



Mixed Methods Synthesis of Research on Childhood Chronic Conditions and Family

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Description

An estimated 18% of children from birth to 18 years of age have a chronic condition requiring the use of more health-related services than other children. A substantial percentage of these children have a chronic physical condition (CPC) such as asthma or diabetes putting them at increased risk for adjustment problems related to their emotional and behavioral development and functioning. Research findings on the intersection of family life and childhood CPCs consistently point to the contribution of family variables to child adjustment, and to the conclusion that families and family members other than the affected child also are at increased risk for poorer functioning. Still unknown, however, are the factors that prevent, ameliorate, or increase risk for children and families. Knowledge of these risk and resistance factors will provide an evidence base for developing interventions that support optimal child, family, and family member outcomes.

The significant contributions of research synthesis studies to the scientific basis for practice increasingly have been recognized. The proposed research synthesis addresses limitations of prior reviews by fully mining the body of research related to family life in the context of childhood CPCs via the use of state-of-the-art methods to integrate the findings from this research in collaboration with family researchers and clinical decision makers. The overall objective of the proposed study is to synthesize findings from empirical research addressing the intersection between family life and childhood CPCs. Bayesian meta-analysis and realist synthesis methods will be used to:

- (1) Map the relationships found among condition management and control; functioning of the affected child, parents, and siblings; family life and functioning; family relationship with the healthcare system; and individual and family demographics.
- (2) Explain how these factors operate together to produce variations in child and family outcomes.
- (3) Describe the nature of interventions directed to families of children with CPCs and their effects on child and family outcomes.
- (4) Examine factors mediating and moderating intervention effects.

The outcomes of the proposed study will be (a) evidence summaries addressing each of the four specific aims and (b) theoretical integrations of findings that address the strengths of families with children with CPCs, the problems these families confront, and the rationale for interventions to enhance these strengths and address these problems. Study findings will be disseminated in forms accessible to and usable by both researchers and clinical decision makers. To that end, the investigators will be working with an Advisory Committee of clinical decision makers who represent diverse disciplines, practice settings, and geographic locations. We also will do usability testing of targeted evidence summaries with 10-15 additional clinicians. To ensure that findings reach a broad clinical audience, we will partner with professional organizations representing clinicians who care for families of children with CPCs to disseminate the evidence reports in a format and outlet that is appropriate for their members.