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Working With Families: Meta-Analysis of a Dataset About Family-Centred Care Across Six Countries

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Purpose:
Designed for health professionals (nurses, doctors and allied health professionals) who work with children, the “Working with Families” questionnaire measures how they feel about working with children and working with their parents. It has been used in six countries (Australia, the United Kingdom, United States of America, Turkey, Indonesia and Thailand) in varying clinical practice settings ranging from tertiary referral children’s hospitals to community child health services. The questions as about perceptions of working with children and working with their parents, and also includes a range of demographic characteristics. The semantic differentials technique, from which an average is obtained, allows comparison of the scores between working with children and working with parents, and correlations with demographic factors.

Methods:
In studies to date, results have been consistently similar, regardless of setting or country. The country-specific analyses are descriptive, and there was no multivariate analysis because of small sample sizes. However, in the various studies, the relationships to demographic factors have been different and so there is a need to pool the data.

Results:
To date, while overall the scores are on the positive end of the scales, there is a significantly more negative score (p<0.001) given for working with parents than working with children. Characteristics which influence scores include level of education of participants, specialty education in paediatrics/child health, and older age levels. Analysis continues and will be complete early 2018.

Conclusion:
Family-centred care as a model of care is ubiquitous internationally in health services which care for children, including in non-Western countries. Its successful implementation is contingent on effective communication between health professionals and families. It is recognised that effective implementation of family-centred care is problematic. This meta-analysis gives insight into influences on the delivery of family-centred care. It provides evidence on which international policies and guidelines about the best way to care for children can be devised.
children, family-centered care and parents

References:


Abstract Summary:
Family-centred care is common in paediatrics and child health, but is problematic. This is a meta-analysis of completed studies to determine cross-country influences on family-centred care.

Content Outline:
Family-centred care is used in paediatrics and child health in many countries. However, its implementation is often problematic. It provides the theoretical basis for a series of completed studies in six countries - Australia, UK, USA, Turkey, Indonesia and Thailand.

The datasets from these studies have been pooled to allow a meta-analysis. The questions score how health professionals perceive working with children and working with their parents, and correlate the scores with demographic characteristics.

A meta-analysis provides a much larger sample than the samples of the individual studies, and facilitates exploration of how personal and social characteristics influence how respondents feel about working with children and working with their parents.

Work to date demonstrates a consistent significantly more positive score for working with children than working with parents (p>0.0010), which may go some way to explaining why the implementation of family-centred care is problematic.

Clinically, the care of children in health services will be enhanced if evidence such as this is applied through guidelines, education, etc. across all disciplines that care for children, and the families.

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Professional Experience: Dr Smyth has been a lead investigator on a series of multi-site studies about ‘Working with Families’. Data from these four studies, undertaken in different settings, will be incorporated into this meta-analysis and presentation. Dr Smyth has also been a principal investigator on other
research teams that have examined different aspects of family-centred care or which have had Family-Centred Care as their theoretical background. All projects have had publications.

Author Summary: As the Nurse Researcher for a large northern Australian health service, Dr Smyth contributes to nursing research endeavours in many ways, including mentoring novice researchers, obtaining research funds, coordinating ethics and research governance applications and reports, planning and undertaking research studies, and disseminating findings. Dr Smyth’s PhD was a critical ethnography about the culture of nursing research; this ongoing interest drives her research endeavours as she collaborates with expert nurse researchers and other health professionals.

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Professional Experience: 30 years as paediatric nursing researcher over 400 publications higher doctorate and PhD in paediatrics and child health research focuses on paediatrics, history and ethics

Author Summary: Dr Shields is a Member, STTI International Nurse Researcher Hall of Fame, and Professor of Rural Health at Charles Sturt University, Australia, and Honorary Professor, School of Medicine, the University of Queensland. She is the first nurse in Australia to hold a higher doctorate, and her research focuses on the care of children and families in health services and the history of nursing, including the role of nurses in Nazi Germany.

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Professional Experience: Professor Abdalla Mamun a statistician whose work has involved many projects in paediatrics, including the longitudinal study entitled The Mater-University Study of Pregnancy, which has been on-going for 40 years.

Author Summary: Professor Mamun is a Professor of Statistics in the School of Population Health at The University of Queensland in Brisbane, Australia. He is part of the partnership which carried out the series of studies which this paper describes.