

# THE EFFECTIVENESS OF ADVANCED PEDIATRIC FAMILY NURSING PRACTICE

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### BACKGROUND

One of the most difficult experiences in life for families is when a child is diagnosed with a chronic illness

Burden of the illness places a great demand on parents

Parents need support on an advanced level





### BACKGROUND

Nurses can contribute to soften sufferings and facilate change to health problems

Family level intervention increases parents perceptions for support and helps them better manage illness experience

(Kamban and Svavarsdottir, 2013; Konradsdottir and Svavarsdottir, 2011, 2013; Svavarsdottir, Sigurdardottir and Tryggvadottir, 2014)







### **PURPOSE**

The purpose of this study was to measure the benefits of **The Family Strength Oriented Therapeutic Conversation** intervention (FAM-SOTC)

offered by advanced practice nurses for parents of children and adolescents with newly diagnosed juvenile idiopathic arthritis, epilepsy, diabetes and ADHD with sleep disturbance





### **GUIDING FRAMEWORKS**

- The Calgary Family Assessment Model (CFAM)
- The Calgary Family Intervention Model (CFIM)
- Illness Beliefs Model





#### **INSTRUMENTS**

- The Icelandic Family Perceived Support Questionnaire (ICE FPSQ)
- The PedsQL<sup>TM</sup>-Family Impact Module
- PedsQL<sup>TM</sup> Health Care Satisfaction Generic Module
- The Icelandic Family Intervention Beliefs Questionnaires (ICE FIBQ)
- Demographics and Child-Health Variables





### METHOD/SAMPLE

- A quasi-experimental pretest/posttest design
- Participants: Parents (N= 38) of children with newly diagnosed;

Juvenile Idiopathic Arthritis

Epilepsy

Diabetes

ADHD and sleep disorder

• Data collected march 2015-dec 2016





# THE FAM-SOTC INTERVENTION FIRST SESSION

- Family assessment
- Main concerns explored by using therapeutic questions
- Suffering acknowledged
- Emotional responses normalized
- Families strengths indicated
- Resourced indentified, information and advice offered





# THE FAM-SOTC INTERVENTION SECOND SESSION

- Revision made
- Parents encouraged to talk about change in daily life by using therapeutic questions
- Concerns and strengths acknowledge
- Resources discussed, information and advice offered



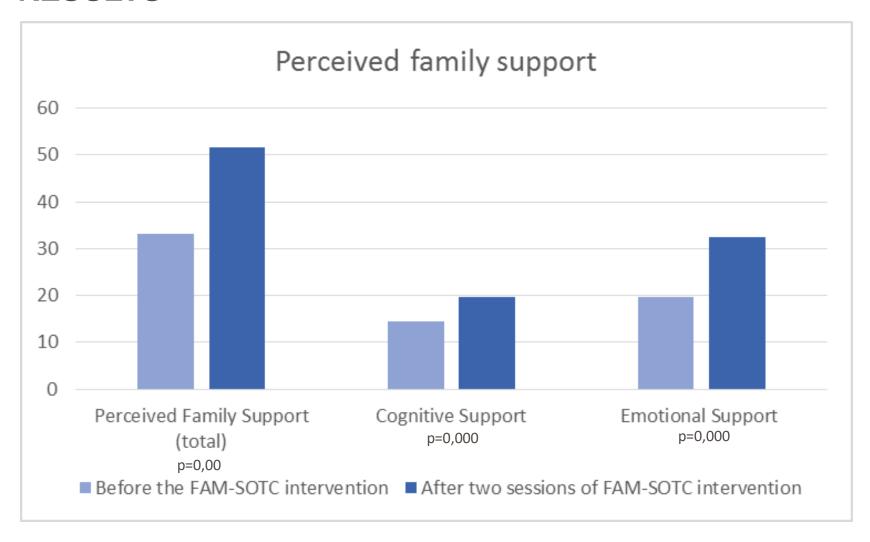




Table 1										
Perceived Family			the FAM-			After two sessions of FAM-				
Support			ntervention				C interver			
Caregivers outcome	n	Mean	SD	df	n	Mean	SD	df	t-value	p-value
Perceived Family										
Support (total)	30	33,17	17,36	29	30	51,53	17,23	29	-6.055	0,000
Cognitive Support	33	14,36	6,88	32	33	19,61	6,1	32	-5.344	0,000
Emotional Support	30	19,71	11,53	29	30	32,39	11,52	31	-5.992	0,000
Perceived family supp	ort before	and after t								

