Child and Family-Centered Health Care Initiative in Serbia

Project: “Hospital – a friend to children and families”

The project “Hospital - friend to children and families” introduces "Child and family-centered care” to reduce trauma in children during their hospitalization. Methods of preparation, coping, pain relief, play, and involving families as partners in the care provided to the child are being introduced into the daily environment of the hospital.

Key Achievements:

- The concepts of child and family-centered care was for the first time introduced in Serbia in 2009 by the Suisse NGO Partnerships in Health and the Child Life Department of the Johns Hopkins Child Life Department together with the Serbian NGO Partnerstvo za zdravlje
- The Ministry of Health of Serbia reviewed and approved "A Child-Centered Health Care Trainer Manual“ (Schwethelm, Capello, Brylske, & Munn, 2010), the project and the approach
- A Baseline survey was completed with 22 Serbian hospitals
- A 5-day trainer course with 6 Serbian and 2 Macedonian hospital teams was conducted in May 2010
- Nursing staff of three hospitals have been trained

Implementation at the hospital level

The Child friendly hospital initiative trains doctors, nurses, psychologists and other supporting non-medical staff on the following subjects:
- The rights of children in hospital setting
- A developmental perspective of health, illness and hospitalization
- Preparation and coping with health care procedures
- Pain relief
- Play and learning in the hospital
- Providing child and family-centered care
- Sharing information

Contact: Partnerstvo za zdravlje, Email:contact@partnershipsinhealth.org.rs
Implementation results


**Nis Child Clinic**
- 17 trainings
- 72 nurses/teachers

**Child clinic Olga Dedijer, Belgrade**
- 7 trainings
- 11 nurses/teachers

**Pediatric ward, Subotica**
- 7 conducted trainings
- 17 nurses/teachers

Nurses’ reactions to the course

- Delighted with training methods (presentations, interactive group work, video clips, and intersession assignments)
- Methods shown were practical, are interesting for children, and are not time-consuming
- Information about child development helped them to reduce stress in children
- Intersession assignments seen as an opportunity to try out new techniques
- Nurses suggested that mothers could benefit from learning some of the suggested techniques

Trained nurses reported

- More attention is devoted to the preparation of children for procedures
- Different distraction and relaxing techniques (blowing bubbles, counting, singing, breathing...) are used during medical procedures to calm and distract children. Methods for calming crying babies are successfully applied
- The concept of informing children before any medical procedure, and explaining all the steps, was accepted and is applied
- Parents are more often informed, asked to participate, and prepared by the nurse what to do with the child before and during procedure.

Trainings pre and post test results:

**Nurses/teachers became aware of:**
The use of non-pharmacological methods to manage pain in children
The importance of allowing children to make choices about their treatment or procedures if choices do not affect outcomes negatively
The fact that preparation for hospitalization and medical procedures reduces stress and anxiety in children and their parents

**Nurses/teachers learned that:**
Information may need to be given multiple times since families/patients may not always be ready to hear or understand it
Regression to earlier stages of development is a common sign of stress in children across all ages
Expressive play provides children with opportunities that support coping