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# Parents-Nurse Communication Challenges in Pediatric Nursing

A Descriptive Literature Review

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<p>The objective of this bachelor's thesis was to describe communication challenges between nurses and parents of pediatric patients. This bachelor's thesis aimed to generate understanding and knowledge on communication challenges between nurses and parents of pediatric patients, so that nurses may apply their knowledge and help parents of pediatric patients overcome communication challenges.</p> <p>A descriptive literature review was the method used for the execution of this bachelor's thesis. The articles were obtained from reliable scientific databases such as Medline, and CINAHL. A total of 10 articles (n=10) were included in this bachelor's thesis. The material used was published between the years 2017–2022. Inductive content analysis was applied. The results showed that communication challenges between nurses and parents of pediatric patients occurred because of language barriers, cultural backgrounds, organizational factors, parent health education, and staff factors. The results lead to the conclusion that communication challenges between nurses and parents of pediatric patients do still exist. Communication strategies, communication aids, and methods could help overcome the challenges in communication. Further studies should be done to improve communication between nurses and parents of pediatric patients.</p>	
Key Words	pediatric nursing, communication challenges, parents, nurse-parent communication.

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Otsikko	Vanhempien-hoitajien väliset viestintähaasteet lasten hoitotyössä
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<p>Tämän opinnäytetyön tarkoituksena oli kuvata kommunikaatiohaasteita sairaanhoitajien ja lapsipotilaiden vanhempien välillä. Opinnäytetyön tavoitteena oli luoda ymmärrystä ja tietoa kommunikaatiohaasteista sairaanhoitajien ja lapsipotilaiden vanhempien välillä, jotta sairaanhoitajat voivat soveltaa osaamistaan ja auttaa lapsipotilaiden vanhempia voittamaan viestintähaasteita.</p> <p>Opinnäytetyön suorittamisessa käytettiin kuvaavaa kirjallisuuskatsausta. Artikkelit on saatu luotettavista tieteellisistä tietokannoista, kuten Medline ja CINAHL. Tässä kandidaatin-työssä oli yhteensä 10 artikkelia (n=10). Käytetty materiaali on julkaistu vuosina 2017–2022. Käytettiin induktiivista sisältöanalyysiä. Tulokset osoittivat, että kommunikaatiohaasteita sairaanhoitajien ja lapsipotilaiden vanhempien välillä johtuivat kielimuurit, kulttuuritausta, organisatoriset tekijät, vanhempien terveyskasvatus ja henkilöstötekijät. Tulokset johtavat siihen johtopäätökseen, että kommunikaatiohaasteita sairaanhoitajien ja lapsipotilaiden vanhempien välillä on edelleen. Viestintästrategiat, viestintävälineet ja -menetelmät voivat auttaa voittamaan viestinnän haasteet. Lisätutkimuksia tulisi tehdä sairaanhoitajien ja lapsipotilaiden vanhempien välisen viestinnän parantamiseksi.</p>	
Avainsanat	Lasten hoitotyö, viestintähaasteita, vanhemmat, hoitaja ja vanhemman kommunikaatio

## Contents

1	Introduction	4
2	Background and key terms	5
2.1	Communication	5
2.2	Communication in healthcare	6
2.3	Communication between nurse-parent	7
2.4	Parent-nurse pain management communication	7
2.5	Communication with migrant families	8
3	Purpose, aim, and study questions	9
4	Methodology and methods	9
4.1	Data collection search and selection	11
4.2	Data analysis method	14
5	Results	17
5.1	Factors influencing communication challenges in pediatrics	18
5.1.1	Language barriers	18
5.1.2	Cultural factors	18
5.1.3	Organizational factors	18
5.1.4	Staff factors	19
5.1.5	Parents health education	19
5.2	Communication promoters for parental guidance	19
5.2.1	Nurse- parent communication	20
5.2.2	Communication strategy and methods	20
6	Discussion	21
6.1	Ethical reliability and validity	21

6.2	Recommendations and usability of the results	22
7	Conclusions	22

References

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Appendices

Appendix 1. Table 5. Summary of selected articles.

## 1 Introduction

According to the World Health Organization (WHO), communication is at the heart of who we are as humankind. Communication is a crucial part of patient-centered care. For nurses, good communication skills are important to enhance the quality of medical care. In the field of pediatrics, nursing communication is a crucial feature, as nurses have to create a significant connection with the child and their family. Nurses play an important role in lowering the stress of both parent and child by creating a close and professional connection with the parent of the hospitalized child. Hence, training and educating pediatric nurses is one of the primary manners to enhance the quality of care. Lack of proper communication is among the major problems that endanger humans in today's society. (Azodi et al. 2022:32.)

In recent years Japan, for example, concerns about fundamental nursing education have been the execution of education that promotes communication skills in nursing students. A study conducted in 2007 by Jones, Woodhouse, and Rome reviewed family member's perspectives of effectual and ineffectual communication with nurses and established that effectual communication (e.g., nurses supporting parents and reassuring them to ask a question) was indulgent, while ineffectual communication (e.g., nurses failing to review parents' awareness or enable question became intolerant. (Hashimoto. 2017: 173.)

Communication method between nurses and parents is crucial for the child's hospitalization period. It is essential for parents to comprehend their child's procedure, ask questions or explanations and obtain advice on how to take care of their child at home. Beneficial communication is also a primary element of family-centered care. Parent-nurse communication done adequately can minimize anxiety for families, prepare them for the curing process and enhance agreement to discharge guidelines. Similarly, deficient communication skills can build arguments and place children in danger of hostile consequences following discharge. (Wu et al. 2022: 87–92.)

The aim of this bachelor's Thesis was to increase the knowledge of communication challenges nurses face while encountering parents of pediatric patients. The purpose of this bachelor's Thesis was to describe communication challenges between nurses and parents of pediatric patients.

## 2 Background and key terms

Key terms were essential in providing good search results. The key terms of this thesis were pediatric nursing, communication challenges, parents, and nurse-parent communication.

