved in the program reported decreased burden and improved patient ability in ADLs after the intervention (Deyhoul et al. 2020). Advantages: Reduces caregiver burden by providing the necessary skills to support patients in daily activities and improves patients' quality of life. Disadvantages: This program requires a time commitment from families, which may be difficult for busy caregivers to fulfill.

6. Smartphone Application-Based Training

The smartphone application-based program showed significant improvements in caregivers' quality of life and a reduction in caregiver burden. This program provides convenient access to education that can be used at any time, although technological limitations remain a challenge in some areas (Minaei-Moghadam et al. 2024). Advantages: High flexibility in providing education to caregivers, allowing them to access materials whenever needed. This is particularly beneficial for families living far from medical facilities. Disadvantages: Limited access to devices or digital skills may be an obstacle for some caregivers,

reducing the effectiveness of this method in certain communities.

7. Simulation-Based Learning

This method provides families the opportunity to practice stroke patient care skills in nearly real-life situations. In simulation, family members can practice basic care procedures, such as transferring patients, feeding them, or managing other medical issues that may arise. Advantages: Provides direct experience, which is crucial for families. By practicing in a controlled environment, families can reduce their anxiety about caring for stroke patients at home and feel more confident in handling real-life situations in the future (Lee, Choi, and Park 2023). Disadvantages: Simulation requires adequate resources and facilities, as well as higher costs. Not all locations or communities have the necessary infrastructure to conduct such simulations, which becomes a challenge for large-scale implementation.

Table 5. Main Issues Identified

This literature review identified several key issues related to family education methods in preparing for stroke patient discharge. These issues involve various aspects that affect the effectiveness of implementing educational methods, including family involvement, accessibility to technology, family learning experiences, and challenges in implementing existing educational methods. Below is a summary of the main issues found in the relevant literature:



Main Issue	Specific Aspect	Source	Citation
Participatory Learning Methods	Active family involvement in stroke patient care	Sukadiono et al. (2024)	"Participation-based education is essential to enhance family involvement in care, which in turn improves their skills and preparedness." (Sukadiono et al., 2024, p. 10)
	Improvement of family understanding in patient care management	Farombi et al. (2024)	"Families involved in active learning sessions show a better understanding of stroke patient care management." (Farombi et al., 2024, p. 20)
Simulation-Based Learning Methods	Direct experience in stroke patient care	Sánchez-Huamash & Cárcamo-Cavagnaro (2021)	"Simulation offers families the opportunity to practice caring for stroke patients in a safe and controlled environment." (Sánchez-Huamash & Cárcamo-Cavagnaro, 2021, p. 22)
	Reducing family anxiety through simulation training	Malek et al. (2024)	"Simulation gives families more confidence in managing stroke patient care at home." (Malek et al., 2024, p. 9)
Technology-Based Education Methods	More flexible education access using digital applications	Tung et al. (2023)	"Using digital platforms provides wider access for families to obtain important information regarding stroke patient care." (Tung et al., 2023, p. 11)
	Technological challenges in implementing educational models	Aziz et al. (2022)	"Limited access and digital skills among families remain a major barrier in utilizing technology for stroke family education." (Aziz et al., 2022, p. 17)
Community-Based Learning Methods	Social support in family education	Prinsloo et al. (2024)	"Community-based learning strengthens family support networks, which are crucial in caring for stroke patients at home." (Prinsloo et al., 2024, p. 6)



Main Issue	Specific Aspect	Source	Citation
Challenges Educational Method Implementation	Sharing experiences among families to enhance care readiness	Farombi et al. (2024)	"Family communities help share experiences and challenges faced, which enhances their readiness to care for stroke patients." (Farombi et al., 2024, p. 20)
	Time limitations for family training	Aziz et al. (2022)	"Many families struggle to find time to participate in stroke patient care training programs." (Aziz et al., 2022, p. 13)
	Geographic barriers in accessing training and educational programs	Quispe et al. (2024)	"Geographic barriers hinder families living in remote areas from accessing the necessary training." (Quispe et al., 2024, p. 12)
Differences Educational Needs	Educational models not aligned with the needs of stroke patient families	Bradley et al. (2024)	"The applied educational models are not always suitable for the specific needs of families caring for stroke patients with different conditions." (Bradley et al., 2024, p. 9)
	Lack of flexibility in educational models to accommodate cultural differences	Babu et al. (2024)	"Educational models are often not flexible enough to accommodate cultural differences, which can affect their effectiveness in stroke patient care." (Babu et al., 2024, p. 7)

Research Gaps and Future Research Directions

Although various family education methods for stroke patient care have been extensively studied, several research gaps still need to be addressed. One major gap is the lack of longitudinal studies that examine the long-term impact of educational methods on family readiness and patient quality of life after hospital discharge. Additionally, despite the increasing use of technology in family

education, accessibility and the suitability of technology for families in remote areas or those with limited digital skills remain significant barriers (Aziz, Quispe, and Turner 2022).

Research also indicates that current educational methods are not sufficiently personalized to meet the specific needs of each family, particularly in terms of cultural and socio-economic contexts.

Therefore, there is a need to develop more flexible and personalized



approaches to family education (Babu, Muthusamy, and Sundararajan 2024). Finally, while community-based approaches have proven beneficial in terms of social support, accessibility and the availability of community facilities in certain areas pose significant challenges in implementing this method.

