

Barriers to accessing healthcare services for incontinence among female aged-care facility patients in Central Queensland

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Background

Despite urinary incontinence (UI) being more prevalent in women in residential aged care facilities, only a small percentage access incontinence services.

The barriers identified in previous research can be divided into four main categories:

emotionally driven barriers, lack of education about incontinence, clinical factors and level of severity of incontinence

Objectives

Primary Objective:

The main aim of this study is to identify the barriers to accessing health services for incontinence among female residential aged care facility residents in Central Queensland.

Secondary Objective:

Impact of urinary incontinence on QoL in nursing homes.

Methods

Design: Cohort study of female residents in aged-care facilities. Data collection included demographics, validated questionnaires to assess type and severity of urinary incontinence (ISI, UDI, IIQ-7) and qualitative questionnaire examining the impact of UI and the barriers to accessing incontinence services.

Exclusion Criteria: Inability to give informed consent, due to diminished comprehension, disease state, or high dependence individuals.

Analysis: Thematic-for qualitative.

Descriptive statistics-for quantitative.

Incontinence Severity Index (ISI),

Urogenital Distress Inventory (UDI), and

Incontinence Impact Questionnaire (IIQ-7, Short Form)

References

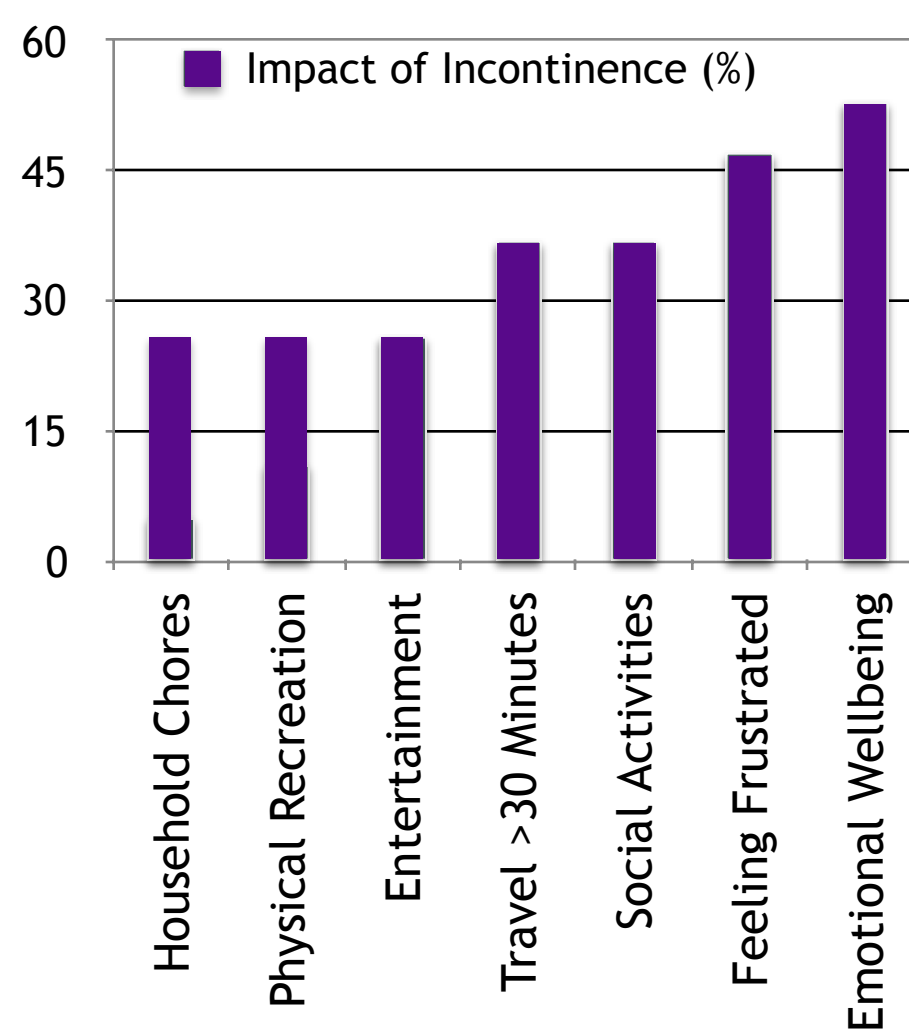
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Results

147 females were considered. 32 residents satisfied the criteria.