### 2.1 Communication

According to Nursing times (2017:18), Communication is detailed as disclosing or replacing knowledge, opinions, or innovation using speech, writing, or another medium for instance gestures or action. Communication is defined as the act of sharing and receiving information via media or in person. It can be done in a group of people or one-to-one person. Effective communication is vital in the community because it helps to prevent wars, and misunderstandings, helps to meet individual needs, forms rules and laws, gives information and guidance as well as passes down cultural traditions, norms, and values. (Evans, 2021.)

The English dictionary of Cambridge describes effective as effectual or obtaining the wanted results that you want. The Oxford English Dictionary also explains communication is conveying or swapping knowledge by dialogue, writing, or using some other medium. The Health and Social Care department characterizes communication as an important trade of details, needs, thoughts, frame of mind, and other information amongst people. Appealingly, Hazzard stated communication as a main state of human consciousness. (Afriyie, 2020: 25.)

When talking about communication, people mostly think only about verbal communication. But there are more communication ways besides speaking, sympathy, listening, written communication, and visual communication, and only four of them are mostly used on daily basis. According to Vein (2021), Some research has shown that 55 % of the used communication ways are non-verbal such as gestures, tone of voice, and facial expressions. During verbal communication, words are used. People speak and communicate via devices or face-to-face. Non-verbal ways of communication are facial expressions, eye contact hand movements, touch, and body language. Non-verbal communication is combined with verbal communication, but it can also be used on its own when someone uses sign language. Written communication can be a note, an e-mail, a report, or a chat message on a social platform. Written and visual communication can be combined. Examples of visual communication are charts, drawings, pictures, etc. Visual

communication methods are easier and can be more effective than verbal and nonverbal communication methods. (Vein, 2021.)

Communication challenges has been recognized being a major source of medical errors and adverse events. Multiple factors promote ineffective or failed communication such as timing, representatives, information expressed and awaited outcomes. These elements are boosted in the already complicated care of children. Until now, communication challenges literature has concentrated on adult population. Despite findings on communication in pediatric care, there remains a lack of research exploring communication challenge faced by all care givers. (Adams et al. 2021:21.)

The World Health Organization (WHO) (2009) has specified that communication breakdowns are the main source of unintentional patient harm. Good communication is required and crucial for good and secure patient care. Poor communication is a worldwide problem, failures in communication are the foremost of patient disputes. Nurse, doctors, and patients would be calm and not under stress if the environment were free of disturbances and pauses. Good information develops when proper and exact information is shared amongst the right people, at the right time and place. Additionally, that the received information is understood by everyone (Tingle, 2018, 1204–1205.)

## 2.2 Communication in healthcare

Communication is a key factor in constructing trust and ease in nursing. It is the foundation of the patient-nurse relationship. Communication is a complicated occurrence in nursing, persuaded by numerous elements such as relationship, attitude, moment, space, culture, features, gestures, individual awareness, and perception. Advanced attribute of care, patient satisfaction and compliance to care leads to assured health outcomes with efficient communication and is a crucial part of nursing practice, connected with health promotion and prevention, health development, remedy, and treatment in addition to rehabilitation. (Afriyie, 2020: 25.)

Care, compassion, and understanding are essential components regarding quality of health care and are crucial nursing basics that every nurse must have. Communication is not just handing over details among the patient and nurse. It covers ethical principles, individual and professional values, compassion skills, religious/spiritual capacity, and a level of awareness. Compassion and understanding are crucial for nurses for their professional success and in the success of their nursing profession. (Ozturk & Kacan, 2021.)



### 2.3 Communication between nurse-parent

Numerous pediatric nurse's insight challenges in communicating with children's family member's. Regardless of this, useful means of granting communication base for pediatric nurses has not been analyzed enough. Hospitalization of a child has a deep effect on the family. They feel worried about the child's state and diagnosis. Hence, communication amongst nurses and the parents of the child is crucial. In training new and old pediatric nurses revealed challenges in communicating with the family. Amongst the problems faced by nurses and children's parents were a lack of understanding the parent's anxiety and issues. Hence, upgrading nurses' awareness of families of hospitalized children is essential for developing their association with the families. (Hashimoto, 2017: 174.)

Effective communication plays a vital role in promoting patient safety in the healthcare environment. In pediatric nursing, this process can be hindered by special features, such as the child's ability to understand, the parent's willingness to participate, and the diversity of the healthcare process. There are many factors involved in patient communication, which can lead to failure in healthcare. Primarily in pediatric nursing, ineffective communication between parents and healthcare professionals can lead to several mistakes such as interruption of surgeries, tests, or procedures, errors in medication administration, and dietary therapy. (Biasibethi, 2019: 2.)

A shared association between nurses and parents of pediatrics, which improves through organized and usual communications, enables them to support and care for children. A successful association amongst pediatric nurses and parents can be built by sharing skills, knowledge, and resources, as a result developing the quality of care of hospitalized pediatrics. Pediatric nurses have to acknowledge the needs of hospitalized children and their families and support adequate reasons to assure their participation in nursing care. Pediatric nurses need to achieve their tasks and engage in combined decision-making while delivering nursing care that displays respect for children and their families. A warm and kind approach and a professional performance of nursing duty are crucial for quality care. (Yoo et al. 2020: 65.)

### 2.4 Parent-nurse pain management communication

Information about pain management is the foundation of postsurgical communication. At home, parents are required to be capable of correctly assessing their child with effective

pain relief e.g., supporting good pain relief dosing and motivating in drug-free approaches for controlling pain such as distraction and relaxation. The understanding and communicating of this information by parents altogether affect managing pain at home. Parents face several challenges while receiving and following pain management instructions. Fluctuating information and guidance received from different healthcare providers, poor timing and barriers in communication have been pointed out by parents as a source of not understanding pain management correctly. Furthermore, during and after the surgery they may also experience anxiety and high levels of stress which can prevent them from understanding the guidelines and facts about pain management. That is why it is important that communication in pain relief is understandable and instructive for parents to successfully handle their child's pain postoperatively. (Wu et al. 2022: 87-88.)

