

- Offer choices when possible
- Avoid words that provoke fantasies (cut, bleed)
- Be honest

### **Coping/Comforting Techniques**

- Humor
- Soft music
- Encouraging statements
- Bubbles
- Favorite Objects
- Technology
- Comfort positioning

## **School-age (6-12 years)**

### **Developmental Stage**

- Inquisitive & eager to learn
- Desires to master tasks
- Uses logical thinking & rational thought

### **Hospitalization Concerns / Fears**

- Separation
- Fears:
  - loss of control & mastery
  - bodily mutilation
  - bodily injury and pain
  - illness, disability, & death

### **Possible Patient Responses**

- Regression
- Inability to complete some tasks
- Uncooperativeness
- Withdrawal
- Depression
- Displaced anger and hostility
- Frustration

### **Interventions**

- Maximize parental involvement
- Medical & therapeutic play
- Prepare for medical procedure with time for questions and explanations
- Offer choices when possible
- Be honest
- When appropriate have them participate in their care

### **Coping/Comforting Techniques**

- Humor/Jokes
- Music
- Encouraging statements
- Deep breathing
- Technology
- Favorite objects

## **Adolescent (12 -18 years)**

### **Developmental Stage**

- Develops identity
- Uses deductive, hypothetical, and abstract thinking
- Emphasis on peer relationships
- Believes their experience is unique
- Concerned with appearance

### **Hospitalization Concerns / Fears**

- Dependence on adults
- Separation from family and peers
- Fears: bodily injury, pain, loss of identity
- Lack of privacy
- Embarrassed to show emotion related to hospitalization (i.e. crying because of pain)

### **Possible Patient Responses**

- Uncooperativeness
- Withdrawal
- Anxiety
- Depression
- Defense Mechanisms
- Intellectualization

### **Interventions**

- Provide privacy
- Respect independence (choices); involve patient in their care and decisions
- Encourage self-expression
- Facilitate preparation for medical treatment/procedures
- Give permission to ask for pain medication
- Communicate honestly

### **Coping/Comforting Techniques**

- Humor/Jokes
- Music
- Encouraging statements
- Deep breathing
- Technology
- Guided imagery

*Adapted from: Children's Hospital Orange County, Child Life Department 2004; Understanding Children Who Are Hospitalized: A Developmental Perspective (Rollins); Children's National Medical Center Child Life Internship Materials*

# **A Guide for the Caregiver of the Hospitalized Child**

Explanations of age related issues, stressors and behaviors.

*Caregiver interventions to help children and families cope with hospitalization and medical procedures.*



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## Neonates (0-30 days)

### Developmental Stage

- Startle reflex when moved quickly or hears loud noises
- Sucking reflex; sucks on anything placed in mouth
- Rooting reflex; opens mouth and turns head toward side where cheek is stroked
- Grasps anything placed in hand, then just lets go
- Focuses on objects 8-12 inches away
- Hearing is fully mature
- Moves head side to side while lying on stomach
- Begin gurgle, coo, and grunt

### Hospital Concerns/Fears

- Startles to loud noises and sudden movement
- Blinks in response to bright light

### Possible Patient Responses

- Crying
- Sucking
- Quiets to soft music, singing, or talking
- Soothes when swaddled in blanket or being rocked

### Interventions

- Encourage parent presence and participation in care
- Show parent how to touch or hold infant if connected to unfamiliar medical equipment
- Avoid quick movements
- Decrease noise levels and bright lights
- Avoid hunger
- Talk in soft, soothing voice 8-12 inches away from face
- Ask your nurse about “Kangaroo Care”

### Coping/Comforting Techniques

- Soft music / Voices
- Comfort Positioning/Swaddling
- Singing
- Kangaroo Care

## Infants (0-1 year)

### Developmental Stage

- Learns through senses
- Establishes trust & attachment
- Stranger anxiety (8-10 months)
- Separation anxiety (9+ months)

### Hospitalization Concerns / Fears

- Separation
- Lack of stimulation (i.e. – reduced amount of interaction)
- Over stimulation (i.e. – sounds, lights)

### Possible Patient Responses

- Failure to bond
- Distrust
- Anxiety
- Delayed skills development

### Interventions

- Maximize parental involvement
- Minimize over stimulation (i.e. – lower lights, minimize sounds)
- Limit number of medical staff
- Maintain home routines

### Coping/Comforting Techniques

- Light up Toys
- Soft Music
- Encouraging Statements
- Comfort Positioning
- Singing
- Bring familiar objects from home

## Toddler (1-3 years)

### Developmental Stage

- Learns through exploration, play, repetition, and curiosity
- Seeks independence
- Acquires language skills
- Begins toilet training
- Uses great imagination
- Threatened by change in routine
- Short attention span

### Hospitalization Concerns / Fears

- Separation; from parent and fear of abandonment
- Forced regression
- Frightening fantasies
- Fears bodily injury and pain
- Immobility or restriction
- Loss of routine and rituals
- Stranger anxiety

### Possible Patient Responses

- Regression (including loss of newly learned skills)
- Uncooperativeness
- Resistance (verbal and physical)
- Temper tantrums
- Cling behavior

### Interventions

- Maximize parental involvement
- Medical & therapeutic play
- Limit number of medical staff
- Offer choices when possible
- Allow opportunities for movement, exploration, and socialization
- Expect treatment to be resisted
- Be honest; provide simple explanations

### Coping/Comforting Techniques

- Light Up toys
- Music
- Encouraging statements
- Bubbles
- Favorite objects from home
- Singing
- Technology
- Comfort positioning

## Preschool (3 -6 years)

### Developmental Stage

- Physically active
- Egocentric
- Basic language skills
- Likes to do things “all by myself”
- Learns through play & questions
- Fantasy & magical thinking – develops own ideas of what made them sick

### Hospitalization Concerns / Fears

- Separation
- Fears of loss of control
- Fear of bodily mutilation
- View medical treatment or procedures are “punishment”
- Limited independence
- Development of misconceptions
- Heightened fears (pain, strangers, medical equipment)
- Unable to distinguish between fantasy and reality

### Possible Patient Responses

- Regression
- Anger toward primary caregiver
- Physical and verbal aggression / acting out
- Dependency
- Withdrawal
- Guilt

### Interventions

- Maximize parental involvement
- Medical & therapeutic play
- Prepare prior to procedure
- Correct any misconceptions