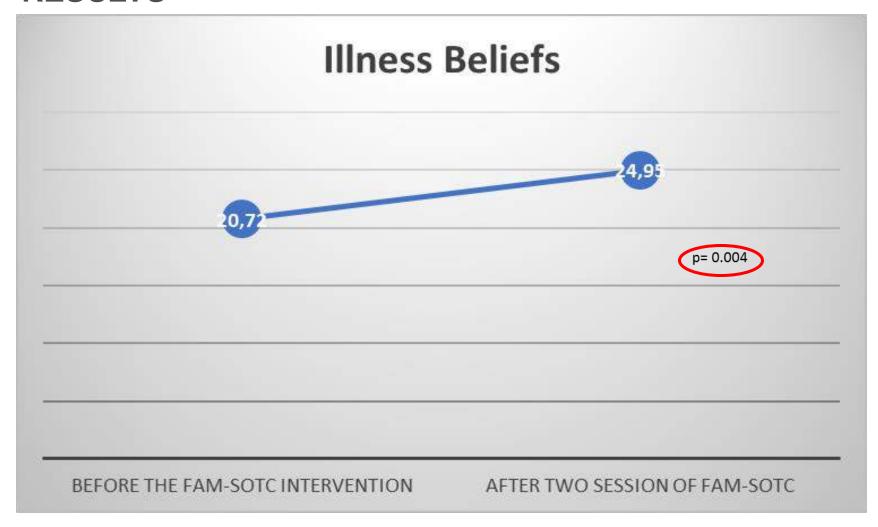




















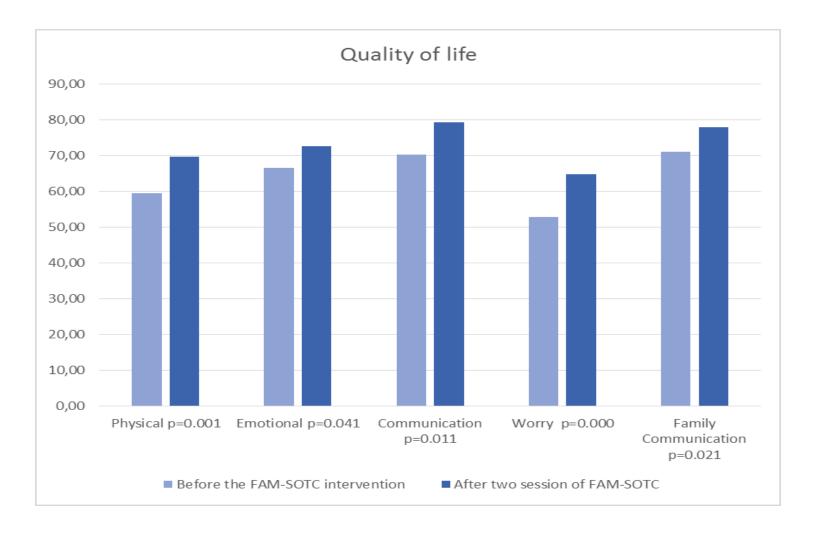


Family Quality of Life		Before the FAM-SOTC intervention				After the FAM-				
Caregivers outcome	n	Mean	SD	df	n	Mean	SD	df	t-value	p-value
Physical	38	59,56	26,61	37	38	69,74	28,76	37	-3.476	0,001
Emotional	37	66,49	22,23	36	37	72,57	22,32	36	-2.125	0,041
Social	38	73,52	24,98	37	38	78,62	25,77	38	-1.727	0,092
Cognitive	38	68,19	28,26	37	38	70,00	29,41	38	-0,586	0,562
Communication	37	70,27	24,96	36	37	79,28	19,7	37	-2.668	0,011
Worry	38	52,76	23,56	37	38	64,80	19,26	37	-5.387	0.000
Daily Activities	38	63,38	31,63	37	38	69,08	32,3	37	-1.737	0,091
Family Communication	38	71,18	23,49	37	38	77,89	23,87	37	-2.420	0,021
Total	38	65,26	21,8	37	38	72,43	22,22	37	-3.681	0,001

Quality of life score before and after two sessions of FAM-SOTC











### CONCLUSION

Family Strength Oriented Therapeutic Conversation (FAM-SOTC) is promising

Increased quality of life

Increased support

- Cognitive
- Emotionally

Positive change in Illness beliefs

Considerate and well prepared nursing interventions focusing on family strenghts makes a difference!