## 2.5 Communication with migrant families

As claimed by the UNHCR (United Nations High Commissioner for Refugees), the phrase refugee refers to any individual "... due to a valid fright of being accused of the reason being ethnicity, spirituality, nationality, representative of a specific caste or constitutional belief" crossing an international border to find safety. A cultivated level of cultural sensitivity and policy awareness is required from nurses caring for refugee children. As nurses are well-positioned and make up the largest healthcare professions, they can inclusively advocate for inclusive legislation that assists fair access to services for refugees. At some point in their careers, nurses are most likely to meet refugee patients. Understanding, education, and resources necessary to support and advocate for culturally appropriate care are needed from them. (Hehman, 2022: 215-216.)

In most European countries, the number of patients from different cultures and languages is increasing with the increase in the number of immigrants. The number of parents of pediatric patients who do not have a common language with healthcare workers is also increasing. When parents of pediatric patients and healthcare workers do not have a common language, which makes it difficult to assess the parent's understanding (Fugelseth, 2020: 2221-2222.)

Language barriers hold a major negative effect on the nature of treatment and for nurses particularly migrant patients are a challenge. As shown in previous studies, interpreters are the most effectual way in overbearing these challenges. However, due to shortage time or their expense, they are not always available. It is essential to attain the goal of

achieving good quality of treatment, despite challenges in communication. Additional factors such as cultural background also affect communication with migrant pediatric parents. Coming to a different country they bring along not only their native language but also their habits, religious beliefs, values, and traditional role models. And cultural dissimilarities can occasionally happen during the course of hospitalization making communication more difficult. (Colvin et al. 2020: 25.)

Evidence has shown that efficient communication both before and post-treatment has a vital role in decreasing worries and anxieties among parents of pediatric patients. Moreover, confidence in parents of pediatric patients can be boosted by empathetic communication, sensitivity, and engagement. (Eli, Nordin & Neovius 2022: 10.) A study carried out by Sinclair (2020: 59), found that inclusiveness, comprehension, compassion, and coordination in communication are crucial in building trust between healthcare professionals and parents of pediatric patients.

### **3 Purpose, aim, and study questions**

The objective of this bachelor's Thesis was to describe communication challenges between nurses and parents of pediatric patients. The aim of this bachelor's Thesis was to generate understanding and knowledge on this topic, so nurses may apply their knowledge and help parents of pediatric patients overcome communication challenges. This would benefit not only patients and their families but also nurses.

This bachelor's Thesis aimed to answer the following questions:

1. What kind of communication challenges do nurses face when encountering parents of pediatric patients?
2. How could nurses overcome those challenges in communication with parents of pediatric patients?

### **4 Methodology and methods**

The methodology strategies are generally separated into three strategies: qualitative, quantitative, and mixed methodology (Synder, H, 2019: 336–337). Qualitative study is informative and assets words and language in circumstances for instance conservation

groups and discussions to analyze contributors' opinions. This kind of study gives a deep awareness of people's experiences and ideologies about their state or healthcare. The aim of qualitative study is to provide a comprehensive understanding of real-world concerns. The difference between qualitative and quantitative study is that the quantitative method supports the "what" and statistical research like medical trials, while the qualitative method provides an understanding of "how" and "why" and involves approaches such as discussions and focus groups. (Chalmers & Cowdell, 2021: 45–48.)

Applicable literature is important for education and all research projects. One can find a quantity of available instruction for literature reviews, based on the technique required to obtain the aim of the review. The study question and certain objective of the analysis always influence the right approach to use. (Synder, 2019: 334.)

A literature review is a summary of the attainable study for a certain scientific topic. It describes available study to explain a review question, support the background for new study and describes essential slots in the available form of literature. The initiative in conducting a literature review is to develop a study topic. The topic should be based on accessible information and interest of the authors. Following the selection of the topic, accessing of literature begins. Applicable databases are selected and keywords for the article search are established to search for accessible information to the topic of study questions. Summarizing and analyzing of the articles begins once the suitable data is collected. Based on the outcome, the final results are written. There are different types and forms of literature review. All are dependent works because they outline available research validation, meaning main research. Yet, they can provide particular tasks and use literature in another way. Traditional literature or narrative reviews, often targets to give one of the two, an overview or an introduction to a study field. An expert review depends densely on the knowledge of the author. Systemic reviews pursue a consistent study methodology that completely gathers and combines available data and aims to answer a study or strategy question with available study, utilizing accurate reporting and using many steps to lower evaluator's mistakes and inequality. (Hempel 2020: 3–4.)

A narrative review is also known as a traditional or non-systematic review and systematic reviews, which can or cannot be developed by a meta-analysis. A narrative review is an earlier version of the two introducing a non-systematic quantity and interpretation of available literature on a certain topic of interest. The intention is to support a wide surrounding for knowing present day knowledge and highlighting the significance of new study. (Gregory & Denniss 2018: 893–898.)

#### 4.1 Data collection search and selection

In the process of data selection, the correct type of data, source and appropriate collection tool is used. The aim is to find appropriate data to help find answers to the study questions. Data collected for this descriptive literature review was searched from the electronic databases of CINAHL and MEDLINE. These databases were used because they issue articles in the fields of medical science. The search terms used during data collection were Communication AND barriers OR Obstacles OR Challenges OR Difficulties OR Issues OR Problems AND Parents AND Pediatrics AND Nurse, Communication Challenges AND Pediatrics AND Parents. These databases were used because they consist of dependable articles accomplished in health care practice and are approved databases.

While collecting data, the PICO (Table 1) below was used to streamline and produce the convenient documentation backing clinical decisions and analyze replacements for treatments and procedures (Jensen, 2018). This supported in determining applicable articles in carrying out the review. Search was limited to English articles, with a 5 years' time limitation as shown in ([Appendix 1](#)).

PICO was used in this Thesis as a tool to help find applicable articles to describe the study questions. The Authors considered the criteria which would be appropriate for this evaluation. The question needed to identify the (P) population intended to this bachelor's thesis, the (I) intervention planned to use, the (C) content, and the (O) outcome.

Table 1. PICO framework.

