Managing and Caring for Clients with Dysphagia: Caregivers’ Perspective

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Dysphagia has been identified as a life threatening problem in many healthcare settings. The management of dysphagia usually involves a multidisciplinary team approach where caregivers, clients and various professionals contribute to the management. Caregivers came across a number of barriers during the caring process of dysphagia clients. The perception of the caregivers about the dysphagia, knowledge received by the professionals, effects and adaptations on social and personal life are important to consider as they have an impact on the management procedure in relation to dysphagia. A descriptive cross-sectional study design was implemented. Forty caregivers of neurogenic dysphagic clients who had been referred to the speech therapy unit in the last six months were recruited to the study using purposive sampling. The study consists of both qualitative and quantitative components. The data was collected through an interview administered through a semi structured questionnaire, which was analyzed using frequency analysis and thematic coding analysis. Majority (50%) of the professionals involved in advising caregivers were doctors and speech therapists. 18 doctors and 25 SLTs gave advice orally. Majority (n=14) of the caregivers preferred a combination of giving oral, written and practical advice. The frequency of following the adaptations on feeding techniques was limited as the caregivers thought it was not necessary to always follow the adaptations. Health, occupation, economy and social functions were found to be affected and required adaptations in the caregivers’ life. As most professionals in SL give advice orally, it is important to consider caregivers’ preferences. The importance of increasing awareness in following the adaptations on feeding and nutritional values among the caregivers is indicated in the study findings. Moreover, the effects on caregivers’ social and personal life should be considered in dysphagia management procedures.