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Challenges faced by mothers during the
hospitalization of their children at one
public Hospital in Vhembe district, South
Africa.

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To be discussed....

- BACKGROUND
- OBJECTIVES
- METHODOLOGY/DESIGN
- POPULATION AND SAMPLING
- DATA COLLECTION
- DATA ANALYSIS
- RESULTS
- RECOMMENDATION
- CONCLUSION

Objectives

- ▶ The objectives were:
 - To describe mothers challenges related to hospitalization of their children.
 - Propose recommendation to assist registered nurses to support mothers.

Background

- ▶ **Hospitalization of a child** - Mothers became more stressed when their children are admitted because the outcome is uncertain and procedures are often painful.
- ▶ **Nature and severity of the illness** – This brings an intense emotions of anxiety, sadness and anger. Wong and Wilson (2003) emphasized about the stressors that parents experience when children are admitted at the hospital. One of the most important source of stress will be anxiety about the child itself and its condition (Hegedus, Madden & Neuberg, 1997).

Background continues

- ▶ **Parents reacting to child's illness and their role** – Initially a mother may react with disbelief, especially if the illness is sudden and serious. Following realization of illness, parents react with anger, guilt or both. They tend to search for self-blame on why the child became ill, or project anger at others for some wrongdoing (Musa, Akande & Adibayo, 2005).
- ▶ **Traumatic experience on routine examination** – Physical stressors include child's pain and discomfort like injections and suctioning when necessitated. Sleep deprivation or disturbed sleep due to hospital routine like medication at night or vital data as well as child being fed via nasogastric tube or intubations (Board & Ryan-Wenger, 2003).

Methodology/Design

- ▶ Explorative, descriptive, qualitative design were used to describe the challenges as they were lived by mothers (Polit & Beck, 2008).

Population and sampling

- ▶ Population consisted of all mothers whose children were admitted for not less than 3 days in the Pediatric Medical Ward of one public hospital in Vhembe District, during October 2012 to December 2012.
- ▶ Non-probability sampling method was used to sample eleven mothers.
- ▶ The inclusion criteria were; mothers aged 21 to 35 years whose children were between 1 month and 2 years of age.
- ▶ Willing to participate, to share their knowledge and sign an informed consent form.

DATA COLLECTION

- ▶ In depth individual interviews were conducted
- ▶ Interviews were done in Tshivenda and translated into English
- ▶ Note-taking and voice recorder were used to capture all information from participants

DATA ANALYSIS

- ▶ The narrative data from interviews were analysed qualitatively using the open coding method as described by Cresswell (2009).
- ▶ Criteria to ensure trustworthiness were used (Lincoln & Guba, 1985)

Results

Theme: Dominant stories related to parental role during hospitalization of children.

Report giving versus lack of report giving – Mothers felt that information about the care of their children was not properly given to them.

“...aa, my child was taken to X-Ray department and came back. The results were not communicated to me. I am in darkness, I feel very helpless” (K)

Lack of execution of parental role during child’s admission – Mothers had a challenge of not displaying a parental role on basic care.

“...as a mother I see my child lying there and I need to do something like bathing a baby, then I feel happy that I am taking care of my baby but nurses refuses” (E)

RESULTS CONTINUES

- ▶ **Misconception versus understanding of hospital procedures rendered** – Mothers need to be informed about the hospital routine and procedures. This is also supported by Batho Pele Principles, 1997.

“I was so scared when my child was having wires on the chest with the machines. I did not know what they were for” (G)

- ▶ **Personal suffering versus satisfaction related to child’s disease prognosis** – Mothers revealed that they were not happy to be told that their children were going for admission.

“ I was very frightened , I thought my child will die” (D)

Recommendation

- ▶ Establish therapeutic relationship.
- ▶ Therapeutic environment.
- ▶ Proper communication.

Conclusions

- ▶ From the above discussion, it has been noted that there is a great need to involve mothers in the care of their children.
- ▶ Both mother and child benefited from responsiveness.
- ▶ Mothers gain confidence, competence and satisfaction in the maternal role as the infant grow and develop in response to her care.



THANK YOU

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