

Hospitalized Children and Their Mothers' Needs and Expectations from Pediatric Nurse

Naglaa Fathy Mahmoud and Marwa Abd Elkreem

Pediatric Nursing, Faculty of Nursing, Cairo University, Cairo, Egypt

Abstract: Hospitalization is a stressful experience for children and their mothers probably have different needs and also different ways of having their needs fulfilled. Understanding this is a prerequisite for pediatric nurses that will enable them to meet both children and mothers' needs, however the mothers will only be able to assist the health care team to meet the needs of their child if their own needs are also acknowledged and satisfied. The aim of this study was to assess hospitalized children and their mothers' needs and expectation from pediatric nurse. The study adopted descriptive cross sectional design. The study was conducted in pediatric medical and surgical inpatient departments from two pediatric hospitals affiliated to Cairo University (CUPHs). A convenient sample of 100 hospitalized children and their mothers included in this study. Data were collected using structured interview questionnaire, needs assessment sheets for hospitalized children and their mothers. The study results revealed that the highest total mean scores were for the needs for information, support and guidance followed by needs for physical comfort, while the relatively superior mean scores important needs of hospitalized children were need to have the mothers close by, need to play and feel joy, need for participation in care and treatment. The study concluded that the research questions were answered based on its findings. It was recommended that apply for educational programmes and nursing support during child hospitalization and before child's discharge. Utilize play therapy programs in nursing care. The findings strongly suggest that consider hospitalized children' perspectives on the care should be elicited when evaluating nursing practices. Mothers' involvement in forums and planning and development committees for the hospital, would ensure that their needs were well known and brought to prominence.

Key words: Pediatric Nurse • Hospitalized children needs • Mothers of hospitalized children needs

INTRODUCTION

Hospitalization can be a threatening and stressful experience for children because they are unfamiliar with the environment and medical procedures and unaware of the reasons for hospitalization, it can result in children's anger, uncertainty, anxiety and feelings of helplessness. Anxiety is the most commonly reported of these negative responses and high levels of anxiety can be harmful to children's physiological and psychological health. Excessive anxiety also impedes children's efficacy in coping with medical treatment and increases their uncooperative behavior and negative emotions towards healthcare professionals [1, 2]. Mothers whose child is in hospital are generally in anxiety because of the foreign environment and child's disease. This condition of

uncertainty also makes them worried. Therefore, the expectations of mothers of hospitalized children and how much of this expectation in the hospital were met must be set forth. The impact of the disease on the mothers could vary depending on the situations as follows: The child's disease being acquired at birth or later; the child's age by the time the disease has been acquired; the child's level of development and integration capabilities; a mothers-child relationship and family balance; the degree of illness (that create impact and limitations), treatment method, meaning of the disease to the mothers; the impact of the disease on the child's the social environment, school life and other relations [3, 4]. Mothers often feel helpless and desperate in the hospital and do not know what to do for their children. Although they are exactly not aware of their role in the hospital, they seem eager to take part in the child's

care and treatment process. Therefore they expect guidance on what to do to help their children. Moreover, they feel the necessity to share emotional burden with someone other than relatives, often with nurses and create a reliable relationship along with them [5].

With hospitalization, the level of complexity of care giving increases and necessitates shared communication and collaboration between mothers and pediatric nurses to ensure the best quality of care for their children. To that end, the multidimensional nature of care giving requires that pediatric nurses collaborate with caregivers and incorporate evidence into their practice. In this way, translating research into everyday practice improves the mother's caregivers' ability to provide care for their children and results in improved health and quality of life for children [6].

Pediatric nursing includes caring for children and educating their mothers and families about health, illness and child development. Creating partnerships with caregivers enhances children's care by creating a collaborative and nurturing environment that incorporates research evidence for the highest quality of care [7]. Thus, the quality of care for children and their caregivers is improved when evidence is translated into everyday clinical practice and pediatric nurses collaborate with mothers [4].

Often hospitalization is a stressful event that can cause anxiety and be emotionally traumatic for a child. Nurses play an important role in alleviating children's distress and anxiety during hospitalization. Many researches [8, 9] show that only little attention has been paid to the perspective of children related to their own care or nursing. Little explicit attention has been paid to the perspective of children and to the attributes of a good children's nurse. Researchers suggested that pediatric care should be improved by taking into account the children's experiences and own views. Usually in pediatric care, the mothers or the caregivers are consulted on the children's experiences, which may limit and influence the information. The best way to understand the children's experiences is to ask those [10]. So the current study assessed the hospitalized children and their mother's needs from the pediatric nurse.