<b>Population (P)</b>	Parents, nurses
<b>Intervention(I)</b>	Communication
<b>Context (Co)</b>	Pediatric nursing
<b>Outcome</b>	Improved communication between nurses and parents of pediatric patients

The data Boolean connectors "OR" and "AND" were used together with the sentences and search terms. The sentences and search terms contained key terms

that were pediatrics, parents, communication challenges, communication barriers, difficulties, issues, problems, and nurse. The search established in the databases produced 723 articles. 40 research articles were selected based on their title. 26 research articles were selected for this Thesis based on their abstracts. Following scanning left the authors with 10 full text articles. The outcome of the database searches is displayed in the table below (Table 2).

Table 2. Database search.

<b>Database</b>	<b>Search Terms</b>	<b>Limiters</b>	<b>Number Of Hits</b>	<b>Selected Based on Title</b>	<b>Selected Based on Abstract</b>	<b>Selected Based on Whole Text</b>
MEDLINE	Communication challenges AND Pediatrics AND Parents	Peer-reviewed, English language. Abstract available. Published date 2017-2022.	77	10	5	3
CINHAL	Communication AND barriers OR Obstacles OR Challenges OR Difficulties OR Issues OR Problems AND Parents AND Nurse	Peer-reviewed, English language. Abstract available. Published date 2017-2022.	189	19	12	7

The following inclusion and exclusion criteria were established for collecting a detailed study. These criteria assisted in narrowing down the particular selected studies to the applicable ones concerning the study. Peer-reviewed articles published in the last 5 years were one of the inclusion criteria. Articles written in the English language were included to collect data. It was essential that the articles relevant to pediatric nursing were gathered. The limiters used during the research

were carefully chosen based on the inclusion and exclusion principles. The table below (Table 3) shows the more precise inclusion and exclusion criteria.

Table 3. Inclusion and exclusion criteria.

<b>Inclusion</b>	<b>Exclusion</b>
Studies that focus on pediatric nursing in the hospital setting	Studies that focus on adult nursing
Studies published in the English language	Studies published in another language than English language
Peer-reviewed articles	Not peer-reviewed articles
Abstract available	Abstract not available
5-year limitation on articles from 2017–2022	Not more than 5 years old articles

The PRISMA flow chat method below (Figure 1) was used to show the database's search approach. The articles were selected based on the key words. The first search provided 670 results, after going through the articles and using inclusions and exclusion criteria 10 articles were used to answer the study questions. Some articles were not included based on their abstract, as they were not according to the criteria. Full abstract articles were essential to get answers to the study questions and sustain support understanding the conception of the study. English language articles were selected. Peer-reviewed to analyze the validity and quality of articles. The articles had to be 5 years old.

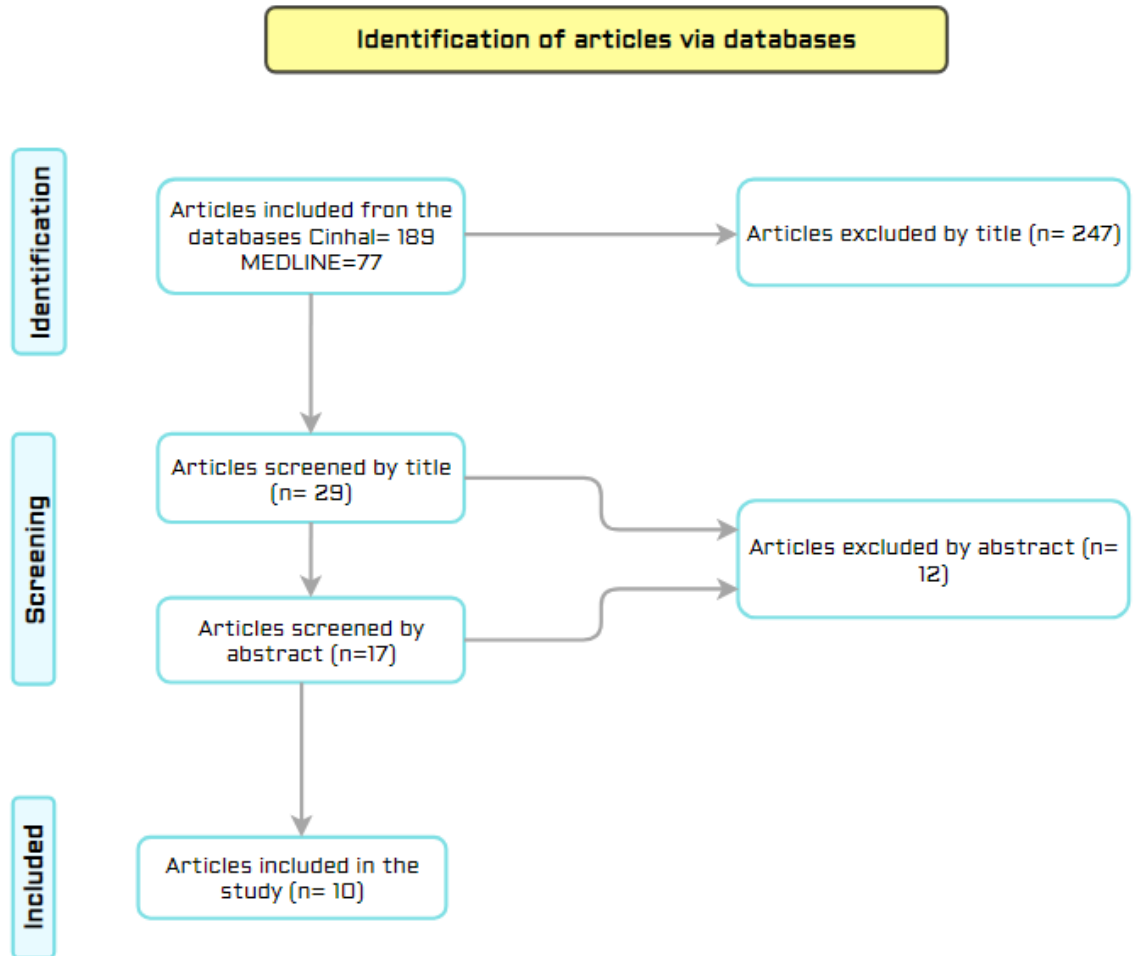


Figure 1. PRISMA flow chart.

