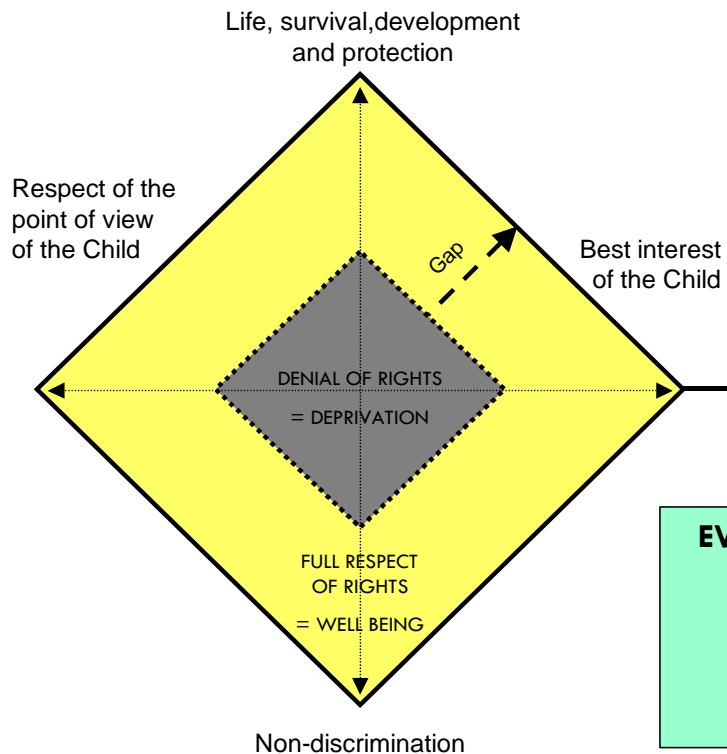


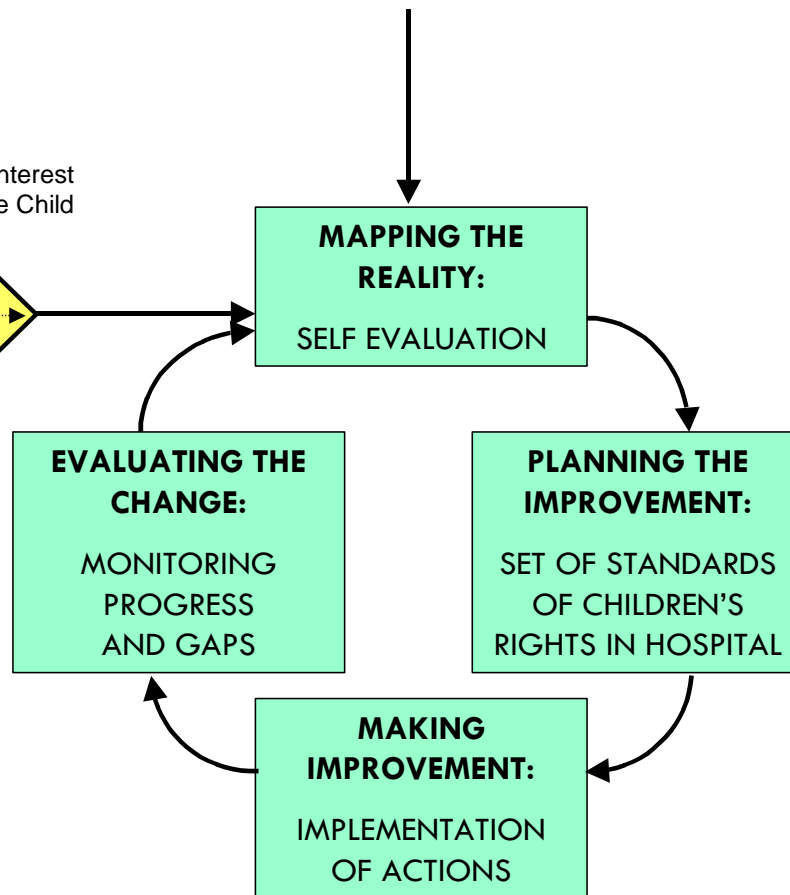
Recognition and Respect of Children's Rights in Hospitals

