Development and Validation of Educational Video for Children Caregivers to Clean Intermittent Catheterization Orientation

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Background

Urinary bladder dysfunction (UBM) is a disorder in the storage and emptying dynamics of the bladder, mainly due to Myelodysplasias, which can affects children in a congenital or acquired form. One of the main treatments for this pathology is the Clean Intermittent Catheterization (CIC). This medical advice for being simple, low cost and safe technique, it has a good acceptance by the users and their family. Nurses can involve the process of training the child and caregivers to perform home care CIC. One of educational strategies is the educational video to improve in the teaching-learning process.

Objective: To develop and validate an educational video for family orientation during a clean intermittent catheterization in children.

Method

- Methodological study developed in two steps
- Period: March to December of 2016.
- First step: development of the educational video; Second: validation by nine health and three audiovisual professionals judges that were recruited through non-probabilistic intentional and snowball sampling.
- 15 articles were used to construct the video content. The script and storyboard was created with the following scenes: 1. Opening video; 2. Nurse’s presentation; 3. Parents-characters’ presentation; 4. Anatomy and physiology of the urinary system; 5. Signs and symptoms of micturition dysfunction; 6. What is CIC?; 7. Materials used in CIC; 8. Hand washing technical; 9. Genitals Hygiene; 10. Procedure and care; 11. Materials and urine disposal; 12. CIC topics review; 13. Finalization. The educational video was established and filmed using the physical space and technological equipment of LabCom_Saúde (Health Communication Laboratory).

Results

The final video version contained 10 minutes and 38 seconds. The Intraclass Correlation Coefficient (ICC) to agreement between all the health judges on the degree of relevance was observed regarding the following aspects from the script: Idea concept, dramatic construction, characters, visual style, target audience, and relevance. However, six health professional judges evaluated that the scenes reflected stereotypes or discrimination. Five health professionals judges affirmed that dialogues and language could be more simple and compatible with the audience knowledge. Regarding total, the ICC value for all script categories evaluated was 0.768, considered considerable. The confidence interval was set at 95%, estimated to be between 0.444 and 0.939, being adequate and with a significant p value of 0.0001. For all audiovisual judges reported that the dialogues should be more fluid. Regarding the ICC from audiovisual judges, inferring in the 95% confidence interval, relevance totaled an average of 0.764, being considered relevant.

Conclusion

An educational technology in the form of video to interventions and guidance of children caregivers in CIC contributes as a facilitating tool in the nurses’ practice in their practice with those clientele. For the next step, this educational video will be applied to the caregivers at a reference brazilian pediatric hospital.