## 4.2 Data analysis method

Inductive content analysis was adapted while doing this descriptive literature review. Inductive content analysis is a method often used in qualitative studies to Analyze data. It can be used in both open and half-structured data. (Kyngäs, 2019.) The inductive content analysis method allows researchers to advance theory and recognize themes by examining documentation, registration, and other published and expressed material. Inductive content analysis is based on inductive thinking, where subject arise from the raw data through constant inspection and comparison. (Chron, 2021.)

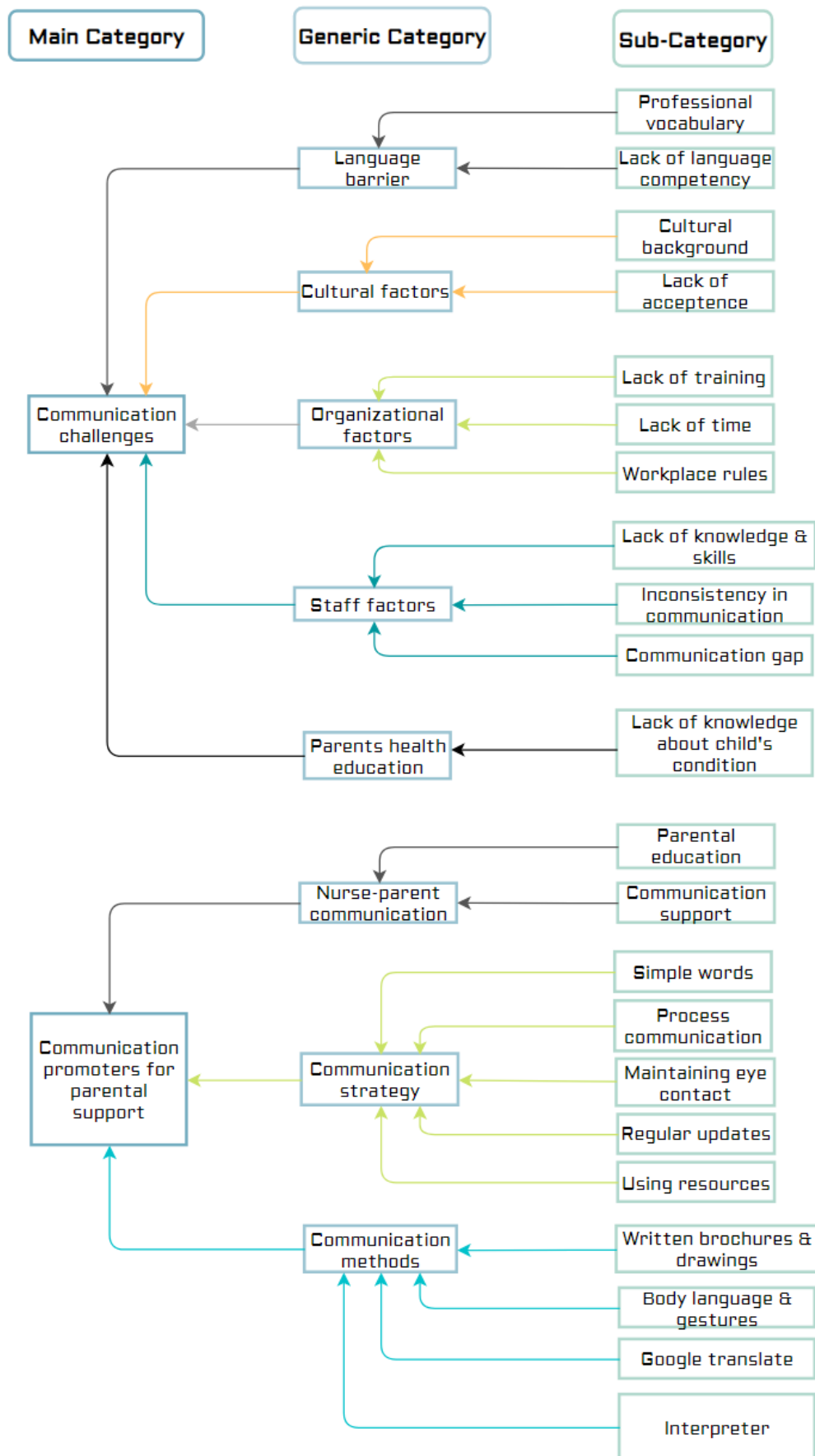


Inductive data analysis proceeds with organizing the primary data such as articles or other material, through a process known as open coding. In another stage which is known as the "Read and reflect" stage, analyzers analyze the material and create notes and headings in the text through inductive coding. The next stage leads to grouping the data and decreasing the number of categories by merging identical headings into wider categories. Through this method, researchers produce knowledge and increase their understanding of the data. (Chron, 2021.) According to Kyngäs (2019), Inductive content analysis is data sensitive. Therefore, the researcher must go back to the original data several times during the analysis to make sure that the results show a strong connection to the analyzed data.

When doing a literature review, the data analysis process begins with reading and familiarizing the data. After this first round coding will be done by organizing data in the big picture. The big picture means reading the text or transcription carefully. While doing this, it is important to keep in mind that the aim of the analysis is to answer research questions. The third step is second-round coding, which is also known as developing subcategories and fine-grained codes. The fourth step is refining the fine-grained subcategories, in which all coded data will be compared and refined all of these fine-grained subcategories. And the final step in the analysis is synthesis and interpretation. Data interpretation is the critical step in the data analysis process. To make sure data is analyzed correctly, it is important to read all the steps of inductive content analysis beforehand and understand it well. (Vears & Gillam 2022.) While doing this literature review all the steps were followed according to the instructions.

By reading the data found in the scientific databases of CINAHL, and MEDLINE, decision was made on utilizing, inspecting, and analyzing the data previously found to establish that the data is adaptable and trustworthy. To gain more understanding about the articles while doing the inductive content analysis, the authors separated the categories into separate sub-headings. Therefore, the authors were capable of getting comprehensive content of the articles that they had selected. Then, as illustrated in Figure 2, the sub-headings were divided into meaning units, codes, sub-category, generic category, and main category.

Figure 2. Data analysis.



