CHAPTER 5

CONCLUSIONS AND RECOMMENDATIONS

In this chapter, conclusions of the study and implication of the findings are presented. Also, recommendations for further research are provided.

Conclusions

A cross-sectional study was used to identify the relationships between dependent care behaviors among mothers of toddlers with CHD and possible predicting factors including parenting stress, perceived social support, perceived self-efficacy, CHD knowledge, educational background, and family income. The study also examined the ability of those study variables in predicting dependent care behaviors among mothers of toddlers with CHD. The theoretical framework of this study is guided by Orem's Self-Care Deficit Nursing Theory (Orem, 2001). Moreover, self-efficacy is added into the framework to explain more about predicting factors of dependent care behaviors among mothers of toddlers with CHD. The sample consisted of 95 mothers of toddlers with CHD who accompany their child to attend pediatric cardiology clinic at two public tertiary hospitals in Chiang Mai and Phitsanulok. The instruments used in this study included the Demographic Data Form, the Thai version of the Parenting Stress Index-Short Form (PSI-SF), the Personal Resource Questionnaire (PRQ-85- Part II), the Maternal Perceived Self-efficacy Scale, the CHD Knowledge Scale, and the Dependent Care Behaviors in Mothers of Toddlers with CHD Scale. Data were analyzed using

descriptive statistics and multiple regression. The results showed that there were positive relationships between dependent care behaviors of mothers of toddlers with CHD and perceived self-efficacy, and perceived social support. In contrast, parenting stress negatively correlated with dependent care behaviors of the mothers. When the effects of other variables were controlled, there was a highly significant positive relationship between perceived self-efficacy and dependent care behaviors of the mothers. A significant relationship was also found between family income and dependent care behaviors. Importantly, perceived self-efficacy was the only predictor accounting for 43.80 % of the variance in the mothers' dependent care behaviors. These findings provide a better understanding of dependent care behaviors among mothers of toddlers with CHD. The results of this study serve as a foundation knowledge for developing more effective interventions to strengthen the mothers' dependent care behaviors.

Implications of the Findings

The findings of this study suggest the following implications for nursing education and nursing practice.

Implications for the nursing education. The present study adds to existing literature in that it is a more detailed exploration of the nature of maternal dependent care behaviors for toddlers with CHD and their predicting factors. With guidance from the Self-Care Deficit Nursing Theory (Orem, 2001), the findings partially supported the premise that basic conditioning factors and dependent care agency contribute to dependent care by showing the relationships between dependent care behaviors of the mothers and family income and perceived self-efficacy. Moreover, perceived self-

efficacy emerged as a unique predictor of dependent care behaviors. In this study, perceived self-efficacy was conceptualized as part of self-care agency, thus, this result clearly highlights the role of this variable in accomplishes a given task that is providing dependent care behaviors for toddlers with CHD. Importantly, this study demonstrates the integration of perceived self-efficacy concept to the self-care agency in the Self-Care Deficit Nursing Theory. Consequently, this finding can be used to guide the nursing interventions to promote dependent care behaviors of the mothers for toddlers with CHD.

Implications for nursing practice. The results of present study are relevant for policy and practice with mothers of toddlers with CHD. As the data of this study suggest, perceived self-efficacy was the only predictor accounting for 43.80 % of the variance in the mothers' dependent care behaviors for toddlers with CHD. This finding indicates that perceived self-efficacy is very important in dependent care behaviors of the mothers. Programs serving those mothers should focus on enhancing perceived self-efficacy. Intervention programs based upon the self-efficacy concept would allow the considerations of personal, social and environmental variables that influence the mothers' dependent care behaviors. To incorporate self-efficacy development into the interventions is, through the social learning theory techniques of modeling and skills training. By having the mothers observe other mothers' role model care behaviors, by involving them in role plays or having them watch videos of the care behaviors to be promoted, then self-efficacy can be fostered. In skill development, the desired care behaviors would be broken down into the tasks needed for successful completion and positive reinforcement given for each step attained. This strategy may be more helpful

for a group of mothers with low educational background because they may have difficulty reading and understanding the information.

Based on findings of the present study, a positive relationship was found between family income and dependent care behaviors of the mothers. These results indicate the need for healthcare providers to identify and pay more attention to the mothers who are likely to provide less than optimal dependent care behaviors for toddlers with CHD. Also, any resource that helps those mothers be able to perform better dependent care behaviors should be provided. Despite the present study having failed to demonstrate the effects of parenting stress on the dependent care behaviors, the importance of parenting stress can be obtained through the findings of approximately one-third of the mothers described levels of total parenting stress above the cutoff for clinical significance. Thus, the appropriate interventions should be designed to address parenting stress in mothers while they provide dependent care for the toddlers with CHD. In addition, since the results suggest the value of perception of social support availability among mothers of toddlers with CHD, this indicates the need to help mothers of toddlers with CHD perceive having availability of social support from their family, as well as from others.

In addition, the assessment of parenting stress, perceived social support, perceived self-efficacy, CHD knowledge, and dependent care behaviors in this study could be utilized in clinical setting in identifying the mothers who are in need of immediate interventions to deal with parenting stress, accessing social support, enhancing self-efficacy, and promoting knowledge and dependent care behaviors.

Recommendations

Based on this study, recommendations for future research can be made. Since perceived self-efficacy could explain 43.80 % of changes in the mothers' dependent care behaviors for toddlers with CHD, future research should continue to address the effect of perceived self-efficacy interventions could have on dependent care behaviors of those mothers. More research is also needed to identify effects of other basic conditioning factors which are not included in the present study, for example health care system, family system, or health state of CHD children. Moreover, there is a need for replication of this study to test the mediator and moderator effects of the study variables. Future investigation with a sample of children with similar CHD severity would allow for more refined designs. In addition, other kinds of CHD, for example cyanotic CHD or complex CHD may be examined in regarding of maternal dependent care behaviors.