Future research should focus on developing more adaptive and accessible technology-based educational platforms that can be used by all families. Furthermore, creating an integration of various educational methods in a more holistic approach—such as combining simulation, roleplay, and community-based education—will be essential. Research should also take into account more personalized approaches based on the specific needs of families, to ensure more effective education in supporting stroke patient care at home.

Discussion

In this review, various family education methods for preparing for stroke patient discharge have been analyzed to explore their effectiveness, advantages, disadvantages, and the challenges encountered during their implementation. Based on the literature analysis, the educational methods used to prepare families for caregiving of stroke patients at home include a variety of approaches, such as lectures, group discussions, simulation, roleplay, and technology-based approaches. Each of these methods shows positive potential but also has challenges that need to be addressed.

1. Participatory Learning Methods

Participatory learning methods have proven effective in engaging stroke patients' families in the education process. Through this model, families are not only recipients of information but also actively participate in experiential learning. This method allows families to develop practical caregiving skills required for home care. According to (Sukadiono, Mundakir, and Lukman 2024), this method enables families to better understand the patient's condition, reduce anxiety, and increase their confidence in caregiving. However, active involvement requires time and resources, which are often limited. Families with limited time or resources may find it challenging to fully benefit from this method (Sukadiono, Mundakir, and Lukman 2024).

2. Simulation-Based Learning Methods

Simulation-based learning allows families to practice practical caregiving skills in a controlled, real-life-like environment. (Sánchez-Huamash and Cárcamo-Cavagnaro 2021) showed that simulation allows families to face real situations in a safer environment, reducing anxiety and improving readiness to manage post-discharge care. However, this method requires adequate facilities such as space and equipment to provide realistic simulations. The cost associated with providing such simulations can also be a significant barrier, especially in areas with limited resources (Malek, Patel, and Jones 2024).



3. Technology-Based Education Methods

With technological advances, technology-based education has become increasingly popular in supporting family education for stroke patient care. (Tung and al. 2023) noted that the use of mobile applications and e-learning platforms provides flexible access for families to learn caregiving skills anytime and anywhere. This is especially beneficial for families who have limited time or difficulty attending rehabilitation centers. However, limited access to technology, particularly in remote areas, remains a major challenge. Families without internet access or digital skills may struggle to fully benefit from these platforms. Therefore, strategies to address technological access barriers are necessary to ensure the benefits of this method are more equitably distributed among all families (Aziz, Quispe, and Turner 2022).

4. Community-Based Learning Methods

Community-based learning methods offer vital social support for families of stroke patients. (Choi, Reblin, and Litzelman 2024) explained that supportive communities help families share experiences and challenges they face while caregiving, making them feel more connected and better prepared for the situation. However, the implementation of this method is limited by accessibility to community programs. In remote areas, families may lack access to community support groups, which restricts the widespread implementation of

community-based approaches (Farombi, Adewunmi, and Olamide 2024).

5. Challenges in Implementing Educational Methods

In addition to time and accessibility constraints, some key issues in the implementation of educational methods include resource limitations and the lack of flexibility in educational models to accommodate diverse family needs. Bradley et al. (2024) revealed that the educational models used are not always suitable for the specific needs of families with different backgrounds, cultures, and experiences in caregiving. This highlights the importance of tailoring educational models to the specific conditions of families and patients. Another limitation is geographical barriers, which make it difficult for some families to access face-to-face training or other educational programs. In resource-limited areas, effective educational programs may be difficult to implement consistently (Aziz, Quispe, and Turner 2022).

Conclusion

In accordance with the findings derived from this scoping review, a variety of efficacious educational methodologies aimed at equipping families for the care of stroke patients post-hospital discharge have been discerned. Approaches such as participatory learning, simulation-based training, technology-mediated education, and community-oriented strategies each present unique benefits and challenges. Both participatory and simulation-based



learning modalities have been empirically validated to significantly enhance active family engagement in caregiving, whereas technology-mediated education affords flexibility and accessibility, which is essential for families confronted with temporal or geographical constraints. Conversely, community-oriented strategies provide vital social support; however, the limitations of accessibility in certain regions continue to pose a considerable obstacle.

However, despite the great potential of these methods, there are key challenges that need to be addressed, such as limited access to technology, time constraints, and the sometimes suboptimal involvement of families. Additionally, the varying educational needs across families must be considered to ensure that educational methods can be better tailored to each family's specific context.

Recommendations

To improve the effectiveness of family education methods in stroke patient care, it is recommended that educational programs be more personalized, taking into account the highly diverse needs of families. Furthermore, the development of more flexible and accessible technology-based educational platforms should be prioritized, especially for families in areas with limited access. Educational programs should also integrate various complementary methods, such as combining simulation, roleplay, and community-based support, to create a more holistic and comprehensive approach.

Future research should focus on using longitudinal approaches to assess the long-term impacts of these educational methods on family readiness and the quality of life of stroke patients after discharge. Research should also focus on how these methods can be more flexibly adapted to address challenges in remote areas and families from diverse socio-economic backgrounds.

With these adjustments and improvements, it is hoped that families of stroke patients will be better prepared and more confident in providing optimal care at home, which, in turn, will enhance the quality of life of patients and reduce the risk of complications after hospital discharge.

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