Based on the two selected study questions: “What kind of communication challenges do nurses face when encountering parents of pediatric patients?” and “How could nurses overcome those challenges in communication with parents of pediatric patients?” Two important categories were produced. They were then coded and segmented into sub-, generic, and main categories. The chosen articles were then summarized into a table to emphasize the key points of each article and dictate the applicability of analysis concerning the thesis. Summary of selected articles can be seen in (Table 5) Appendix 1. Summary of selected articles.

## 5 Results

Ten articles were included in this descriptive literature review (Appendix 2). The studies were diverse and spread over different countries. One study was conducted in the USA (Bainter et al. 2018), One study was conducted in Sweden (Berg, Nilsson, Patriksson & Wigert, 2017), Two in the UK (Birtwistle et al. 2018; Dorothy, 2020), one in Switzerland (Colvin Helfer, Kaufmann, Pedemonte & Simon, 2020), one in Japan (Hashimoto, 2017), one in Norway (Fugelseth, Hanssen & Kynow, 2020), one in Turkey (Öztürk & Kacan, 2021) and two in Canada (Adams et al. 2021; Chambers et al. 2022) between 2017 and 2022. The data collection method used in these studies were semi-structured interviews, open-ended interviews, open-ended questionnaires, group interviews, short interviews, observations, audio records, communication scale (CCS), and empathic skill scale (ESS). Sample sizes were different in each study and participants were mothers, fathers, nurses, patients, nursing students, grandfathers, and grandmothers. All the studies included in this descriptive review were qualitative and quantitative studies. All studies were derived from electrical database searches CINAHL n= (7) and MEDLINE n= (3). The information from the articles were formulated into a main category, substituting for basis of the literature review. The generic category identifies the population of healthcare workers and parents, and later sub-categories were formed from codes collected from the chosen articles. The data analysis process formed n=22 sub-categories, n=8 generic categories, and n=2 main categories to answer two study questions. Categories can be seen in data analysis (figure 2). The results of the studies have only been examined from the results section of the studies, so that the conclusions made by previous researchers would not affect the work or distort the results.

## 5.1 Factors influencing communication challenges in pediatrics

The analyzed information supported that language barriers, parent's health education, cultural, organizational and staff factors are all contributing factors influencing communication challenges in pediatrics nursing (Study question 1).

### 5.1.1 Language barriers

Apparently, language barriers are amongst the biggest threats, and they impact countless elements. Lack of language competency mainly caused communication problems and had an upfront effect on the regular tasks of the nurses, which left them feeling frustrated and helpless. Inaccurate or limited use of communication strategies or aids were also reported as a language barrier. (Colvin et al. 2020: 264.) Due to the lack of language competency, parents had less opportunity to involve in the child's treatment and influence the child's care. The nurses were unable to speak with parents and perform their tasks according to the laws and regulations and parents of pediatric patients were unable to ask questions and express their feelings about their child's situation. This caused frustration for both nurses and parents of pediatric patients. (Berg et al. 2017: 250.) Regarding medical care, daily care, pain management, care plan and discharge frequent issues and difficulties occurred. Explaining interventions such as blood collection or giving instructions about diabetes, administration of medication or injections were difficult to explain due to language barriers. (Colvin et al. 2020: 265.)

### 5.1.2 Cultural factors

The different cultural background has been seen as a challenge in communication between (MPPS parents) Migrant pediatric parents and nurses. Parents from different cultural backgrounds have different beliefs, principles, contrasting examples, or different understandings of diseases which also hinder communication. For example, MPPS parents at times considered the child's condition as witchery or a test of God. And for fathers, it was difficult to accept the female nurse's competence. (Colvin et al. 2020: 264.)

### 5.1.3 Organizational factors

Lack of time, limited resources, few contact opportunities, and lack of referral protocols were organizational factors contributing to communication barriers (Birtwistle et al. 2018:

714). Especially taking care of migrant pediatric patients was time-consuming. Nurses needed adequate time to deal with the parents of migrant pediatric patients (MPPS) and to achieve success in caring for migrant pediatric patients. Complex medical diagnosis and therapy were also time-consuming, and instructions had to be explained multiple times in order to make them understandable. (Colvin et al. 2020: 265–266.)

#### 5.1.4 Staff factors

It was recognized that miscommunication and communication breakdown between health care workers could lead to errors and patient harm. Children were more hazardous to safety issues and supervision gaps because of their medical needs. A likelihood of adverse effects increases in children's care due to communication challenges involving many care providers. Therefore, it is crucial that teamwork and communication is done efficiently to deliver safe patient care (Adams et al. 2021:21,300, 11). The lack of education and recognized skill in nurses was also seen being a barrier to expressing the child's health conditions (Birtwistle et al. 2018: 710). In addition, evidence shows that insufficient communication between nurses results in inconsistency in communication. Similarly, when communicating with the parent's nurses avoiding eye contact and using professional vocabulary made it difficult to understand the given information. (Bainter et al. 2018: 6).

#### 5.1.5 Parents health education

The parent's lack of understanding of the child's medical condition, poor treatment compliance, and insufficient disease management led to difficulties. Sometimes it was difficult to give instructions to the parents about medication, for example why medication is given? When and how much should be given? (Colvin et al. 2020: 264.) In addition to that, when nurses raised a child's weight issue, the parents were frequently unaware of, or not capable of recognizing the problem. The lack of parental acceptance prevented other attempts to discuss the child's weight issue. (Birtwistle et al. 2018: 710.)

### 5.2 Communication promoters for parental guidance

In this descriptive literature review studies showed communication promoters for parental guidance. These factors include communication strategy, methods, and nurse-patient communication.

### 5.2.1 Nurse- parent communication

The most common issues in communication amongst children's parents and nurses is limited awareness of parents' anxiety and worries. Thus, upgrading nurses' awareness of families of hospitalized children is crucial for developing their communication with the families. (Hashimoto,2017: 183.) Nurses and children's families work together as cohabitants to support hospitalized children. Thus, combined parent-nurse communication is crucial (Hashimoto,2017: 183-184). Despite the lack of common language between nurses and mothers, mothers had positive experiences with the nurse's communication style, mothers reported that nurses communicated well, and they were kind and friendly. Nurses provided a safe environment during procedures. Nurses offered guidance to the mothers by showing or doing, for example, putting the baby to bed, and helping the baby burp, as well as nurses spending time and energy advising mothers about fluid balance, energy consumption, and feeding procedures. (Fugelseth et al. 2020: 2225.)

