

Developmentally appropriate holistic comfort interventions in the pediatric population

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CONFLICT OF INTEREST

A hand-drawn illustration of the words 'CONFLICT OF INTEREST' in a bold, black, sans-serif font. A hand holding a pen is visible on the right side, with the pen tip pointing towards the text. A long, thin, black line extends from the pen tip across the width of the text.

I have no conflict of interest to report

Purpose

The purpose of this session is to critically present an evidence-based collection of nursing pearls focused on the provision of developmentally appropriate holistic comfort for infants, children, and adolescents in the four comfort contexts.



Child Development According to Piaget

- Sensorimotor- 0- 24 months
- Preoperational- 2-7 years
- Concrete operational- 7-11 years,
- Formal operational- adolescence to adulthood

Piaget (1964; 1972),



Why does development matter?

- Infants, children, and adolescents are unique.
- Diseases, trauma, and genetics may lead to delays in growth and/or development.
- Holistic comfort interventions in the pediatric population must be tailored to these developmental stages for optimal patient outcomes.

Methods



Johns Hopkins Nursing Evidence Based Practice Appraisal



Guided by Kolcaba's (1992; 1994; 2013) theory of holistic comfort- theory into the clinical practice evidence.



CINAHL, PubMed, Google Scholar, and PsycINFO



Seminal studies, seminal theory, and/or research conducted within the last 5 years.



Both qualitative and quantitative research as well as international evidence was included.

H O L I S T I C

Physical Domain



BREASTFEEDING &
SWADDLING FOR INFANT HEEL
LANCE PAIN
REDUCTION (ERKUT & YILDIZ,
2017; ZHU ET AL., 2015)



TOPICAL ANESTHETICS WITH
BREASTFEEDING FOR INFANT
VACCINE PAIN (SHAH ET
AL., 2015)



ENHANCED SLEEP COMFORT
WITH SLEEP EDUCATION
INTERVENTION FOR CHILDREN
WITH AUTISM (LORING ET
AL., 2016)



PARTY BLOWERS AND TOPICAL
ANESTHETIC REDUCES
CAREGIVER REPORTED
DISTRESS (BURGESS ET AL.
2015)

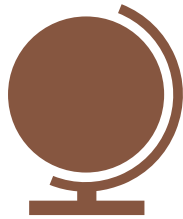


HUGS, NOT SPANKING SHOWS
ENHANCED SOCIAL
COMPETENCE AND
DECREASED SOCIAL
AGGRESSION. (ALTSCHUL ET
AL., 2016)

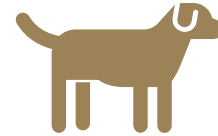
Psychospiritual Domain



“Clinician secrets” and having a “good nurse” for procedural comfort Bice, Hall, & Devereaux, 2018. p. 114)



Spiritual education increases resilience in children of divorced parents (Pandya, 2017)



Play with a live dog has been shown to decrease distress during needle procedures (Vagnoli, 2014) and stress in children undergoing a forensic interview for suspected child abuse (Krause-Parello et al., 2018)



Animal-assisted therapy = lower pain and increased activity (Calcaterra et al., 2015)

Sociocultural Domain



Consideration of the complete family unit and family-centered care (AAP, 2015)



Social presence of loved people in a preschool and school-age child's life enhances procedural holistic comfort (Bice et al. 2018)



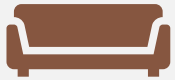
Low family conflict and high social support in adolescents = less risky behaviors (Guassi, Moreira & Telzer, 2017)



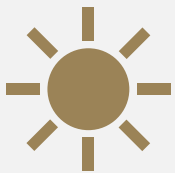
Group Music therapy for children and adolescents shows significantly lower depression and improved self-esteem (Porter et al. 2017)



Recorded maternal voice and soft lullaby = lower activity level, decreased heart rate, and decreased respiratory rate (Wirth et al., 2016)



Decorated room, soft pillows, chairs, and being comfortably warm during venipuncture enhances procedural comfort (Bice et al. 2018)



Temperature reduction in a class of a tropical climate = increased thermal comfort and performance enhancement of school-aged children (Porrás-Salazar et al., 2018).

Environmental Domain

Implications for Nursing

Providing developmentally appropriate holistic care in the pediatric population has the potential to be globally impactful.

Comfort is an optimistic result that theoretically permits children and their families to take part in health seeking behaviors, which are good for nursing productivity, cost effectiveness, and overall patient outcomes (Kolcaba, 2013).

Moreover, cognitive, emotional, and physical responses to discomfort are learned in childhood and can later affect responses to discomfort as an adult (Institute of Medicine, 2011).



Conclusion

The strength of our future depends on the wellbeing our children (First Focus, 2018)- the same children who will be making up the future of world health in years to come.

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