Aspects of living conditions among groups of disabled children and their families in Norway: family situation, mothers' health, financial assistance.

Author: K. Storhaug
Date: 1983
Language: English
Publication Type: Article
Keywords: Adolescent
Adult
Child
Child, Preschool
Comparative Study
Disabled Persons
Family
Family Health
Female
Humans
Infant
Infant, Newborn
Male
Norway
Public Assistance
Social Conditions
Social Welfare

Abstract: A survey of 875 disabled children in Norway aged 0-19, representing ten different disabling conditions, was carried out between January 1976 and December 1978. Parents of the disabled children were interviewed, medical records studied and the children examined. Mother's age, level of education, presence of disabled siblings, spouse's education and profession as well as emergency situations related to the disabled child's condition appeared to be factors influencing the mother's health and therefore inevitably the family's ability to cope with the situation. Social insurance seemed to have been granted in a rather haphazard way; only families of children suffering from hemophilia, mental retardation, spina bifida and cerebral palsy seemed to have received fairly adequate social insurance benefits. Families of children suffering from juvenile rheumatoid arthritis, asthma, congenital heart disease and epilepsy had received less social insurance assistance than those in the other groups. One-parent families had received more social insurance than others. Families with children who were totally dependent on their parents, who had several diagnoses or had spent much time in hospital, had also been granted more social insurance. Welfare benefits distributed by local authorities had mainly been given to families who were also receiving social insurance benefits and to families of children with brain damage. Almost half of all families expressed needs for welfare benefits which had not been met. Thus, there seemed to be an underconsumption of both social insurance and welfare benefits, particularly among some diagnostic groups.

PubMed ID: 6229033 View in PubMed
Barriers to utilization of dental health services in a group of disabled Norwegian adults.

https://arctichealth.org/en/permalink/ahliterature62941

Author: K. Storhaug
Author Affiliation: Frambu Helsesenter, Siggerud, Norway.
Date: Aug-1988
Language: English
Publication Type: Article
Keywords: Adult
Aged
Chronic Disease
Dental Care for Disabled - utilization
Female
Health Services Accessibility
Humans
Jaw, Edentulous
Jaw, Edentulous, Partially
Male
Middle Aged
Norway
Oral Health
Time Factors

Abstract: A group of 496 disabled Norwegian adults were interviewed about their use of the dental health services. The purpose was to study which factors influenced their use of such services. Altogether, 53% of the study participants visited a dentist every year. Among the 335 dentate participants 72% visited the dentist annually, whereas 13% of those without their own teeth reported regular visits. A multiple classification analysis was applied to explain the variance in the use of dental services. Self-reported barriers to dental visits and the number of own teeth left were the strongest and equally important determinants (beta = 43) for regular utilization of dental services when all the participants were included in the analysis. Among the dentate participants self-reported barriers (beta = 55) explained most of the variance in dental visits.

PubMed ID: 2973203 View in PubMed
Caries experience in disabled pre-school children.

The parents of 436 disabled pre-school children were interviewed about habits and problems relevant to dental health. The children, who represented 10 different disabling conditions, were examined and dmft registered. The purpose was to study the relationship between different background variables and caries experience. The dmft score was analyzed in accordance with several sociocultural, medical, and habitual variables, using a multiple classification analysis (MCA). The number of daily carbohydrate intakes, duration of use of nursing bottle, family income, and diagnosis were the variables with the strongest association with dmft. Children with congenital heart disease, asthma, and cystic fibrosis had a considerably higher adjusted dmft than the other diagnostic groups. The proportion of children with caries experience was higher in the present survey than in groups of Norwegian children of corresponding age.
[Delivery of dental care to handicapped children and adults is not satisfactory today. An interview with Kari Storhaug]

https://arctichealth.org/en/permalink/ahliterature41221

Author: K. Storhaug
Source: Nor Tannlaegeforen Tid. 1979 Dec;89(11):606-8
Date: Dec-1979
Language: Norwegian
Publication Type: Article
Keywords: Adult
Child
Delivery of Health Care
Dental Care for Disabled
Dental Health Services
Humans
Mental retardation
Norway
PubMed ID: 160540 View in PubMed
Dental welfare profiles in a group of disabled Norwegian adults.

