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Parent Support Group for Children with Chronic Eczema: A Partnership Program to Enhance Continuity of Community Health Care

Leung NHT¹, Hui TYR¹, Woo W², Wong D³, Young B¹

Department of Paediatrics and Adolescent Medicine¹,

TWGHs Hong Kong East Community Care Network²,

Community and Patient Resources Centre, Pamela Youde Nethersole Eastern Hospital³

Introduction:

Childhood atopic eczema affects about 30% of school children in Hong Kong with increasing prevalence over the years. (ISSAC Phase 3 study 2003) Its chronic course with frequent relapses, pruritus and continuous scratching by patients impose huge burden on both children and their parents.

Purpose of the Project:

- To improve self-management and coping skills for children and family in management of childhood atopic eczema.
- To enhance multidisciplinary care support through partnership with community services and family carers

Material & Methods:

In July 2005, a pilot study using modified quality of life questionnaires in 8 families with children aged 8-12 suffering from chronic severe eczema showed significant impairment of quality of life of affected children and impact on family. A parallel programme of three 2-hours sessions was then implemented for the children and their carers in July 2005. The programme included health talks delivered by dermatologists, paediatricians, paediatric nurses and clinical psychologist for carers. There were activities organized in parallel for children to enhance their self-caring skills and coping strategies through games and group functions. Parent-child activities were also incorporated in the programme. We received encouraging feedback from participants urging for more long-term support from professionals and between the families. With the coordination by Community and Patient Resources Centre, we have successfully collaborated with TWGHs Hong Kong East Community Care Network to form "The Parent Support Group Programme for Children with Chronic Eczema".

Results:

Since November 2005, "The Parent Support Group Programme for Children with Chronic Eczema" was launched with support from a team of professionals in the hospital and from the community, consisting of paediatricians, nurses and social workers. We also worked closely with input from parents. During the past 8 months, 14 sessions of group activities and 2 workshops have been held for about 30 affected families. Through various activities including volunteer support, social services, counseling and sharing, the programme has served the following:

1. Building up community support network for the affected families,
2. Establishment of mutual support with selected families was recruited as ambassadors to support other patients and their families.
3. Empowerment of families as a whole to manage stress through provision of knowledge on management of both physical and psychological needs of the patient and their carers.

Conclusions:

This programme has brought Paediatricians, nurses, dietitian, clinical psychologist, social workers and parents together to improve treatment compliance and building the partnership in the community through regular support group sharing, good patient-physician contacts and patient education. We believe that the programme is worthwhile and has to be sustained so as to benefit more desperate patients and families.