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Young children's experiences of their hospitalisation for Cardiac surgery

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YOUNG CHILDREN'S EXPERIENCES OF THEIR HOSPITALISATION FOR CARDIAC SURGERY.

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A research report submitted to the Faculty of Health Sciences, University of the Witwatersrand, Johannesburg, in partial fulfilment of the requirements for the degree of Master of Science in Nursing.

Johannesburg, 2005

DECLARATION

I, Nina Mary Power declare that this research report is my own work. It is being submitted for the degree of Master of Science in Nursing in the University of the Witwatersrand, Johannesburg. It has not been submitted before for any degree or examination at this or any other University.

_____

_____day of _____, 2005

This study is dedicated to all young children who are admitted to hospital for cardiac surgery, with love.

ABSTRACT

The aim and objectives of this study were to explore, interpret and describe young children's experiences of hospitalisation for cardiac surgery and to describe their parents' opinions regarding significant changes in the children one month after discharge.

A qualitative design, grounded in phenomenology was used. Semi-structured interviews were conducted with the children prior to discharge and with their parents one month later. The children's interviews were augmented by drawings, which were used to keep the children focused and to highlight themes that were not identified from their verbal accounts of hospitalisation. The expertise of a clinical psychologist was sought for the analysis of the children's drawings. The results of the analysis of the drawings supported the children's verbal accounts of their experiences in hospital.

Children's interviews revealed that young children experience and cope with hospitalisation for cardiac surgery very differently. Parents' presence, pain and boredom were dominant themes that emerged from the children's interviews. Behavioural changes and emotional responses included withdrawal, tearfulness, disturbed sleep patterns, sadness, fear, anger and happiness.

Parents' interviews one month after discharge revealed a lack of communication between the nurses and the children.

It is recommended that further research be conducted with older children to determine the effects of stringent visitation regulations followed in the paediatric intensive care setting.

ACKNOWLEDGEMENTS

I wish to express my sincere thanks to all the young children and their parents who willingly participated in this study. I hope that the stories you have told me and that I will tell others, will help future children admitted to hospital for cardiac surgery.

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