Significance of the Study: The studies from developed countries recommended that mothers should be allowed to stay in the hospital with their children and that mothers' participation must be appropriate. Furthermore, hospital staff needs to be educated about the special needs for mothers and their hospitalized children. Children

should be prepared for hospital admission, if possible and mothers' needs should be met [11]. While in developing countries, there has been inadequate attention given to the needs in pediatric practices and most of the time the needs of the mothers are not sufficiently evaluated by health care professionals, who frequently neglect to stress on the mothers' participation or include them in the health care plan. Regarding children's experiences in the hospital, it can influence their attitudes toward health care for the rest of their lives, their decisions about receiving health care, or even as a health care provider in future. Only little researches have been done from the perspective of children. More researches need to be done related to children's needs to improve pediatric nursing. [12]. The importance of understanding both the needs of children and their mothers, by the pediatric nurse will affect the quality of nursing care, nursing education and patients outcomes and also for future researches application. Hence the current study aimed to assess the hospitalized children and their mothers' needs and expectations from pediatric nurse.

Operational Definitions: Needs in the present study are things that hospitalized children and their mothers must obtain from the pediatric nurse.

Expectations are the attributes that should be existed in the pediatric nurse as selected by hospitalized children and their mothers

Aim of the Study: The main aim of the present study is to assess hospitalized children and their mothers' needs and expectations from pediatric nurse.

Research Questions: This study answered two main questions.

- What are the hospitalized children's needs and expectations from pediatric nurse?
- What are the mothers' needs and expectations from pediatric nurse?

MATERIALS AND METHODS

Design: Descriptive cross sectional design was used to conduct the present study.

Sitting: The study was conducted in pediatric medical and surgical inpatient departments from two pediatric hospitals affiliated to Cairo University Pediatric Hospitals (CUPHs).

Sample: A convenience sample of 100 hospitalized children and their mothers. The study sample fulfilled the following inclusion criteria as; hospitalized children were more than 6 years old, both gender and hospital stay not less than 3 days. Children with mental retardation or other disabilities were excluded. Mothers of hospitalized children in either pediatric or neonatal intensive care units were excluded from the sample.

Data Collection Tools: After extensive reviewing the related literature the following two tools were developed by the researchers to collect the required data:

Tool 1- Structured Interview Sheet: It included two main parts for Sociodemographic data about hospitalized children and their mothers as followed:

Part I: Characteristics of hospitalized children include 6 questions such as age, gender, ranking of child in family, previous admission, diagnosis and admission stay.

Part II: Characteristics of mothers include 5 questions such as; mothers' age, level of education, occupation, number of children and place of residence.

Tool 2- Needs and Expectations Assessment Sheet: consisted of two main parts.

Part I: Mothers' Needs and Expectations Assessment Sheet: The tool was adapted for use with mothers of hospitalized children from the Needs of Mothers of hospitalized children Questionnaire (NPQ) it consists of 43 statements and has been described in detail elsewhere [7]. Reliability analysis of the inner consistency of the NPQ had a Cronbach range $\alpha = 0.91-0.92$ for both mothers. The questionnaire was translated from English language to Arabic language and back translation was done and checked by another English lecturer. The items in the questionnaire were divided into six groups of needs and six group of expectations according to their content; physical needs and emotional needs, needs for support and guidance, needs for information, need for participation in the child's care and the needs of the mother in relation to care for other family members, for expectations, cooperative, skillful, patient and supportive, knowledgeable, sensitive and sympathetic, funny and enjoy play. Also Mothers responded to the statements on a five point Likert scale ranging from (0) not important at all, (1) slightly Important, (2) moderately Important, (3) Important (4) very important. Data analysis assessed the level of importance of each item of need as perceived by mothers to ascertain their priority.

