

Nursing and Allied Health Abstracts

Title: THE PROCESS OF TRANSITION OF CARE OF NEUROGENIC BOWEL MANAGEMENT IN THE PREADOLESCENT WITH SPINA BIFIDA: THE PRIMARY CAREGIVER'S PERSPECTIVE

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Background: Bowel management has been identified as one of the most challenging self-care behaviors to transition for children with spina bifida and their families. Furthermore, obtaining bowel continence, which includes bowel management, has been difficult for health-care providers in their efforts to support primary caregivers and their child in promoting independence. The effort becomes increasingly challenging when the child with spina bifida reaches the developmental milestone for bowel continence and ,yet, has not obtained it.

Method: A qualitative study using grounded theory was performed to investigate the process of transitioning neurogenic bowel management from the primary caregiver to the child. The transitional process was examined from the perspective of the primary caregiver. The study's sample included 10 primary caregivers of preadolescents (8-13 years old) with spina bifida. Primary caregivers in the study were recruited from parent participation at Spina Bifida activities/ clinic . Intensive guided interviews were conducted with the primary caregivers in their homes to investigate factors in the process of transitioning neurogenic bowel management from the primary caregiver to the preadolescent. Sample size was determined by saturation of data received in the interviews. All interviews were audiotaped. Content analysis was completed to identify common themes and concepts.

Results: Responses of primary caregivers interviewed in this study validated identified themes and factors that impact the transition process of care of the neurogenic bowel to the preadolescent with spina bifida. Identified themes and recommendations were placed into a practice model that will promote transfer of care from caregiver to child.

Conclusion: The identified themes among primary caregivers are pertinent to the development of a transition model. Barriers and facilitators identified are essential for health-care providers to develop interventions that will support the primary caregiver and the preadolescent to assume more of their own care.