### 5.2.2 Communication strategy and methods

To overcome demanding communication challenges multiple strategies are used such as simple use of language, sketches, and notes. Despite these, in complicated and crucial issues professional interpreters are vital. Healthcare professionals and family members are also elaborating in translations. The handover materials is also translated into native language of patients to make it easier for them to understand. (Colvin et al. 2020: 269.)

Communication support programs not only increase skills and knowledge regarding communication but also upgrade nurses in understanding the feeling and needs of families and also advance awareness and explanation of family's reactions with the aim of appointing nurses to communicate more successfully and improve additional and certain perspectives about communication with parents of pediatrics. (Hashimoto,2017: 176.)

When nurses and parents didn't have a common language, the nurses impulsively used different equipment's and methods to communicate with the parents such as the nurse's used gestures, whispered, spoke clearly and slowly, used basic words, and repeated the same message multiples times (Fugelseth et al. 2019: 2225). As well as they used paper and pencil, drawing pictures to clarify their explanation. Nurses also had positive experiences with using technical aids (e.g., Google translate) to support communication. Com-

munication aid couldn't replace the interpreter, but it was helpful when needed to understand the parents or make them understandable to the parents immediately if necessary. (Berg et al. 2017: 250.)

## 6 Discussion

The objective of this bachelor's thesis was to explain why communication challenges happen between nurses and parents of pediatrics and how can it be subdued. The results of this bachelor's thesis shows that, until now the research on communication challenges concentrated on adult population. There is still a lack of research done about pediatric population. Understanding there are still communication challenges faced by parents and healthcare professionals is crucial to find solutions that can enhance communication and eventually lower the risks and gaps in the care of pediatrics. (Adams et al. 2021:21, 300, 2.) The findings of this bachelor's thesis is in similarities with previous research validating communication challenges faced by nurses and parents in pediatric nursing.

### 6.1 Ethical reliability and validity

Ethical implications in research design to achieve the study aims and protect the rights of the research participants, ethical standards may serve as a compass to help researchers deal with the inevitable problems that arise during qualitative research, and validity in research studies is measured by how well results from study participants can be extrapolated to outcomes from the general population of people who have the same characteristics. (Mökander et al. 2021.)

Validity is crucial in research as it evaluates the quality of the research. It is important to use correct methods to collect data for the research and ensure that the research is measuring what it aims to measure in order to get a useful result. This also helps to make sure that discussions of the data and conclusions are also valid. (Middleton, 2022.)

The guidelines of Finnish Advisory National Board on Research (TENK) were followed while doing this thesis. Each reference in this literature review was used according to Metropolia guidelines. The work of all authors was recognized and referenced accurately. To ensure data validity, all articles selected were peer-reviewed. The internet-

based plagiarism detection service Turnitin was used to keep clear of plagiarism. References and in/text references are used correctly. Provided trustworthy databases from our University of Applied Sciences were used.

## 6.2 Recommendations and usability of the results

The results produced in this descriptive literature review support the previous study results. A new literature review could be made on the topic, which would include more Nordic studies and a comparison with Finnish healthcare. The results of this thesis can be used for educational use in the social and health sector and for increasing patient safety in pediatrics nursing. The results can also be used in working life as training material, or when thinking about solutions to reduce communication challenges. Thinking about the future, it would be necessary to continue to update studies regarding communication challenges as it was challenging to find "fresh" research information on this topic.

## 7 Conclusions

The purpose of this bachelor's thesis was to describe communication challenges between nurses and parents of pediatric patients. However, the aim was to generate understanding and knowledge on this topic, so nurses may apply their knowledge and help parents of pediatric patients overcome communication challenges. As elaborated in the above chapters, ten articles were selected for this bachelor's thesis, upon which inductive content analysis was applied. The articles selected were varying in their methodology, the data were both qualitative and quantitative.

As described earlier in this thesis, communication challenges between nurses and parents of pediatric patients occurred earlier and with the rise of refugee children it is escalating day by day. There are millions of them fleeing violence during global unrest. They have particular health needs because of their displaced status. Many come from resource-poor countries deprived of health care services. A sophisticated level of cultural sensitivity and policy awareness is required from nurses to give them quality nursing care. Communication skills are essential for nurses to overcome language barriers to interact with their patients. It is crucial to learn communication skills because there are differences between the way children communicate. There have been few studies on communication skills in pediatrics, so it is necessary that these challenges are known which will help nurses come with different communication methods and strategies in the



future, as nurses often lack skills to communicate with patients, family members and other health care members.

Nevertheless, only educating nurses is not enough to overcome communication challenges in pediatric nursing. Educating the parents is also essential to prevent misunderstandings and miscommunication. It is crucial that parents understand the diagnosis of their child, the treatment options and pain management. Nurses must provide parents with enough information and guidance and make sure that they understand it too. For this to be successful, nurses must spend time communicating with parents to avoid difficulties in communication. Nurses must understand the feelings and needs of the parents. Also updating their own knowledge and skills will help them overcome communication difficulties. With migrant families and children, clear and understandable language, interpreters, and communications aids should be used, as language barriers have an opposing effect on the quality of care. Also keeping in mind, the cultural differences of these patient groups are important, as their beliefs and values of life may be different than others.

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## Appendices

Appendix 1. Table 4. Summary of selected articles.

Study	Aim	Sample	Research design/methods/Analysis	Major findings
Adams S., Madison B., Moore C., Desai A., Bartlett L., Culbert E., Cohen E., Stonson J & Orkin J. 2021, Canada	To create and interpretive account which will guide and inform clinical practice.	Thirty-six parents and 29 care team members	Qualitative study  descriptive statistics, QRS  NVivo 12 software	Multiple aspects of communication in the care of CMC pose a challenge to parents, HCPs, community providers and teachers. antiquated policies to allow for open communication and information exchange using common, accessible methods such as e-mail and texting is essential. Access to systems that facilitate real-time communication, access to all health records from multiple institutions for HCPs and parents, and improved partnership between all those caring for CMC.
Bainter J., Craig K. A., Evans S., Gerwin R., &	To develop an awareness of communication challenges	Thirty adults were interviewed including 15 mothers	Semi-structured interviews	Parents of infants treated with therapeutic hypothermia have a uniquely stressful NICU experience and parents expressed that transparent, consistent, and timely provider communication improves the challenging situation. Study shows that parents want to be told exactly what is going on with their infant in a compassionate style and avoid medical jargon.