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GENERAL PRINCIPLES OF THE U.N. CONVENTION
ON THE RIGHTS OF THE CHILD



**HPH Task force on Health Promotion for
Children and Adolescents in & by Hospitals
and Health Services**



Norsk nettverk for helsefremmende arbeid
Norwegian HPH network

Method

- Semi structured qualitative interviews
 - 3 focus group interviews with staff
 - 3 individual interviews with physicians
 - 4 individual interviews with parents
- Qualitative content analysis



AREA 1: RIGHT TO THE HIGHEST ATTAINABLE STANDARD OF HEALTH CARE

Right 1.1

Children's health care provision should take into consideration all dimensions of health, including physical, mental, social, cultural and spiritual.

Right 1.2

Children have the right to access health services without ethnic, racial, class, religious, gender, age, sexual orientation, disability, language, cultural and social discrimination.

Right 1.3

Children shall be admitted to hospital only if the care they require cannot be equally well provided and effective at home or on a day basis.

Right 1.4

Children have the right to have full opportunity for play, rest, leisure, recreation and education suited to their age and condition and to be in an environment designed, furnished, staffed and equipped to meet their needs.

AREA 2: RIGHT TO INFORMATION AND PARTICIPATION IN ALL DECISIONS INVOLVING THEIR HEALTH CARE

Right 2.1

Children have the right to be informed in a manner appropriate to their age, developmental level and understanding.

Right 2.2

Children have the right to express freely their opinions on any issue that involves them and the right to be heard and to be taken into consideration in a way consistent with their age and maturity.

AREA 3: RIGHT TO PROTECTION FROM ALL FORMS OF VIOLENCE

Right 3.1

Children have the right to be protected from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse.

Right 3.2

Children have the right not to be separated from their parents/guardians/caregivers against their will during their stay in hospital.

Right 3.3

Children have the right to privacy.

Right 3.4

Children have the right to a dignified death.

Right 3.5

Children have the right not to feel pain.

Right 3.6

Children have the right not to be submitted to clinical research or experimentation projects and to have the possibility to withdraw during the process of research.

Area 1. The right to the highest attainable standard of health care

- all dimensions of health

"We do see that not all of these are covered at all times. But usually they are here just with a belly-ache, and then it's just that that is taken care of. So in that sense I think we have potential for improvement." (Focus group)

- to be admitted only when care at home can not be equally well provided

"A lot is asked of the parents. Maybe a bit too much I think. Even if you know how to, you may not always be emotionally capable to manage over time." (Parent)



Area 1 cont.

- Equality in health

*"We work a lot with the parents and give guidance when it comes to how to best care for a sick child[...] so we are totally dependent on being able to communicate with the parents. So that we together care for the child the best way possible and that they understand what they have to do."
(Focus group)*



Area 2 Right to information and participation in all decisions involving their health care

"I think we communicate mostly with the parents. The parents are there all the time and are often easier to address. I think a great challenge is that we now are getting an older age group of children. We used to have up to age 16. Now it's up to age 18, giving a larger group of what is in fact quite grown up children." (Physician)



Area 3. Right to protection from all forms of violence

- Protection from all forms of violence

” It’s in relation to abuse and neglect. That if one suspects such issues we often get preoccupied with protecting the parents and forget that it is actually the child that should be our main focus. This is a very current topic. We talk about it in relation to that it is proven, we know statistically that there is a lot of abuse, violence and maltreatment. It is very seldom that we take charge in such cases. Really seldom.” (Physician)



Area 3 cont.

- The right to not feel pain

"Yes, they are not given right and adequate pain relief, and it is a little at random." (Physician)

"It took a long time to get him to feel safe again last time, and the physician that discharged us said that he actually just had to get used to physical closeness again. I then think that you have been too brutal... Blood tests and I.V. needles are things we struggle with here. [...] They (health professionals) seem to understand it even though they don't do anything about it. (Parent)



Where do we go from here?

- Final report from the project
- We are applying for funding in cooperation with *Save the Children Norway*
- *For further information contact kjersti.flotten@ahus.no*
- *Thank you!*

