Barriers and Facilitators to Movement in Pediatric Palliative Care: A Qualitative Multi-Perspective Study.

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Background

Paediatric Palliative Care (PPC) aims to improve the quality of life of children with life-threatening or life-shortening conditions[1]. In practice, this focus is predominantly translated into caregiving and symptom management, with limited attention to movement and physical activity[2,3]. Paediatric physiotherapists and occupational therapists (paediatric therapists) have expertise to support movement in children with disabilities, but they report lacking PPC-specific knowledge. Other care professionals, as well as parents, often have limited awareness of the potential benefits of movement. Consequently, paediatric therapy is underutilized in daily PPC practice. Gaining a deeper understanding of the barriers and facilitators to movement is essential for its effective integration, positioning movement as a key component of PPC and ultimately enhancing children's quality of life.

Objective

This study aims to identify and explore barriers and facilitators to movement in PPC from the perspectives of children, parents, paediatric therapists, and other stakeholders.

Methods

This qualitative study collects data through semi-structured generative interviews with children and young adults (6–23 years; n=12), parents (n=12), and paediatric physiotherapists and occupational therapists (n=12), as well as four focus groups with nurses, pedagogical staff, and volunteers. The generative approach uses creative materials such as timelines, pictures, and drawings to elicit tacit knowledge, including latent needs, perspectives, and emotions not easily captured in traditional interviews[4]. Data will be analysed using inductive thematic analysis in ATLAS.ti, with independent coding by two researchers to ensure reliability[5].

Results

Data collection is ongoing, and results are not yet available. Preliminary findings, to be presented at the conference, will summarize key themes and sub-themes regarding barriers and facilitators to movement from multiple stakeholder perspectives. These insights are

expected to provide an empirical foundation for developing educational programs and practical tools that facilitate the integration of movement into daily PPC.

Conclusion

The study is expected to provide insights that bridge the knowledge gap between paediatric palliative care and paediatric therapy, guiding the creation of practical tools and educational programs to integrate movement into daily PCC and support children's participation and quality of life.

Words: 335

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