POWERLESS AND AFRAID: WHAT USING RESTRAINT MEANS TO YOUNG CHILDREN WITH CANCER DURING PAINFUL MEDICAL PROCEDURES

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Background
Children’s need for support is tied to their experiences of fear during times of trauma and uncertainty. The aim of this paper was to review the use of restraint with young children with cancer, from the child’s perspective, during painful medical procedures.

Method
In two separate Swedish doctoral theses, 20 children (3-7 years of age) with a variety of cancer diagnosis were interviewed about their experiences of everyday life with cancer and experiences of undergoing painful medical procedures. Parents and nurses views were welcomed as complimentary to child data. Interviews were analysed qualitatively by content analyses and phenomenological and life world hermeneutic approaches.

Results
Children and parents described trauma related to the suddenly changed caring role parents’ play: from caring parent to health care assistant. Parents helped restrain children and took part in painful and unpleasant procedures and treatments. Nurses described the use of restraint as sometimes necessary due to logistical constraints but also as supportive to the child. Lack of access to parents as protectors was experienced as traumatic by the child. The child felt ashamed, humiliated and powerless, having lost the right to control his/her own body.

Conclusion
From the young child’s perspective, restraint is never supportive. Children require a sense of security to overcome fear. When the child seeks security in an adult, the adult’s response becomes extremely important. Children need be guide and be guided by adults, until they think: “I can manage this”. Adequate support enables a caring situation characterised by mutual trust. Parents ought to be involved to help alleviate fear, but strategies for collaboration and role definition for parents and health care professionals need to be reassessed.

References

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