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Date: Aug-1989  
Language: English  
Publication Type: Article  

Keywords: Adult  
Aged  
Dental Care for Disabled - utilization  
Disabled Persons  
Female  
Health Behavior  
Health Resources  
Health Services Accessibility  
Humans  
Insurance, Dental  
Jaw, Edentulous  
Jaw, Edentulous, Partially  
Male  
Mastication  
Middle Aged  
Norway  
Oral Health  
Oral Hygiene  

Abstract: In a group of 496 non-institutionalized disabled Norwegian adults the possibility of identifying groups with particular dental welfare profiles which could be ascribed to a set of resource profiles was studied. Eight independent resource variables and seven dependent dental welfare variables were included in the model using canonical correlation analysis. Three main dental welfare profiles were identified: The most important profile was dominated by number of own teeth and differences were mainly ascribed to age, income, marital status and education. The second profile comprised a combination of absence of payment arrangement, chewing problems and barriers for dental care and differences were ascribed to sex, hospital experience, and organized assistance. The third profile discriminating between the disabled individuals was problems with performing dental hygiene associated with irregular use of dental services and barriers for dental care and differences were related to sex, marital status, degree of dependency, and organized assistance. For all profiles, individual characteristics were more important than contextual resources.  

PubMed ID: 2527139 View in PubMed
Determinants of receipt of assistance benefit and welfare services in a group of disabled adults in Norway.

https://arctichealth.org/en/permalink/ahliterature16217

Author: K. Storhaug
Date: 1984
Language: English
Publication Type: Article
Keywords: Adult
Asthma
Costs and Cost Analysis
Disabled Persons
Hemophilia A
Humans
Medical Assistance - economics
Norway
Osteogenesis Imperfecta
Rheumatic Diseases
Social Welfare

Abstract: A survey of 472 chronically ill and disabled Norwegian adults with four different main diagnoses (asthma/allergy, hemophilia, osteogenesis imperfecta and rheumatic disease) was carried out during a period of 3 years. The purpose was to analyse the factors influencing their use of available Social Insurance and Welfare services. The participants were interviewed and their medical records studied. Compared to the total population their level of education was lower and fewer were active in the work force. Available social insurance benefits had been obtained by almost half of the patients with hemophilia and osteogenesis imperfecta, but very few with asthma/allergy and rheumatic disease. Patients with high family income and/or high educational level had received relatively more social insurance benefits than others. Men had obtained more benefits than women and young patients more than the older ones. The need for practical welfare services was high, particularly in families where a parent or daughter looked after the patient, where the patient had several additional diagnoses, and among the female patients. There was a higher unmet need for welfare services among patients suffering from asthma/allergy and rheumatic diseases than among those with hemophilia and osteogenesis imperfecta. There were marked regional differences in the granting of both social insurance and welfare services.

PubMed ID: 6229879 View in PubMed
Family-focused services for children with rare disorders, exemplified by bladder extrophy. A Norwegian national health program.

https://arctichealth.org/en/permalink/ahliterature39613

Author: I H Vandvik
K. Storhaug


Date: Feb-1985

Language: English

Publication Type: Article

Keywords: Adolescent
Bladder Exstrophy - psychology
Child
Child Guidance
Child, Preschool
Family Therapy
Humans
Infant
National health programs - organization & administration
Norway
Self-Help Groups - organization & administration
Social Support

Abstract: Families of children with rare disorders have many experiences in common, as well as special problems related to the specific disorder. This paper presents Frambu Health Centre and the family-focused services offered to patients with bladder extrophy during the first information and treatment course arranged for this group at the Centre. Main areas of concern as reported by the families are presented.