19 were bothered by their incontinence symptoms (59%) Fig. 1 demonstrates the aspects of life impacted by incontinence. Women were most troubled by their inability to participate in social activities (42.1%) or to travel more than 30mins from home (42.1%). 52.6% reported impact on emotional health and 47.4% felt frustrated. Fig. 2 demonstrates the barriers to seeking treatment of incontinence in both women who are bothered by incontinence and those who are not. 87.5% managed incontinence by changing their routines, of which 69% used continence pads. In 84.4%, lack of knowledge was a barrier. 34.4% perceived UI of low clinical importance and emotional barriers (embarrassment) affected 28.1%.

Fig. 1 Reported Impact of incontinence (%) on daily life

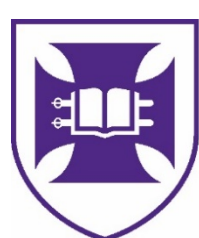
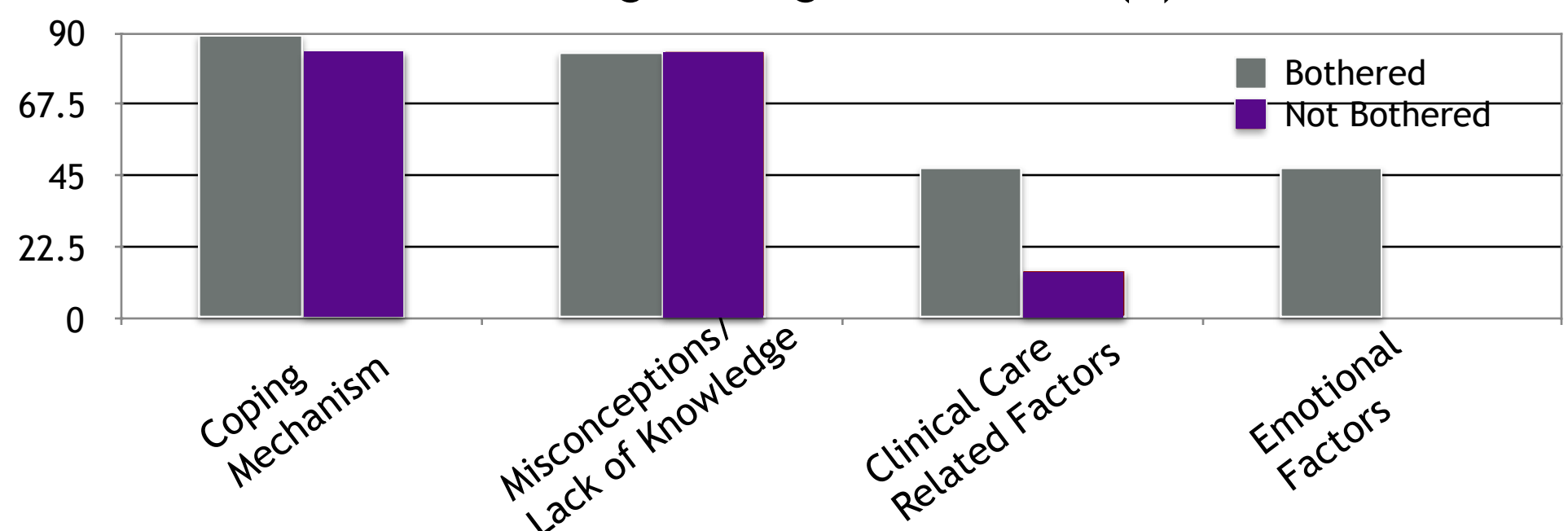


Conclusion

In this study, despite high prevalence of bothersome symptoms in women suffering from UI, we found the main limiting factors for patients accessing incontinence services to be lack of knowledge, perception of low priority of UI, and low clinical importance

Healthcare policymakers should start to consider educational sessions for healthcare workers and the use of educational visual media for residents in aged-care facilities to encourage access to incontinence services.

Fig. 2 Reported barriers to seeking treatment of Urinary Incontinence among nursing home women (%)



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