RESUMO

ABSTRACT

Objective: to analyze the evidence and reasons of the family members who end up abandoning the follow-up of the health of newborns, infants, and preschoolers in child health services. Method: a systematic review of qualitative evidence in the following information sources: Web of Science, Science Direct, CINAHL, SCOPUS, BDENF, PUBMED, EMBASE, LILACS, ASSIA, Sociological abstracts, Open Gray, Google Academics, Dart-e, Cybertesis, Open Thesis, PeerJ Prepint, MedRxiv, BioRxiv, and PsycINFO. The titles and abstracts will be examined by two independent reviewers and the relevant studies will be retrieved in full. Data synthesis will be performed by extraction of all the findings from all the included works, development of categories for similar findings, and development of synthesized findings from at least two categories. The qualitative findings of the research will be grouped with the meta-aggregation approach. The summarized final results will be classified and presented in a summary of the results.

Descriptors: Child Health Services; No-Show Patients; Patient Dropouts.
INTRODUCTION

Investing in health programs reflects on a positive return for society. At the same time, reinforcing the follow-up in early childhood is one of the best strategies to diminish the inequalities, face poverty, and help to build a social environment with more sustainable environmental and psychological conditions\(^1\). Despite the already mentioned benefits about the importance of a good follow-up in this period of life, it is estimated that more than 200 million children under five years of age who live in developing countries do not reach their potential, by virtue of being exposed to diverse risk factors, among them, the biological and psychosocial environments\(^1\).

Health professionals, especially nurses, play a fundamental role in the development of actions regarding child growth and development, along with the reduction of inequalities in health, so that they not only survive, but also do so with dignity\(^2\). The adherence to the follow-up and treatment of these children by their parents is fundamental so that the programs in child health services are fruitful; however, abandonment of treatment is frequent, generating queues in the health system, possible unnecessary hospital stays, and further suffering for the family due to the disease of the child\(^{1-2}\).

METHOD

The proposed systematic review will be performed according to the method of the Joanna Briggs Institute for qualitative systematic reviews; therefore, for the formulation of the guiding questions of this study, the PI\(Co\) strategy will be used, in which “P” stands for population, “I” stands for the phenomenon of interest, and “Co”, for the context\(^3\).

The population chosen for this study was the family members of newborns, infants, and preschoolers (children from 0 to 5 years of age). The phenomenon of interest is the reason assigned to the absence and abandonment of the child growth and development follow-up. The context is
child health services, regardless of the care level, where, adding the PICo acronym, the guiding question for this research was formulated: “What are the reasons attributed by the family members to not take children to the growth and development follow-up in child health services?”

After previous readings of studies on the topic of interest and searching on the Descriptors in Health Sciences (Descritores em Ciências da Saúde, DeCS) and Medical Subject Headings (MeSH) platforms, the following descriptors and its synonyms were listed: Child Health Services; Non Attending Patients; and Patients Dropping Out Treatment.

The search strategy will aim to find published and unpublished studies. The reference list of all the studies selected for critical evaluation will be examined for additional studies.

The research information sources for this study will be of a qualitative nature, coming from the data sources chosen according to the theme: Web of Science, Science Direct, CINAHL, SCOPUS, BDENF, ADOLEC, PUBMED, MEDLINE, CAPES thesis and dissertation catalog, DataCite Search, Scielo, Google Academics, EMBASE, LILACS, and PsycINFO. Articles in all the languages found, of the public or private domain, will be analyzed. The potentially relevant studies will be retrieved in full and the details of their quotes imported into the System of the Joanna Briggs Institute for Unified Management, Evaluation and Review of Information (3).

The full text of the selected quotations will be evaluated in detail based on the inclusion criteria by two independent reviewers. Any differences that arise between the reviewers at each stage of the study selection process will be resolved through discussion with a third reviewer.

Data synthesis will be performed in three stages as planned (3), namely: 1-extraction of all the findings from all the included works, with an illustration attached and establishing a credibility level for each finding; 2-development of categories for sufficiently similar findings, with at least 2 findings per category; and 3-development of one or more synthesized findings of at least 2 categories.

The results of the research will be reported in full in the final systematic review and presented in a flow chart (PRISMA) to
improve the reporting of systematic reviews.

The eligible results will be critically evaluated by two independent reviewers with regard to the methodological quality, using the standard verification list of critical assessment from the Joanna Briggs Institute for qualitative research3. The final results synthesized will be classified according to the ConQual approach to establish reliability in the synthesis results of the qualitative research and presented in a summary of the results.

The systematic review protocol was sent for appreciation by the International Prospective Register of Systematic Reviews (PROSPERO), and the method adopted was validated under registry number CRD42020193702.

REFERENCES


Received: 07/27/2020
Revised: 09/10/2020
Approved: 09/10/2020