PubMed ID: 3967452 View in PubMed
Frambu Health Centre: promoting family focused care for disabled children.

https://arctichealth.org/en/permalink/ahliterature14670

Author: K. Storhaug
I H Vandvik


Date: Jun-1983

Language: English

Publication Type: Article

Keywords: Child
Child Health Services - organization & administration
Community Health Centers - organization & administration
Disabled Persons
Humans
Norway
Patient Care Planning - organization & administration
Patient Care Team - organization & administration
Professional-Family Relations
Research Support, Non-U.S. Gov't

Abstract: During the last 30 years the Frambu Health Centre has evolved from a summer-camp site for children with poliomyelitis to a modern information and treatment Centre for families with disabled members. Since 1976, fortnightly courses have been held for an increasing number of patients with rare, often congenital and/or hereditary disorders (anorectal anomalies, bladder extrophy, congenital heart defects, cystic fibrosis, severe diabetes, hemophilia, hip joint defects, juvenile rheumatoid arthritis, minimal brain dysfunction, muscular dystrophy, phenylketonuria, psychosis/autism, spina bifida, Huntington's chorea, osteogenesis imperfecta, retinitis pigmentosa, a.o.). This article describes the facilities, operation, financing and staff at Frambu. An outline of the course programme is given. The contents of two research projects carried out at Frambu are described. When families with rare disorders meet for the first time, new perspectives open up. Exchange of experience and feelings, establishing lay organizations, collating and distributing information to professionals and families are some of the important results of the Frambu courses.

PubMed ID: 6225740 View in PubMed
[Laurence-Moon-Bardet-Biedl syndrome]

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Author Affiliation: Sentralsykehuset for Ostfold, Fredrikstad.

Source: Nord Med. 1990;105(5):146-8

Date: 1990

Language: Norwegian

Publication Type: Article

Keywords: Abnormalities, Multiple - rehabilitation  
Adolescent  
Adult  
Child  
Child, Preschool  
English Abstract  
Female  
Humans  
Laurence-Moon Syndrome - epidemiology - rehabilitation  
Male  
Middle Aged  
Norway - epidemiology  
Patient care team  
Registries

Abstract: In 1984, 32 persons with Laurence-Moon-Bardet-Biedl syndrome (LMBB) were registered in Norway. This means that the disorder was seen at a rate of 1 in 128,000 inhabitants. Of these, 26 attended the Frambu Health Centre, where they consulted a pediatrician, a psychologist, a dentist, a social worker, a geneticist, a teacher for the blind and an ophthalmologist. The cardinal signs were retinitis pigmentosa, obesity and polydactyly. We also found that all the patients had disturbance of tooth formation. Many had hypogonitalism. Mental retardation is usually included as a cardinal sign. Our impression is that most of the patients have normal intelligence. But this will be investigated further in a follow-up study on young people with LMBB.

PubMed ID: 2349067 View in PubMed

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Remaining teeth, oral dryness and dental health habits in middle-aged Norwegian rheumatoid arthritis patients.

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The aim of the study was to assess the effect of rheumatoid arthritis (RA) upon dental health. A questionnaire was mailed to all seropositive rheumatoid arthritis (RA) patients aged 44-56 yr in the files of the two main departments of rheumatology in South Eastern Norway. Data were obtained from 125 patients, constituting 91% of the target group. The number of remaining teeth in these patients was not related to disease duration or physical dysfunction, whereas a relationship to prolonged use of medication for pain relief was indicated. Factors known to affect tooth loss in the general population, such as smoking habits, dental attendance, interdental cleaning habits, previous dental disease, and place of residence were found to be important in RA patients as well. The RA patients from Oslo had a mean number of 25 remaining teeth, which is the same as reported for the general Oslo population at this age. Oral dryness was reported by more than 50% of the RA patients, but was not related to the number of teeth. The conclusion is that serious and long lasting rheumatoid arthritis had little influence on the number of remaining teeth in this middle-aged group of Norwegians.