Part II: Hospitalized Children' Needs Assessment Sheet: developed by the researcher after extensive reviewing of literature. It consisted of 20 statements to assess the children' needs and expectation from pediatric nurse. The items in the statements were divided into six groups according to their content; need to have the mothers close by, need to play and feel joy, need for participation in care and treatment, need for a good relationship with the staff, need for physical care and need for emotional satisfaction. Children responded to the statements on a three point Likert scale ranging from (0) not important, (1) to some extent, (2) important. Data analysis assessed the level of importance of each item of need as perceived by children to ascertain their priority.

Validity and Reliability: The data collection tools were reviewed by a panel of 5 experts in the field of pediatric nursing to test the content validity of tools. Reliability of tools was performed to confirm its internal consistency (0.80).

Pilot Study: The pilot study was carried out on ten hospitalized children and their mothers in pediatric hospitals to estimate the needed time for data collection and to test the clarity, feasibility, objectivity and applicability of the study tools. The needed modifications were done. Those samples were excluded from the total research sample.

Data Collection Procedures: The study was conducted during the period of January 2015 to end of July 2015. Official Permission was granted from the official personal of CUPHs after explaining the aim and nature of the study. Mothers of hospitalized children were interviewed on individual bases to explain the nature and purpose of the study. Hospitalized children were interviewed in the presence of their mothers without intervention or individual as child's preference. Measures were taken to protect mothers' and child's ethical rights and dignity. Data collected through face to face interview to be able to include illiterate participants, insure higher response rate and to clarify misunderstood questions. Each interview took about 20 to 30 minutes for mothers and from 15 to 20 minutes for children

Ethical Considerations: Mothers and hospitalized children informed about the nature, purpose of the study and its benefits. Verbal agreement (consents) was taken before data collection. The researchers also informed that participation in the study was voluntary; have rights to

withdraw from the study at any time without giving any reason and without any effect on the care of their children. Confidentiality was also assured through coding the data. Each assessment sheet was coded anonymous.

Statistical Analysis: The collected data were coded, summarized, computerized and analyzed using the Statistical Package for Social Studies (SPSS), version 16.0. Mean and standard deviation were used for quantitative variables and percent for qualitative variables. Correlation among variables was done using Pearson correlation coefficient. The p -value = 0.05 and p -value = 0.001 were considered statistically significant.

RESULTS

The findings of the current study were divided into three parts, part one related to characteristics of hospitalized children and their mothers, second part concerned to answer the research questions regarding hospitalized children and their mothers needs and expectation, the last part examine the relation between hospitalized children and their mothers' needs with their characteristics

Part I: As regards to hospitalized children's characteristics the results reveals that , more than half of children (60%) were boys , while 40% were girls . more than two thirds (64%) of them aged from 9 to 11 years , with mean age 10.1 ± 1.4 . about two thirds (62%) of them were from rural area, most of them (45%) was the first child in the family. More than half of them complained from medical problems and nearly two thirds were admitted by acute health status on admission (54 and 64% respectively). Also the same table showed that 50% of children stayed in hospital from 8 to 14 days with mean days 1.5 ± 1.6 and majority of them (70%) hadn't admitted to hospital before (Table 1).

Regarding characteristics of hospitalized children' mothers, table 2 evident that the most of mothers aged from 30 to 39 years (45%) with mean \pm SD 33.70 ± 6.37 years and more than quarter of them were able to read and write (38%) and more than half of them were housewife, had other one child and from rural area (55%, 52%, 62% respectively).

Part II: Concerning mothers' needs, table 3 illustrates that need for information, needs for support and guidance followed by needs for physical comfort were relatively

superior to their needs (4.67 ± 0.6 , 4.43 ± 0.81 and 3.92 ± 0.92 , respectively). The lower mothers' need mean score was needs for participation in the child's care (3.29 ± 1.39).

As regards hospitalized children' needs, the results clarifies that need to have the mothers close by, need to play and feel joy, need for participation in care and treatment and followed by needs for a good relationship with the staff were the highest total mean scores (7.47 ± 3.30 , 6.243 ± 2.22 , 4.66 ± 2.12 , 4.35 ± 1.22 respectively), then other needs, as needs for physical care and needs for emotional support constitute lower mean scores (3.82 ± 0.76 3.84 ± 0.47 respectively) (Table 4).

