Instructions:

Discussions are an opportunity to discuss prompts provided throughout the semester that demonstrate you have consumed the readings and reflected on how they impact your vocational goals. You must post **one original post by Friday at midnight** and respond to a minimum of **2 of your peers by Sunday at midnight**. You should cite at least two required readings from the week in your discussion posts and engage reflexively in the content. However, the format for these discussions is flexible. You are welcome to post voice threads, videos, photo series, powerpoints, artwork, etc. As long as you integrate the readings in some way. If you choose a creative format, still cite the readings in APA format in the post where you upload your content. These posts make up your participation grade and are my opportunity to assess your progress with the course.

ACLP Competencies Demonstrated in this Assignment:

- This assignment aligns with Competency A of Domain I, Care of Infants, Children, Youth, and Families, in ACLP's Child Life Competencies: The ability to assess the developmental and psychosocial needs of infants, children, youth, and families.
- This assignment aligns with Competency D of Domain I, Care of Infants, Children, Youth, and Families, in ACLP's Child Life Competencies: The ability to provide a safe, therapeutic and healing environment for infants, children, youth, and families.

Course-Level Objectives Assessed in this Assignment:

- Demonstrate knowledge of current practices in the field of child life, and therapeutic techniques that enable children and their families to prepare for and cope with health care experiences.
- Plan and execute developmentally appropriate activities that are appropriate for a health care setting.

Module-Level Objectives Assessed in this Assignment:

- Construct theoretically informed therapeutic activities for pain

Prompt:

This discussion post considers the topics of both assessment and reactive interventions. Due to the nature of our work, we are often completing assessments at the same time we're providing interventions. In the two cases described below, you will consider how to both gather valuable information about the patient and family while also providing immediate support.

First, define assessment, citing your readings. Then, respond to one of the following cases. Choose a case based on the setting you hope to work in the future. For those of you hoping for a fast-paced setting, go with Julio's case. And for those of you hoping for something slower, where you have more time for assessments, go with Flora.

Flora

Flora is a 13 y/o white female living in Dallas with her mother, step-father, and step-brother, 2 y/o Max. Flora is presenting to your inpatient unit after a successful urgent surgery to save her leg following a traumatic car accident that occurred last night. Flora's family was in the car together during the accident. Her mother and father are both being treated at a nearby adult hospital. Flora's brother was unharmed and is being cared for by the family's neighbor until the parents are released.

As the inpatient child life specialist arriving to work at 8:30am, you do not yet know the severity of Flora's injuries or her prognosis. As you wait for updates from the medical team, you hear that Flora has woken and is in severe pain. You plan to enter her room to help her cope with the pain and begin your assessment process. As you prepare, you think through your developmental theories to anticipate what Flora might need as a 13 y/o in pain and isolated from her family following an acute trauma. Integrate at least two child life theories into your discussion of her anticipated needs.

Julio

Julio is a 4 y/o Latino male who is arriving at your outpatient primary care clinic for a follow-up after blood work collected last week came out abnormal. Last week, Julio exhibited significant fear and anxiety regarding the blood draw and had to be restrained by nurses (you were not called despite being available). This week, you plan to be by his side during the procedure. You have five minutes with the family before the blood draw and will be in the room for the fifteen minute procedure. He is accompanied by his mother. How do you plan to gather the information you need quickly to support Julio? What questions would you ask in those five minutes before the procedure? What intervention would you provide? Integrate at least two child life theories into your response.

from **Discussion 3**
Oct 2, 2024 8:06AM
Caroline Mayo

Assessments are tools used to measure a child’s anticipatory fear in order to see what interventions will be needed before, during, and after a medical procedure or treatment. Additionally, they can also be used to measure a caregiver's anxiety. In Dahlquist’s

(2002) study, caregivers were asked to rate how they felt during the procedure, because a parent's stress can have a direct impact on how well a child handles a procedure.

When learning Julio's age, I would think about where he lines up in Erik Erikson's stages of psychosocial development. At four years old, he is preschool age which places him at the initiative vs. guilt stage, meaning he wants his independence but still needs to be taken care of and comforted (Erikson, 1963; Cantrell, 2024). Additionally, I would take into account Piaget's cognitive development theory. Julio would be considered to be in the preoperational stage which means he engages in magical thinking. It is important to make note of this, because if he is not given the right education about what is going to happen to him he might think he has done something bad to deserve the pain he is about to experience (Cantrell, 2024).

Furthermore, When meeting with Julio's family before the blood draw, I would find a way to make him and his parents feel in control. I would suggest a comfort hold with one parent holding him and the other providing a diversion such as blowing bubbles, playing on an iPad, or watching his favorite TV show. I then would assign Julio a job by asking him questions like what he would like to use as a diversion, what color bandage and tourniquet he wants, and if he would like to help the nurse by blowing on his skin after sterilizing it.

References

Cantrell, K. (2024). *Child Life Theory* [Lecture on child life theories]. Canvas. https://twu.instructure.com/courses/2959049/pages/week-5-learning-materials?module_item_id=57861701

Dahlquist, L. M., Busby, S. M., Slifer, K. J., Tucker, C. L., Eischen, S., Hilley, L., & Sulc, W. (2002). Distraction For Children Of Different Ages Who Undergo Repeated Needle Sticks. *Journal of Pediatric Oncology Nursing*, *19*(1), 22-34. Association of Pediatric Oncology Nurses. 10.1053/jpon.2002.30009