

A health website for children

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Knowledge about the special needs of children and adolescents in hospital has advanced in the past 40 years. There is now general acknowledgement that they should have services tailored to their emotional and developmental needs, and should be cared for by specially trained practitioners. However, admission to hospital is a stressful experience even for those going into the most child-friendly environments. Preparation can do much to relieve anxiety, and a new website has been set up to give children the information they need about their health and what to expect in hospital.

The emotional needs of children going into hospital have been recognised for over 40 years, since they were highlighted in The Platt Report (1959). This outlined recommendations on non-medical aspects of the care of children in hospital, and recognised the importance of parental involvement in preparing children for a time spent in hospital. It led to radical changes in access and provision for parents, the setting up of specialist children's services and improved training for professionals caring for children.

Prior to the report, parents were actively discouraged from staying with their children, as this was considered disruptive. Visiting times were severely restricted, while children's needs for education, play and child-friendly environments were largely ignored. There was little recognition of the distress and anxiety experienced by children when separated from their parents and put in a strange place at a time when parental support was most needed.

The impetus for change

The Platt Report led to the establishment of the National Association for the Welfare of Children in Hospital (NAWCH) in 1961. The organisation involved parents and health professionals, and successfully campaigned for child and family-centred care. Later it set standards for children's services. Its work centred on a number of core beliefs:

- Children should never feel isolated or threatened;
- Children and their parents should be involved in decisions about their treatment;
- Children should never be put on an adult wards in hospital, but should have their own child-friendly environment in which parents should be allowed to stay.

In 1991 NAWCH was renamed Action for Sick Children (ASC), in recognition of the trend towards shorter hospital stays and providing care in children's own homes where possible. The charity's early work led to child-friendly environments for children in hospital, where parents are encouraged to stay with their children and to be involved in care provision and decisions about treatment in

partnership with health professionals. ASC continues to campaign to improve children's services, and to provide information and support to parents.

There is now widespread acceptance that children in hospital should be treated in environments specifically designed for them, by practitioners trained to work with children (Audit Commission, 1993). There is also growing acceptance that adolescents' needs differ from both children's and adults and that they should be cared for in settings designed to meet these needs.

However, there is still room for improvement. The public inquiry into children's heart surgery at Bristol Royal Infirmary (Kennedy, 2001) found evidence that children were still being treated simply as 'mini-adults', whose special needs amounted to smaller beds and smaller portions of food. In many other hospitals some children are treated in adult settings (McAllister, 2001; Evans, 1999), while adolescents are not guaranteed dedicated facilities, even in children's hospitals (CHI, 2002). A lack of specialist facilities also means some children are treated in hospitals long distances from home.

Despite these shortcomings, the treatment of children in hospital is largely provided in appropriate environments by appropriately qualified practitioners. Variations in services should be reduced when the whole of the children's national service framework is published – its first module has set out the standards that hospitals are expected to achieve (Department of Health, 2003), while the remaining modules are due to be published in 2004.

Preparing children for hospital

While environment, professionals and parental involvement are important factors in helping children and young people to cope with admission to hospital, the experience is still stressful. Whatever the quality of service children receive in hospital, they still are taken away

BOX 1. CHILDREN'S ANXIETIES ABOUT HOSPITAL ADMISSION

- Physical harm – they may already have undergone painful procedures, or have heard about them from friends or the mass media.
- Separation – particularly for young children, the fear of separation from parents or guardians is strong.
- Fear of the unknown – the child is in an alien environment and, unless clear explanations are given, may imagine proposed treatment to be worse than it is.
- Loss of control – children may fear that decisions about many aspects of their life will be taken away from them.

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BOX 2. CONTENT ON 'CHILDREN FIRST'

- Health news
- Information on illnesses and treatments
- Information on hospitals
- Problem page
- Expert advice
- Games
- Downloads
- Celebrity gossip
- Dictionary
- Body tour
- International stories
- Message boards

feel ill and may be in pain, and may have to undergo unpleasant procedures. The prospect of being admitted to hospital therefore raises concerns in a number of areas for children (Visintainer and Wolfer, 1975; Box 1)

It has long been recognised that psychological preparation and support for children are also important in reducing the trauma associated with hospital admission (Higson, 2001; Visintainer and Wolfer, 1975). The amount and type of preparation children need depends on the individual child and his or her age. However, age-appropriate explanation and the opportunity to ask questions before admission to hospital can do much to allay children's fears (Visintainer and Wolfer, 1975).