Regarding hospitalized children and their mothers ' expectation from the pediatric nurse, the findings proved that almost, vast majority of hospitalized children and their mothers expected that , the pediatric nurse should be cooperative (95 and 100% respectively) to answer mothers' questions, patient and supportive (80 and 100% respectively) during the hospitalization period especially of initial diagnosis, with opportunity to express mothers and their children feelings , knowledgeable (95 and 100% respectively) to provide information on the child's health status or any changes in a timely and appropriate manner to both children and their mothers, all hospitalized children and their mothers expected that pediatric nurse to be sensitive and sympathetic (100 and 100%, respectively) to help both mothers and children in adaptation to the new environment with proper respect to the mothers in this situation. Majority of children and their mothers (90 and 100% respectively) expected pediatric nurse to be skillful to provide care appropriately to child's health status. As regards funny and enjoy play, all hospitalized children (100%) and three quarter of mothers (75%) agreed about that.

Part III: Regarding relation between mothers of hospitalized children needs and their characteristics, the result showed that there was a highly statistical significant positive relation between mothers' needs and their level of education and working status. ($p = 0.008$, 0.050 respectively). However there was no statistical significance relation related to mothers' age and their needs ($p = 0.137$). From the other side there was no statistical significant relation between place of residence and mother needs about the needs of the mother in relation to care for other family members ($p = 0.936$). The same results showed that there was statistical significance difference between mothers who had children other than the admitted child than mothers of an only hospitalized

child ($p = 0.03$). Relationships were found between factors relating to the type of admission and mother's needs, there was statistical significant relation between mothers of children who were admitted as chronic rather than acute admissions was most influential, ($p = 0.052$, 0.02 respectively). Also there was statistical significant relation between mother's needs and duration of hospital stay ($p = 0.004$). While there was no statistical significant difference between mothers' needs and their children's age, diagnosis, gender, rank in the family and previous hospital admission ($p = 0.062$, 0.136 , 0.156 , 0.853 & 0.179 respectively). Concerning the hospitalized children's characteristics the findings evident that there is statistical significant positive relation regarding children's needs and their age, place of residence, type of admission, duration of hospital stay, child's complaint and previous hospital admission ($p = 0.005$, 0.001 , 0.002 , 0.003 , 0.001 & 0.05 respectively). From another hand there was no statistically significant relation between hospitalized children's needs and their gender, diagnosis and their rank in the family ($p = 0.936$, 0.156 & 0.853 , respectively).

Table 1: Hospitalized Children's Characteristics (n=100)

Items	No.	%
Age /years:		
6 - 8	20	20
9- 11	64	64
>11	16	16
Mean +SD10.1 + 1.4		
Gender:		
Female	60	60
Male	40	40
Child's rank in the family:		
1	45	45
2	28	28
3+	27	27
Child's main complaint		
Medical problems	54	54
Surgical problems	46	46
Type of admission		
Acute	64	64
Chronic condition	36	36
Hospital stay /day		
3-7 day	18	18
8- 14 days	52	52
> 15 day	35	35
Mean +SD11.5 + 1.6		
Previous hospital admissions:		
No	70	70
Yes	30	30

Table 2: Characteristics of Hospitalized Children's Mothers (n=100)

Items	No.	%
Age / years:		
20-29	38	38
30-39	46	46
40 and more	16	16
Mean +SD 33.70+6.37		
Mother's level of education:		
Illiterate	22	22
Read/write	38	38
Basic education	15	15
Secondary school education	15	15
University education	10	10
Mother's job:		
Housewife	55	55
Working mother	45	45
Other children in the family		
No	15	15
1 other	52	52
2 or more	33	33
Place of Residence:		
Rural	62	62
Urban	38	38

Table 3: Mothers' Needs Total Mean Scores and SD

Mothers' Needs	Mean	SD
• Needs for physical comfort	3.92	0.92
• Needs for information	4.67	0.6
• Emotional Needs	3.80	0.75
• Needs for support and guidance	4.43	0.81
• Needs for participation in the child's care	3.29	1.39
• Needs of the mother in relation to care for other family members	3.88	0.77

Table 4: Hospitalized Children's Needs Total Mean Scores and SD

Hospitalized Children's Needs	Mean	SD
• Need to have the mothers close by	7.47	3.30
• Need to play and feel joy	6.243	2.22
• Need for participation in care and treatment	4.66	2.12
• Need for a good relationship with the staff	4.35	1.22
• Need for physical care	3.84	0.47
• Needs for emotional support satisfaction	3.82	0.76

