Validation and reliability study of the parent concerns about surgery questionnaire: What worries parents?

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Abstract

Introduction: The study of mediating variables and psychological responses to child surgery involves the evaluation of both the patient and the parents as it regards different stressors.

Objective: To have a reliable and reproducible valid evaluation tool that assesses the level of paternal involvement in relation to different stressors in the setting of surgery.

Materials and method: A self-report questionnaire study was completed by 123 subjects of both sexes, subdivided into 2 populations, due to their relationship with the hospital setting. The items were determined by a group of experts and analysed using the Lawshe validity index to determine a first validity of content. Subsequently, the reliability of the tool was determined by an item-re-item analysis of the 2 sub-populations. A factorial analysis was performed to analyse the construct validity with the maximum likelihood and rotation of varimax type factors.

Results: A questionnaire of paternal concern was offered, consisting of 21 items with a Cronbach coefficient of 0.97, giving good precision and stability. The posterior factor analysis gives an adequate validity to the questionnaire, with the determination of 10 common stressors that cover 74.08% of the common and non-common variance of the questionnaire.

Conclusion: The proposed questionnaire is reliable, valid and easy-to-apply and is developed to assess the level of paternal concern about the surgery of a child and to be able to apply measures and programs through the prior assessment of these elements.

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KEYWORDS
Questionnaire; Variables; Child surgery; Concern; Parents; Anxiety; Reliability; Validity; CPPC
Introduction

The study of psychological responses to surgery in children and their mediator variables involves the assessment of paediatric patients as well as their parents in relation to the different stressors at play. Several authors have proposed a series of objectives for an assessment of these characteristics.

1. Establish how a child feels about and reacts to the experience of surgery.
2. Establish how parents and individuals accompanying the child perceive and feel about surgery.
3. Analyse the parent-child relationship in the perioperative period.
4. Plan a psychological preparation program based on the obtained data, individual needs and resources available in the specific hospital. Thus, Jay et al. already recommended the assessment of certain clinical variables as a first step to decide on the preparation programme most suitable for each facility.

The availability of pre-surgical assessment tools that are reliable, valid, feasible and allow making comparisons would be helpful in achieving efficacious and efficient results. At present, the evaluation of paediatric surgical patients is carried out through a few tools that were developed and validated appropriately. However, there is no tool to specifically assess parental levels of anxiety or stress in relation to surgical intervention in children, as anxiety is assessed with general tools that were not developed or validated for populations of these particular characteristics.1

The aim of this study was to develop and test a questionnaire to identify the events that most worry the parents of children facing surgery in order to have a valid and reliable tool to help design suitable programmes for psychological preparation for surgery adapted to the particular circumstances of each facility.

Method

Description of the instrument

The original version of the Questionnaire on Parental Concerns regarding Surgery (QPCS) included the main stressors for parents related to surgery in a child based on the scientific literature and our professional experience. Table 1 presents the wording of the 37 original questionnaire items addressing different elements that may be associated to parental concerns regarding a future surgery in a child. These items address different aspects, such as those related to the underlying disease requiring surgery, those related to the surgery itself and its outcomes, issues related to the hospital environment and lastly personal issues concerning the parental role. These issues were presented in the form of a self-administered questionnaire that assessed the degree of concern associated with each item.

The degree of concern was self-reported on a 5-level Likert scale going from 1 (not worried) to 5 (very worried).
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