A number of organisations have developed printed material for children who are to be inpatients, including ASC and individual hospitals, while some charities and self-help groups produce condition-specific information.

Many hospitals organise preadmission visits for children and their families, so they can see the ward and other relevant areas and items such as operating department or scanning equipment. These visits can be tailored to a child's situation and give an opportunity to ask questions and meet his or her future carers.

A children's website

Printed information and preadmission visits are undoubtedly helpful in informing children about what to expect in hospital, but are limited in scope. Printed information may not answer all the questions a child may have about a condition or hospital stay, while preadmission visits may not allow enough time for children to formulate questions.

Over 48 per cent of UK households are now connected to the internet (ONS, 2003) and web-based information has the potential to provide interactive, child-friendly information that is available whenever children want it.

Children First is an international health website specifically for children and young people aged three to 18

years. It was developed by Great Ormond Street Hospital for Sick Children in partnership with hospitals across the NHS, as well as a number of charities and hospitals across the world. The website has already won a number of awards, including ones from Cable & Wireless, and the *New Statesman*, and is endorsed by the prime minister and the cabinet office.

Children First is designed to enable children to learn about their health and what to expect in hospital, as well as to engage and entertain them. It aims to appeal to children across the world, and contains over 1,000 pages of useful information on health and what to expect in hospital, in 11 languages. Material is checked weekly to ensure it is accurate and up to date, and new material is added daily.

More than 1,500 children of all ages were involved in developing Children First, to ensure both design and content meets their needs. Children also contribute features and personal experiences, while health advice and information is written by health professionals.

The English-language section of Children First includes a range of features including an interactive body tour, information about illnesses and treatments, health news, celebrity gossip, interactive games and stories from children around the world. It is organised in four sections, three of which are age-specific, matching reading abilities and needs of different age groups:

- Health and life for teens and young adults;
- Hospital and health for children;
- Coming into hospital for young children (to be used with parental assistance);
- Information on children's health around the world.

Children's own experiences form an integral part of the website, offering a safe and supportive environment where they can share experiences through secure message boards. All postings are vetted by an experienced editor before being put on the site.

The website is built on the recognition that health is a universal issue for children around the world, even if their individual experiences are different. It aims to empower children and enable them to learn from their peers.

While health is its central focus, Children First also contains material on other issues of concern to children and adolescents, such as bullying and family relationships. It also has links to BBC's children's and news websites and a celebrity gossip magazine (Box 2).

A source of support

While children and adolescents going into hospital will always need support from those around them, they may have questions and anxieties they are unable to discuss. Children First gives them an opportunity to explore health issues and other concerns, and to make contact with others in their situation. Its child-led development has resulted in an entertaining and informative resource that will be of interest to children and young people whether or not they have specific health problems, while the involvement of health professionals ensures the quality of its material. ■

REFERENCES

- Audit Commission (1993) *Children First: A study of hospital services*. London: Audit Commission.
- Commission for Health Improvement (2002) *Clinical Governance Review: Royal Liverpool Children's Hospital NHS Trust – Alder Hey*. London: CHI.
- Department of Health (2003) *Getting the Right Start: National Service Framework for Children. Standard for Hospital Services*. London: DoH.
- Evans, K. (1999) Emergency services for children and young people. *Nursing Standard*; 13: 32, 38–41.
- Higson, J. (2001) Measuring quality in a paediatric day care unit. *Nursing Times*; 97: 10, 32–33.
- Kennedy, I. (2001) *Learning from Bristol: the report of the public inquiry into children's heart surgery at the Bristol Royal Infirmary 1984-1995*. London: The Stationery Office.
- McAllister, S. (2001) Paediatric risk assessment in an adult setting. *Nursing Times*; 97: 50, 41.
- Office for National Statistics (2003) Percentage of households with home access to the Internet: Household Internet Access. www.statistics.gov.uk/statbase/Product.asp?vlnk=10542&image.x=16&image.y=10
- Platt, H. (1959) *Report on the Welfare of Children in Hospital*. London: HMSO.
- Visintainer, M.A., Wolfer, J.A. (1975) Psychological preparation for surgery pediatric patients: the effects on children's and parents' stress responses and adjustment. *Pediatrics*; 56: 2, 187–202.
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