DISCUSSION

Concerning the first research question regarding mothers' needs, the result illustrates that need for information, needs for support and guidance followed by needs for physical comfort were relatively superior to their needs and the lower mothers' need in importance was needs for participation in the child's care. The same results was mentioned by Abdel-kader *et al.* [12] who assessed Jordanian mothers' needs while their child is hospitalized, from a Jordanian context demonstrates a need of support and guidance from health staff during

and after hospitalization, as well as during the care process. Jordanian parents as an Arab culture like Egyptian mothers consider the need for information regarding the prognosis, the condition of the child and whatever happens to the child as highly important, more than need for fulfillment of physical and emotional needs. That's mean they have concern about participating in the care of their child rather than fulfilling their personal needs even with very limited bedside facilities like seats to sleep overnight. These results are consistent with previous studies [13, 14] which have examined the mothers' needs of hospitalized children where all mothers thought these needs were important. These needs when they are not met will affect negatively on mothers' participation in the child's care as shown by this study.

In a qualitative design study done by Salmani *et al.* [15] to explore the factors creating trust in hospitalized children's mothers towards nurses, findings reported that participants in the study expressed need to express their feelings, they prefer the nurse to be available for conversation to express their feelings and accept them and the nurses who play the supportive role for the mothers are considered as a helping factor in pacifying mothers' stress and anxiety and this nurses' behavior gains too much trust and satisfaction for mothers. It means that when a nurse is considered as a supporter for the mother can build a reliable relation.

Notably, insufficient information-sharing by nurses raise concerns and anxiousness of hospitalized children and often trigger mothers mistrust toward the health care team [16]. The first requirement is the staff's positive attitude toward mothers. A negative attitude toward mother participation can create barriers to collaborative working relationships. This area need for future research. The previous results may be attributed to lower level of awareness from mothers regarding health care.

As regards second research question related to hospitalized children' needs, the results clarifies that need to have the mothers close by, need to play and feel joy, need for participation in care and treatment and followed by needs for a good relationship with the staff were the highest total mean scores more than other needs, as needs for physical care and needs for emotional support that constitute lower importance score.

The researchers in this study view that expressed needs of the hospitalized children are similar to those of healthy children, for example, to have the mothers close by, to play and to satisfied physical and emotional needs.

In the same line a study by Coyne [17] to explore children's experiences of hospitalization children aged between seven and 14 years from four pediatrics units in

England. The children identified a range of fears and concerns, which included: separation from mothers and family; unfamiliar environment; investigations and treatments; and loss of self-determination. Nurses need to be sensitive to the emotional and informational needs of children. Good communication between nurses and children is linked to increased understanding of illness and treatment; this in turn should lead to decreased stress for children and provide the foundation for effective treatment. Hospital environments need to be more child-centered and it is essential that children's views be elicited in the delivery of their care.

The results of the present study are in accordance with Björk *et al.* [18] who described needs of young children with cancer during their initial hospitalization in an observational study and stated that mothers had a prominent role in the child's life during hospitalization. The child wanted to be both physically and emotionally close to his or her mothers. It is also important for the staff to include the mothers in as much of the process as possible, so that they can support and comfort their child. Also the study indicated the need for children to participate in care and to make protests as well as to receive information about care and treatment. Hockenberry and D. Wilson [4] reported that preventing or minimizing separation is a key nursing goal with the child who is hospitalized and maintaining mothers-child contact is also beneficial for the family. One of the best approaches is encouraging mothers to stay with their child and to participate in the care whenever possible.

Regarding to play as the second higher important needs of hospitalized children Nabors *et al.* [19] found that in the hospital, children found it difficult to keep themselves occupied due to inadequate play equipment and facilities. Play helps children through stressful situations by allowing children to express their feelings and gain control over the stressful experience by giving children choices and opportunities to recreate events in their lives Therefore, play can be viewed as a coping method for children experience a stressful situation, such as a hospitalization [20]. In an empirical study by Li *et al.* [2] examining the effects of hospital play interventions on the outcomes of hospitalized children. The results emphasized the significance of incorporating hospital play to provide holistic and quality care to ease the psychological burden of hospitalized children. It also promotes the knowledge and understanding among both healthcare professionals and mothers that play is of paramount importance to children's lives and that they need to play even when they are sick.

