



ORAL PRESENTATION

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Increasing self-efficacy – the effectiveness of a pain management programme for children and parents

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Background

CBT-based pain management groups have been well documented in the literature to effect functional changes in children and adolescents. Few, however, have examined their capacity to increase a parent's perceived ability to manage their child's pain. This is important when considering the emotional and practical influences that parents have upon their children. This study reviews the effectiveness of a brief pain management group comprised of simultaneous parent and child sessions on their perceived ability to cope with pain.

Aim

The aim of this study was to evaluate the effectiveness of a group programme designed to improve a family's self efficacy around coping with pain. It was hoped that school attendance would also improve.

Methods

Parents and children attended three intervention sessions and one 6-week follow-up. Sessions focused on cognitive-behavioural pain management techniques, associated mood management and increasing parental competence to manage pain related behaviour. Pre, Post and Follow Up data was collected from 30 patients over three groups. A Coping VAS and the Paediatric Quality of Life Scale (PEDS-QOL) were used to assess the effectiveness of the group intervention.

Results

Following intervention, there was a significant increase in the parents' and child's perceived ability to cope with

pain ($t(17)=2.587$, $p<.05$). Social functioning also improved significantly over the course of the intervention according to parent and child report. Psychosocial health was rated as improved by all participants; however given the small number of returned questionnaires this did not reach significance. There was a trend towards increased weekly school attendance. It is hoped these trends will reach significance as more data is collected.

Conclusions

These findings indicate that a brief pain management group can increase parents' and children's self-efficacy to manage pain, and is likely to decrease pain-associated distress. This has important implications as to the management of patients in busy outpatient services; the amount of health visits utilised by families; and the number of days off school as a result of pain.

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