



# Opinions and observations of caregivers of children with cerebral palsy about changes seen after reflexology: A qualitative study

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## ABSTRACT

The aim of this research was to examine the effect of reflexology on the problems of children with cerebral palsy from perspective of caregivers. Qualitative study was made after 24-session reflexology program. 12 caregivers who have 2–18 year-old children with spastic type cerebral palsy receiving special education and received reflexology. The thematic questions were determined and in-depth interviews were conducted. Themes of the study were determined as; the caregiver's views on reflexology, the effect of reflexology on health of children with CP and the caregivers' observations on child after reflexology therapy, positive and negative aspects and causes of reflexology treatment. As a results; the caregivers expressed that there were increases in self-confidence of children, improvement in walking, reduced spasticity, relaxation, decreases in constipation, and increases in communication, speech and perception after reflexology.

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## 1. Introduction

Cerebral Palsy (CP) is a nervous system disease that develops in the Central Nervous System (CNS) [1]. In cerebral palsy, epilepsy, reduced or impeded mental capacity, language and speech disorders, eye and vision problems, hearing disorder, gastrointestinal system disorders, nutrition and growth problems, sialorrhea, dental problems, behavioral disorders, respiratory problems, sleep disorders, urinary system problems, endocrine system problems, orthopedic problems, and pain can be seen. In addition to symptoms of CP are neuromuscular control disorders, muscle tonus abnormalities, bone deformities and spasticity [2,3]. There is no certain treatment method for these disorders. The purpose of the treatment is to ensure the highest quality of life for the child and ensure them to reach the highest function level as far as possible. In order to achieve this, it is required to strengthen the muscles, balance, decrease the spasticity, suppress involuntary movements, and eliminate the other disorders associated with CP [3]. Therefore, in addition to use many medical methods in the treatment, alternative therapies are also used [4].

Reflexology is one of the complementary treatment methods applied to children with CP. Reflexology is a massage technique for

certain points referred to various regions of our body and viscera and in feet and hands [5,6]. In studies conducted in different disease groups: Reflexology application has been found to improve spasticity and walking ability, have positive effects on sleep, constipation and saliva and be effective in reducing pain, anxiety, depression, nausea-vomiting, fatigue, urinary symptoms, regulating blood pressure and blood glucose, and increasing sleep quality [7–12]. Despite the presence of the conducted studies, the number of the studies showing the effects of reflexology on children with cerebral palsy is not sufficient.

Especially caregivers are important in determining the effects of disease-related changes and treatment in children with SP. Caregivers can make very good assessments on the health of their children because they know their children very well and also they are with their children in every process and spend most of their time together. In the time spent while performing the 24-session reflexology program and during the conversations made with the caregivers at this time, caregivers were observed to observe and express the changes about their children very well. In addition, even a small change for these children gains importance and some assessments cannot be made quantitatively as mentioned in the above studies. Therefore, determining the situations that is not possible to be attained quantitatively but can be observed only in a qualitative study will ensure the subject to be seen in more detail. This study starting from this point was conducted to figure out the effect of reflexology on the problems of children with cerebral palsy

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from perspective of caregivers. So the purpose of this study was; determined the opinions and observations of caregivers of children with cerebral palsy about changes seen after reflexology treatment.

## 2. Methods

### 2.1. Study design

This qualitative study was conducted independently of the study, after completion of a randomized clinical trial evaluating at spasticity, motor function and quality of life of children with cerebral palsy who agreed to attend a 24-session reflexology program. This was conducted as a qualitative study using an in-depth interview technique.

### 2.2. Participants

The interviews were carried out between 12.08.2016 and 12.02.2017 with the caregivers of 2–18 year-old children with spastic type (hemiplegic and diplegic type) cerebral palsy receiving special education in Special Education and Rehabilitation Center in Kayseri.

Twenty-four sessions of reflexology were administered twice a week to the children before the interviews and the study was started after the completion of the sessions. Although the study was planned with 15 caregivers who received reflexology, it was conducted with 12 caregivers who accepted the application because of the separation of three children from the institution.

Criterion sampling method from purposeful sampling methods was used in selecting the caregivers. The sample was planned to include all 12 caregivers of children who received reflexology. The inclusion criteria for the caregivers were as follows; Having the child who participated in 24-session reflexology application administered by the researcher and completed the application, having no communication problem, and having no mental illness.

### 2.3. Data collection

In the study, socio-demographic characteristics of the children and caregivers were taken into consideration and a structured questionnaire was used [13]. Child characteristics form with 5 questions and socio-demographic data form of caregiver form with 9 questions and the characteristics of disabled child were used by the researcher.

Because of the summarization of the descriptive studies according to the previously determined themes demonstrated by the research questions, themes of the study were determined as;

- I. The caregiver's views on reflexology,
- II. The effect of reflexology on health of children with CP and the caregivers' observations on child after reflexology therapy
- III. Positive and negative aspects and causes of reflexology treatment.

The structured interview form prepared for the guidance during the interview in the study was prepared based on the literature [13]. In-depth interviews were carried out with a structured questionnaire. In the interview form, the following subjects were considered in parallel to the themes of the study;

- I. What they think about reflexology therapy?
- II. What are the changes they see on their children after reflexology?

- III. What they think about the effect of reflexology on the child's health?
- IV. What are positive and negative aspects they see about reflexology?
- V. What are the reasons for them to see reflexology positively and negatively?

#### 2.3.1. Rules considered in-depth interview

The in-depth interview was conducted by a team of two people including a moderator and a reporter. No change was made in the statements while decrypting the obtained interview records. A proper physical environment was provided before the interview to perform a comfortable and effective interview and not to be disturbed during the interview. Before starting the interview, it was explained to the interviewee for the purpose of getting the interviewee's trust and ensuring the interview to be more comfortable for him/her that the interviewee will not receive any harm, recording the interview is completely depend on the permission of the interviewee, in case when the individual is uncomfortable with the information he/she has given, all the records would be returned back to him/her and would not be used in the study. The data obtained by the interview were recorded by voice recording.

### 2.4. Data analysis

Data part of the study was presented without changing anything in the statements of the participants after decrypting the voice records and notes. The data are analyzed by descriptive analysis; framing for data, processing of data according to thematic framework, identification and interpretation of findings. Results were classified according to the themes of the qualitative study and the printouts were taken on this. A quantitative evaluation was not performed on the qualitative data.

### 2.5. Ethics

Permission was obtained from the academic board of the Faculty of Health Sciences in order to conduct the study. Ethics committee approval (Erciyes University Social And Humanities Ethics Committee Project Approval No:2) and the informed consent form from the caregivers were obtained.

## 3. Results

Characteristics of the disabled child and characteristics of the disabled child's caregivers are given in [Tables 1 and 2](#).

When the caregiver was asked what problems the child had; he/she stated that the child had "self-confidence problem, walking and spasticity disorder, constipation, psychological problems, communication problems".

### 3.1. Theme I: Caregiver's views about reflexology and their status to try reflexology

The caregivers were asked about their views on reflexology and whether or not they wanted to try it. Half of the caregivers said they had knowledge about reflexology. When the reasons for wanting to try reflexology were examined, interviewers were seen to suggest many reasons. Caregivers' previous massage experiences were effective in their desire to receive the application.

- 'We received reflexology before. The physiotherapist in our old institution administered it a few times. We saw its benefits even

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