As reported elsewhere regarding the role of play in hospital environment. The pediatric hospitals in Egypt are free of charge like any governmental hospital and the main concern is treatment of diseases. So play is not an important unmet need for hospitalized children from health care providers. This view should be changed and play room in medical and surgical departments should be returned. Regarding participation in care The findings of present study substantiate the work done by Björk *et al.* [18] who stated that children who could verbally express themselves wanted to be involved in decisions, help the nurses and explain that they knew what was going to happen as well as ask why things were going to happen. When the children participated in care and treatment procedures, they usually facilitated the procedure by cooperating and helping the staff.

In a recent study conducted by Santos *et al.* [21] described the perception of school age hospitalized children of nursing care from their perspective, the best ways to address it to when performing such care through qualitative, descriptive, exploratory research. Results showed the importance of playing during hospitalization, of a friendly and caring approach and providing explanations regarding the performed procedures. Nursing professionals need to consider how the children would like to receive the care being provided, so that their privacy is respected. Playing was identified as a resource able to minimize anxiety and fear during hospitalization. The individuals also stated that, to care for children, the nursing professionals need to be funny and play, which shows the need to include recreational activities while assistance is being provided.

As regards mothers' expectations from pediatric nurse the present study illustrated that, most of mothers expected that , the pediatric nurse should be cooperative to answer mothers' questions , patient and supportive during the hospitalization period especially of initial diagnosis, with opportunity to express mothers and their children feelings , knowledgeable to provide information on the child's health status or any changes in a timely and appropriate manner, sensitive and sympathetic to help both mothers and children in adaptation to the new environment with proper respect to the mothers in this situation. Also skillful to provide care appropriately to child's health, while most of children also selected the same expectation but all hospitalized children chose funny and enjoy play.

On the same context, Fidanci *et al.* [5] and Lam *et al.* [22] who investigated what the expectations of mothers about their child's care through evaluating expectations from nurses; explaining the conditions and procedures,

satisfying children's needs within a short period of time, keeping a supportive and concerned manner were main expectations of mothers. The support of nurses helps overcome the mothers with the difficulties of a patient child. Fidanci *et al.* [5] also mentioned about the positive effect of a relation based on supportive approach and informing the mothers on the patient's condition

In the same line, Santos *et al.* [21] reported that the children highlight the importance of care being performed with tenderness, affection and respect. In addition, they emphasize the need for these professionals to explain each step of the procedures, so they can understand their purpose and feel safer. Also, they consider cordiality to be essential for them to feel comfortable in the hospital. They verbalized that, sometimes, the simple procedures end up causing pain, which requires greater attention and sensitivity of the nursing professional. Playing was identified as a resource able to minimize anxiety and fear during these moments. Another author [23] added that to care for children, the nursing professionals need to be funny and play, which shows the need to include recreational activities while assistance is being provided.

Regarding relation between mothers of hospitalized children needs and their characteristics, the result showed that there was a highly statistical significant positive relation between mothers' needs and their level of education and working status. From the other side there was no statistical significant relation between place of residence and mother needs about the needs of the mother in relation to care for other family members. The same results showed that there was statistical significance difference between mothers who had children other than the admitted child than mothers of an only hospitalized child. Also there was statistical significant relation between mother's needs and duration of hospital stay. While there was no statistical significant difference between mothers' needs and their children ' age, diagnosis, gender, rank in the family and previous hospital admission. Concerning the hospitalized children' characteristics the findings evident that there is statistical significant positive relation regarding children' needs and their age , place of residence, type of admission, duration of hospital stay , child's complaint and previous hospital admission. From another hand there was no statistically significant relation between hospitalized children needs and their gender, diagnosis and their rank in the family.

