



Why do parents discontinue health services for managing paediatric obesity? A multi-centre, qualitative study

Jasmine Dhaliwal^a, Arnaldo J. Perez^a, Nicholas L. Holt^b,
Rebecca Gokiert^c, Jean-Pierre Chanoine^d,
Katherine M. Morrison^e, Laurent Legault^f,
Arya M. Sharma^g, Geoff D.C. Ball^{a,*}

^a Department of Pediatrics, Faculty of Medicine & Dentistry, University of Alberta, Canada

^b Faculty of Physical Education & Recreation, University of Alberta, Canada

^c Faculty of Extension, University of Alberta, Canada

^d Endocrinology and Diabetes Unit, Department of Pediatrics, University of British Columbia, Canada

^e Department of Pediatrics & Population Health Research Institute, McMaster University, Canada

^f Department of Pediatrics, Montreal Children's Hospital, McGill University, Canada

^g Department of Medicine, Faculty of Medicine & Dentistry, University of Alberta, Canada

Received 28 June 2016; received in revised form 30 September 2016; accepted 7 October 2016

KEYWORDS

Child;
Parents;
Patient dropouts;
Paediatric obesity;
Qualitative research

Summary

Objective: To explore parents' reasons for discontinuing tertiary-level care for paediatric weight management.

Methods: Participants were parents of 10–17 year olds (body mass index [BMI] \geq 85th percentile) who were referred for paediatric weight management. Parents were recruited from three Canadian sites (Vancouver, BC; Edmonton, AB; Hamilton, ON) and were eligible if their children attended at least one clinical appointment and subsequently discontinued care. Data were collected using semi-structured individual interviews that were digitally recorded, transcribed, and analysed using an inductive manifest content analysis.

* Corresponding author at: Department of Pediatrics, University of Alberta, 4-515 Edmonton Clinic Health Academy, 11407–87th Ave, Edmonton, AB T5K0L4, Canada. Fax: +1 780 342 8464.

E-mail address: gdball@ualberta.ca (G.D.C. Ball).

Results: Parents ($n = 29$) of children [mean age: 14.7 ± 1.8 years; mean BMI percentile: 98.9 ± 1.6 ; $n = 17$ (58.6%) boys] were primarily female ($n = 26$; 89.7%), Caucasian ($n = 22$; 75.9%), and had a university degree ($n = 23$; 79.3%). Reasons for discontinuing care were grouped into three categories: (i) family factors (e.g., perceived lack of progress, lack of family support, children's lack of motivation), (ii) logistical factors (e.g., monetary costs, distance, scheduling), and (iii) health services factors (e.g., unmet expectations of care, perceived limited menu of services, no perceived need for further support).

Conclusions: A range of multi-level factors influenced attrition from tertiary-level paediatric weight management. Our data suggest that experimental research is needed to examine whether addressing reasons for attrition can enhance families' retention in care and ultimately improve health outcomes for children living with obesity.

© 2016 Asia Oceania Association for the Study of Obesity. Published by Elsevier Ltd. All rights reserved.

Introduction

Success in managing childhood obesity is linked to continued engagement in clinical care [1], but many children drop out of treatment prematurely [2]. A recent review showed that up to 83% of children enrolled in lifestyle interventions for weight management dropped out of care [3]. Attrition, defined broadly as discontinuing care prematurely, is a concern given that children who drop out of care are unlikely to receive the full benefits of treatment [4]. Further, attrition results in an inefficient use of resources and can create feelings of failure among both families and clinicians [5,6]. These consequences highlight the need to better understand why families discontinue care, particularly those children who are referred to specialised services for managing obesity since they often present with complex psychosocial and medical health issues [7].

To date, most research on attrition in paediatric weight management has focused on demographic, anthropometric, and psychological factors [5,8,9]. We recently completed a review and reported that ethnicity, socioeconomic status, and higher BMI predicted attrition, but the findings were mixed and inconsistent [3]. These findings offered limited insights into families' perspectives of weight management services, which might be more proximally linked to their decision to discontinue care. Most studies on parents' [5,10–12] and clinicians' [6,13] perspectives regarding attrition have been conducted in the United States [3], so perceived contributors of attrition in contexts with different demographic, social, cultural, and health system

characteristics remain to be understood. Furthermore, unlike attrition from obesity-related trials or interventions, families' perceptions of and experiences in health services for obesity management have not been well-studied, so little is known about whether clinical health services meet the needs and expectations of families or if they contribute to attrition [14]. Qualitative health services research is very well-suited to understand factors that can influence attrition, but to date, this approach has been underutilised in this area of study. Therefore, our purpose was to explore the reasons that led parents to discontinue care for managing paediatric obesity in tertiary level, paediatric weight management clinics in Canada.

Methods

Design

The current report was part of a larger, qualitative study that was designed to understand the factors underlying families' decisions to initiate, continue, and terminate health services for managing paediatric obesity [15]. This report complements articles we published previously regarding parents' reasons related to initiating care [16], not initiating care [17], and recommendations for improving health services for obesity management [18]. Prior to commencing recruitment and data collection, ethics approvals for the study were obtained from three Canadian sites (University of British Columbia [Vancouver, BC]; University of Alberta [Edmonton,

Download English Version:

<https://daneshyari.com/en/article/5619183>

Download Persian Version:

<https://daneshyari.com/article/5619183>

[Daneshyari.com](https://daneshyari.com)