

DOING THEIR BEST TO GET THE CHILD READY FOR SURGERY: A STUDY OF PRACTICES OF THAI FAMILIES IN CARING FOR CHILDREN WITH CONGENITAL HEART DISEASE PRIOR TO CARDIAC SURGERY

Arunrat Srichantaranit¹, Ratanawadee Chontawan², Jarrassri Yenbut³, Lynne Ray⁴,
Duangmanee Laohaprasittiporn⁵, Suthep Wanitkun⁶

¹ Department of Pediatric Nursing, Faculty of Nursing, Mahidol University,
E-mail: nsasj@staff.1.mahidol.ac.th

² Department of Administrative Nursing, Faculty of Nursing, Chiang Mai University,
Email: ratanawa@chiangmai.ac.th

³ Department of Pediatric Nursing, Faculty of Nursing, Chiang Mai University,
Email: jyenbut@yahoo.com

⁴ Faculty of Nursing, University of Alberta, Canada,
Email: lynne.ray@ualberta.ca

⁵ Faculty of Medicine, Siriraj Hospital, Mahidol University,
Email: sidlh@mahidol.ac.th

⁶ Faculty of Medicine, Ramathibodi Hospital, Mahidol University,
E-mail: rsawn@mahidol.ac.th

Key words: Congenital heart disease; Parenting practices; Thai families.

This ethnographic study aimed to explore what practices Thai families used in caring for children with CHD, and how the Thai socio-cultural context influenced the practices. Fourteen key informants in 8 families living in Bangkok, Thailand were recruited by purposive sampling. Data were collected by participant observations, in-depth interviews, and field notes. Fieldwork took place at families' homes and university hospitals over a 13-month period. The researcher wrote the family stories to construct a holistic interpretation of the data. The data was analyzed by content analysis.

Findings from both holistic and thematic interpretations of the data indicated that families' perceptions and practices were deeply influenced by the socio-cultural context, including Buddhist teaching, cultural beliefs, support from immediate family and significant others, financial constraints, and hospital services—especially the limited advice from nurses and physicians. The main practices, based on the families' perceptions were characterized as "Doing their best to get the child ready for surgery." As the families perceived that children with

CHD may not survive, were difficult to care for, and required medicines followed by surgery, they tried their best to promote the children's weight gain and strong health, to prevent the children from getting worse, and to manage their children's care under several constraints and limitations.

The results suggested that Thai health care providers should better inform families and provide culturally congruent professional care. The practices in caring for the children were context-dependent, thus highlighting the need for new and creative ways of evaluating healthcare practice.

Funding: Faculty of Nursing, Mahidol University

Oral presentation: The 9th International Family Nursing Conference. From insights to intervention: The cutting edge of family nursing

Reykjavík, Iceland, June 2–5, 2009