Regarding to work status Shields and King [24, 25] found that in developing countries, working mothers sometimes lost their jobs when caring for their children in hospital, so the needs of the whole family were drastically affected. This area needs for further researches A number

of risk factors make certain children more vulnerable than others to the stresses of hospitalization. Rural children may exhibit significantly greater degrees of psychological upset than urban children, possibly because urban children have opportunities to become familiar with a local hospital regards children' age [4] and add that the stressors of hospitalization may cause young children to experience short- and long-term negative outcomes. Adverse outcomes may be related to the length and number of admissions, multiple invasive procedures and the mothers' anxiety. It should be acknowledged that, while the children's cognitive skills develop with age, feelings of sympathy and role-taking increase. In this sense, as observed in the reports about the valuation of the nursing staff's behavior, as they children distinguish the sense of their own and other people's identity, their empathic feelings become more sophisticated, they further consider other people's actions towards them and can establish a clearer idea of adult people's behaviors [26]. Moreover in recent years has focused on the increasing length of hospitalization because of complex medical and nursing care, elusive diagnoses and complicated psychosocial issues. Without special attention devoted to meeting children's psychosocial and developmental needs in the hospital environment, the detrimental consequences of prolonged hospitalization may be severe [4]. In a cross-sectional study by Tehrani *et al.* [27] who reported effects of stress on mothers of hospitalized children in a hospital in Iran statistically, there was a meaningful correlation among maternal age and occupation, child's age, mother's worrying about other children left at home, and days of hospitalization in causing maternal stress. Finally the findings of the present study answer the research questions.

CONCLUSION

The current study concluded that the superior needs of hospitalized children from the pediatric nurse are to let their mothers close by them, play and participated in their care and treatment, while mothers' needs mainly concentrated of needs of information, support and guidance. Regarding expectations from the pediatric nurse, the findings clarifies that, cooperative, patient and supportive, sensitive and sympathetic and skillful constitute the traits that the pediatric nurse should have. Almost all of children also selected the same expectations as their mothers, but all hospitalized children choose funny and enjoy play as the most expectations from the pediatric nurse. Also the findings exhibited that some factors related to hospitalized children and their mothers

characteristics as; mothers' level of education, child' age, hospital stay and type of admission. So the research questions were answered based on present study results.

Recommendations:

- Education programmes about hospitalized children and their mothers needs
- Qualitative researches to assess hospitalized children and their mothers needs from their perspectives
- Raise the pediatric nurses' awareness toward hospitalized children and their mothers' needs through continuing training and education.
- Parents' involvement in forums and planning and development committees for the hospital, would ensure that their needs were well known and brought to prominence.
- Researches into children's needs is important and a similar comparison between pediatric perceptions and children's perceptions of needs may raise some interesting contrasts

ACKNOWLEDGMENTS

The researchers are very grateful to all the mothers and children who participated in this study for sharing their time and experiences.

REFERENCES

1. Datta, P., 2010. Pediatric Nursing 2nd ed., Paris, Williams & Wilkins, pp: 454-470
2. Li, W., J. Chung, K.Y. Ho and B. Kwok, 2016. Play interventions to reduce anxiety and negative emotions in hospitalized children. BMC Pediatrics, 16: 36.
3. Pillitteri, A., 2009. Maternal & child health nursing care of the Child bearing and childrearing family. 5th ed. A Wolters Kluwer Company. Philadelphia, pp: 723-728.
4. Hockenberry, M. and D. Wilson, 2013. WONG'S Essential of Pediatric Nursing, 9th ed. Philadelphia: Mosby, pp: 213-240.
5. Fidanci, B.E., F. Arslan and K. Fidanci, 2014. Parents' Expectations and Satisfaction on Pediatrics Clinic. Transl Med (Sunnyvale) 4: 137. Accessed at 9/12/2014.
6. Weissenstein, A., A. Straeter, G. Villalon, L. Luchter and S. Bittmann, 2011. Parent satisfaction with a pediatric practice in Germany: A questionnaire-based study. Italian Journal of Pediatrics, 37: 31. Available at <http://www.ijponline.net/content/37/1/31>.