<p>James C. 2018, USA</p>	<p>experienced by families of infants treated with therapeutic hypothermia.</p>	<p>ers, 12 fathers, two grandmothers and one grandfather.</p>		<p>Parents also expressed those outside hospitals prior to transport were times in which parents often had inadequate information.</p>
<p>Berg M., Nilsson S., Patriksson K., &amp; Wigert H.2017, Sweden</p>	<p>To explore the experiences of health care professionals in Swedish neonatal care units regarding communication with parents of foreign origin</p>	<p>10 physicians, 25 nurses, and 25 nursing assistants.</p>	<p>Qualitative method. Open-ended interviews. Inductive content analysis.</p>	<p>Healthcare personnel expressed "powerlessness in the face of insufficient care routines leading to failure to communicate." And this main category was built through 3 sub-categories. 1. Inability to perform their work properly: Nurses knew that they were giving insufficient information to the parents about the child's care and treatment. This was often a source of misunderstanding, which they experienced as making the parents anxious. 2. Finding their own strategies: Nurses and families didn't speak the same language. Nurses used body language and, drawings, pictures, pens, and paper to communicate with families. 3. Dependence on others: Nurses had to use the interpreter in order to understand the parents and to make themselves understood.</p>

	who have difficulty understanding and speaking Swedish			
Birtwistle S., Bradburry D., Bradburry N., Bundy C., Chisholm A., & Watson M. P. 2018, UK	Exploring the barriers and facilitators experienced by health care personnel's when discussing child weight with parents.	13 studies, 8 to 26 health care personnel's working across a wide range of health care settings.	Meta-synthesis of qualitative studies. Interviews, focus groups, and open-ended questionnaires. Inductive content analysis.	Barriers to discuss child weight and weight related health with the parents are 1. cultural factors (language barriers, parental beliefs, and a health care personnel's lack of awareness of specific cultural practices) 2. organizational factors (Irrespective of professional roles, insufficient time) 3. societal factors (the normalization of overweight)
Colvin S., Helfer T., Kaufmann B., Pedemonte D., & Simon M. 2020, Switzerland	Communicative challenges hospital nurses are confronted with in the care of migrant pediatric patients and how they cope with them, and (b) what requirements nurses	Patients 2 to 16 years of age, The primary stakeholders (PNs, MPPs, and their parents.	Qualitative method. Group interviews, literature searches, short interviews, and observations. Thematic analysis.	Findings showed that the influencing factors and communication challenges during a hospital stay are language barriers, and cultural background, People from different countries not only have a different language, but they also have their own values, habits, religious beliefs, and traditional role models. During hospitalization, the cultural difference sometimes makes communication more difficult. Other important factor is nurses' working conditions and organizational structures within the hospital or unit.

	(and other stakeholders) have regarding a digital communication aid to improve the care of migrant pediatric patients in the hospital setting.			
Dorothy A. 2020, UK	Aims to clarify the concept of effective communication and address the gap in knowledge using Rodgers's (1989) theoretical framework	A total of 2086 articles were retrieved from the databases	The evolutionary method of concept analysis	Effective communication in nursing is clearly a complex, multidimensional and multifactorial concept. effective communication is an important concept to prioritize in nursing education and practice.
Fugelseth D., Hanssen I., & Kynoe M. N. 2020, Norway	To explore how communication in neonatal intensive care units (NICUs) between immigrant mothers and	Eight mothers and eight nurses	Qualitative method.  Semi-structured interviews, observation, and focus group interviews. Thematic analysis	Due to language barriers, it was difficult to assess the mothers' understanding. The immigrant mothers and nurses interacted by using body language, simple words, and reciprocal guessing of what the other was trying to express. But the use of competent interpreters is needed to optimize nursing care, information giving, and bedside guidance. The pictorial communication boards available lacked important vocabulary needed in neonatal nursing contexts and their use furthermore interrupted the mother–nurse conversation.



	<p>nurses take place without having a common language, and how these mothers experience their NICU stay.</p>			
<p>Hashimoto H, 2017, Japan</p>	<p>Develop and implement a communication support program for nurses to facilitate improved communication with families of hospitalized children, and to clarify changes in nurses' recognition and behavior toward communication with families in clinical settings</p>	<p>13 nurses who worked at four general hospitals with pediatric inpatient wards in Japan.</p>	<p>Qualitative descriptive design to evaluate the effects of a communication support program</p>	<p>Nurses who participated in the communication support program became more positive toward communication with families by understanding their feelings via lectures and role-plays. Nurses received favorable reactions from the families, their difficulties with communication diminished.</p>

Wu, Tam, Page, Lamb, Jordan, Chambers, & Robillard. 2022, Canada	Explore parent-nurse pain management communication during a child's discharge process following pediatric outpatient surgery.	parents (N = 40) and nurses (N = 25)	Audio Record  MAXQDA qualitative research software and Microsoft Excel.	Study shows that nurses delivered pain management instructions at an average sixth-grade readability level and frequently used communication elements of reassurance, optimism, and question-asking. Less consistent communication elements included open-ended questions, interruptions, and the promotion of parental decision-making.
Öztürk A, & Kacan H. 2021, Turkey	Determine the compassionate communication levels of nursing students and the predictive roles of empathic skills	430 nursing students	Descriptive information form, Compassionate Communication Scale (CCS), and Empathic Skill Scale (ESS).	Nursing students had a moderate level of compassionate communication and empathic skills, and that female students' empathic skills and compassionate communication scores were higher than boys. nursing communication education contributed the most to the increase in empathic skill scores

	and nursing communica- tion courses			
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