



For Immediate Release

In support of [World Continenence Week](#): Fecal Incontinence Study News Release

June 13, 2018

“Education and Training of Family Carers and PSWs are the Key to Overcoming the Stigma of Fecal Incontinence”.

Recent Research Study conducted by The Cameron Institute and the Canadian Continenence Foundation, supported by Essity Hygiene and Health AB (Canada) supports on-going education and training of both paid and volunteer fecal incontinence (FI) caregivers.

Southern Ontario, Canada: The study of fecal incontinence (FI) has traditionally taken secondary precedence to the study of urinary incontinence (UI), with over four times as many academic articles written about UI. This represents an unmet need in both attention and care of FI. Many incontinent patients do not have access to or knowledge of evidence-based medical therapy and their quality of life suffers because of the stigma inherent. FI is often suffered in silence without seeking health care.^{1,2}

Many family physicians have reported that they are not adequately trained to provide proper care of incontinent patients and seldomly treat or refer to a specialist immediately.³

Recent research showed that professional caregivers in long term care facilities also were not confident in their skills to care for FI residents.

In keeping with The Canadian Continenence Foundation`s continuous drive to encourage access to the treatment and education of urinary and fecal incontinence, an exploratory, qualitative home-based study of family carers and community-based continence care providers was conducted by The Cameron Institute and The Canadian Continenence Foundation, with the support of Essity Canada, makers of TENA® personal hygiene products, to identify the knowledge, confidence, skills and perceptions of personal support workers and family carers.

Canada has an aging population with an ever-increasing burden of chronic diseases and disorders that puts great strain on limited community care capacity. This study looks at the care of incontinence in the community against this backdrop.

The objectives of the study were to determine of personal support workers (PSWs) and family carers their:

- a) general continence knowledge
- b) fecal incontinence knowledge
- c) fecal incontinence perceptions
- d) confidence when dealing with people with fecal incontinence
- e) skill level when dealing with people with fecal incontinence
- f) in-class education for dealing with fecal incontinence (PSWs only), and
- g) on-the-job training for dealing with people with fecal incontinence (PSWs only)

The study used a structured interview protocol of 83 questions: 36 close ended questions on a 10-point Likert-type scale; 39 on a binary, yes-no scale; 2 open-ended; 6 demographic.

The sample interviewed consisted of 12 PSWs and 10 family member carers.

All but two of the PSWs interviewed were female with an average age of 52 years ranging from 32 to 68. All had a community college education. The average length of practice was 12 years with a range of <1-28 years. The average length of experience with incontinent patients was 11 years. PSWs were long-serving, middle-aged permanent employees qualified for their positions.

Family members were evenly split between male and female with an average age of 70 years, ranging from 62 to 82 years of age. Only half of the family members had any post-secondary education. The average family member had 4 years of experience dealing with someone who was incontinent.

The study results were surprising and revealed that:

General continence knowledge amongst PSWs and family carers was low. In fact, PSWs and family carers caring for someone in the home were minimally coping with the patient's incontinence rather than actually helping the patient to manage his/her incontinence.

PSWs and family caregivers lacked knowledge about the causes of fecal incontinence (FI), the proper care of skin irritations due to FI, the use of a voiding diary, and how to manage constipation and fecal impaction. They showed rudimentary and coping knowledge of treatments but not true chronic condition management care knowledge.

Confidence amongst family carers dealing with a family member with FI was low while PSWs had a high confidence level except when dealing with patients with depression and skin irritations.

PSWs' in-class education regarding giving them the knowledge and skills to deal with FI was adequate with lower scores being in dealing with odour, escorting to the washroom in time and changing incontinence products frequently.

Family members felt their skill level was low, in regards, to escorting their relative to the washroom on time, caring for skin irritations and dealing with their loved one's depression.

PSWs cited they could improve their skills pertaining to care of skin irritations.

PSWs rated their "on-the-job" training in FI care high. They scored below average in history-taking, dealing with depressed individuals, dealing with odour and dealing with accidents which signifies they were not clinically managing the patient's FI.

Family perceptions of FI was that:

- the cost of incontinence products was too expensive and inhibited them from buying the right product to meet patient needs
- incontinence was a disability and therefore, the government should provide greater subsidization
- at times felt stressed and unable to cope

Other comments included:

- absorbent and other FI products are expensive; and thus cannot not make the adequate changes, this depresses the incontinent individual to the point of not wishing to go outside which prevents live-at-home carers from going out as well
- accidents happened when loved-one was left alone
- high cost of products when living on a fixed income with no government support
- requiring the carer to be diligent to prevent skin irritations

PSW perceptions of FI was that:

- caring for FI patients in a home-setting could result in falls and other health concerns possibly leading to unwanted institutionalization
- they were well equipped to support individuals living with FI based on their professional training and that they had the right tools and education to do so
- they viewed incontinence as a disability

PSWs felt that they could perform their job easier if they had:

- more time to work with the patient on continence and other matters; all the time with the patient was spent on “accidents” and nothing else got done, or, accidents were ignored to tend to other matters and patients left in soiled products
- more in-class and on-the-job training as most of it was accrued on the job
- specific products indicated for patients being available and accessible when needed
- enlarged bathrooms so PSWs can work with patients in the bathroom
- more and better product knowledge to pass onto patient

Conclusions

As Ontario’s population ages, consideration needs to be given to the actual burden FI places on the individual and family both financially and from a patient care perspective including what resources are available.

There is a need for a new way of thinking about homecare with emphasize on the “caring” and “personal” aspect of the equation.

There is a need for proper fecal incontinence management at home as opposed to merely coping with FI.



Participatory training and education is recommended for both PSWs and family carers to help them better deal with individuals living with FI.

The study supports on-going education and training of both paid and volunteer FI care-givers; the long overdue de-stigmatization of FI and the proper listing of it as a disability that impairs livelihood and quality-of-life; and public-private-notforprofit collaboration to optimize the care provided elders living at home with FI. Along with raising the need for attention to this topic from an advocacy and policy change perspective.

For more information, please visit:

www.cameronunstitutue.org

www.canadiancontinenence.ca or call Jacqueline Cahill, Executive Director at 705-931-4488.

For full study, please visit:

<http://article.sapub.org/10.5923.j.health.20180802.01.html>

Partners in World Continenence Week – June 8-14

TENA® is proud to partner with the Canadian Continenence Foundation to help educate, raise awareness and overcome stigmas associated with Incontinence.

ACKNOWLEDGEMENT



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3. J. G. Swanson, J. Skelly, B. Hutchinson, J. Kaczorowski, Urinary incontinence in Canada: National survey of family physicians' knowledge, attitudes, and practices. Can Fam Physician 2002, 48: 86-92.