7. Shields, L., J. Young and D. Mccann, 2008. The needs of parents of hospitalized children in Australia. *Journal Of Child Health Care*, 12(1): 60-75 DOI: 10.1177/1367493507085619 accessed at 5/4/2016.
8. Silva, M.M., J.M. Vidal, J.L. Leite and T.P. Silva, 2014. Care strategies adopted by nurses in the care of hospitalized children with advanced cancer and in the self-care. *Ciênc Cuid aúde.*; 13(3):471-8. Available at <http://dx.doi.org/10.4025/ciencucuidsaude.v13i3.19937> . accessed at 12/12/2015 .
9. Hallstrom, I. and G. Elander, 2007. Families' needs when a child is long-term ill: a literature review with reference to nursing research. *International Journal of Nursing Practice*, 13: 193-200.
10. Mwangi, R., C. Chandler, F. Nasuwa, H. Mbakilwa, A. Poulsen and C. Bygbjerg, 2008. Perceptions of mothers and hospital staff paediatric care in 13 public hospitals in northern Tanzania. *Trans R Soc. Trop Med Hyg.*, 102(8): 805-10.
11. Shields, L., 2001. A review of the literature from developed and developing countries relating to the effects of hospitalization on children and parents. *International Nursing Review*, 48: 29-37.
12. Abdel-kader, R., M. Al-Hussami, M. Saleh, A. Mahadeen and I.M. Kadere, 2012. Jordanian Parents' Needs While Their Child is Hospitalized. *J. Med.*, 46(1) Available at <http://dar.ju.edu.jo/jmj>.
13. Ammentorp, J., J. Mainz and S. Sabros, 2005. Parents' Priorities and Satisfaction with pediatric care. *Archives of pediatric Adolescent Medicine*, 159(2): 127-31.
14. Pongjaturawit, Y., 2006. Parent participation in the care of hospitalized young children. *Thai Journal of Nursing Research*, 10(1): 18-28.
15. Salmani, N., A. Abbaszadeh and M. Rassouli, 2014. Factors Creating Trust in Hospitalized Children's Mothers towards Nurses Iran *J. Pediatr*; 24(6): 729-738.
16. Konstantynowic, L. Marcinowic, P. Abramowic and M. Abramowic, 2016. What Do Children with Chronic Diseases and Their Parents Think About Pediatricians? A Qualitative Interview Study *Maternal Child Health J.*, 20: 1745-1752 DOI 10.1007/s10995-016-1978-
17. Coyne, I., 2006. Children's experiences of hospitalization *Journal of Child Health Care*, 10(4): 326-336 DOI: 10.1177/1367493506067884.
18. Björk, M., B. Nordström and I. Hallström, 2006. Needs of Young Children With Cancer During Their Initial Hospitalization: An Observational Study *Journal of Pediatric Oncology Nursing*, 23(4).
19. Nabors, L., J. Bartz, J. Kichler, R. Sievers, R. Elkins and J. Pangallo, 2013. Play as a mechanism for working through medical trauma for children with medical illnesses and their siblings. *Issues in Comprehensive Pediatric Nursing*, 36(3): 212-224.
20. Myrick, A. and E. Green, 2012. Incorporating play therapy into evidence-based treatment with children affected by obsessive compulsive disorder. *International Journal of Play Therapy*, 21(2): 74-86.
21. Santos, P.M., L.F. Silva, J.R.B. Depianti, E.G. Cursino and C.A. Ribeiro, 2016. Nursing care through the perception of hospitalized children. *Rev Bras Enferm [Internet].*; 69(4):603-9. available at <http://dx.doi.org/10.1590/0034-7167.2016690405i>.
22. Lam, L.W., A.M. Chang and J. Morrissey, 2006. Parents' experiences of participation in the care of hospitalized children: a qualitative study. *Int J. Nurs Stud.*, 43(5): 535-45.
23. He H.G., L. Zhu, W. Chan, J.L. Liam, L.I. Kos, S.W. Wang and P. Yobas, 2015. A mixed method study of effects of a therapeutic play intervention for children on parental anxiety and parents' perceptions of the intervention. *Journal of Advanced Nursing* 71(7): 1539-1551. doi: 101111/jan.12623.
24. Shields, L. and S.J. King, 2001a. Qualitative analysis of children in hospital in four countries – Part 1. *Journal of Pediatric Nursing*, 16: 137-45.
25. Shields, L. and S.J. King, 2001b. Qualitative analysis of the care of children in hospital in four countries – Part 2. *Journal of Pediatric Nursing*, 16: 206-13.
26. Lindeke, L., M. Nakai and L. Johnson, 2006. Capturing children's voices for quality improvement. *Am. J. Matern Child Nurs.*, 31(5): 290-5.
27. Tehrani, T.H., M. Haghighi and H. Bazmamoun, 2012. Effects of Stress on Mothers of Hospitalized Children in a Hospital . *Iran J. Child Neurol.*, 6(4): 39-45.