



Ministry of Higher Education and
Scientific Research
University of Basrah
College of Nursing



Burden of Family of Hospitalized Child at Al-Basrah Teaching Hospitals

A Research Project Submitted to a Council of the Nursing College at
the University of Basra as a Partial Fulfillment of
the Requirements for the Degree of Bachelor in
Nursing Sciences

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2022/2021

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يا أَيُّهَا الْإِنْسَانُ مَا غَرَّبَكَ بِرَبِّكَ الْكَرِيمِ (6) الَّذِي خَلَقَكَ فَسَوَّاكَ فَعَدَلَكَ (7) فِي
أَيِّ صُورَةٍ مَا شَاءَ رَكَّبَكَ (8) كَلَّا بَلْ تُكَذِّبُونَ بِالذِّينِ (9) وَإِنَّ عَلَيْكُمْ
لَحَافِظِينَ (10) كِرَامًا كَاتِبِينَ (11) يَعْلَمُونَ مَا تَفْعَلُونَ (12)

صدق الله العلي العظيم

سورة الانفطار

Supervisor support

I certify that this research project to determine the burdens of hospitalized child on family has been prepared under the supervision of my supervisor at the College of Nursing, University of Basra, as a partial fulfillment of the conditions for obtaining a baccalaureate degree in Nursing in a Bachelor of Nursing Science.

Dr. Adil Ali Hussein Alrikaby
University of Basrah
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Acknowledgement

I extend my sincere thanks and gratitude to Dr. Adil Ali Hussein Alrikaby for the effort he made, which had a great impact in completing this research, and I also express my thanks and all my professors for the knowledge. And the effort they made during the years of study and we are very grateful to the Dean of the College of Nursing in Basrah

Many thanks to the students who participated and helped us in the study.

الإهداء

إلى صاحب السيرة العطرة، والفكر المُستتير؛ فلقد كان له الفضل الأَوَّل في بلوغي التعليم العالي (والدي الحبيب)، أطال الله في عُمره.

إلى من وضعتني على طريق الحياة، وجعلتني رابط الجأش، وراعنتني حتى صرت كبيرًا (أمي الغالية)، طيب الله ثراها.

إلى كل من كان لهم بالغ الأثر في كثير من العقبات والصعاب.

إلى جميع أساتذتي الكرام في كلية التمريض؛ ممن لم يتوانوا في مد يد العون لي

أهدي إليكم بحثي

Background

Burden means something difficult or unpleasant to deal with or worry about. The burdens are economic, psychological and social. The diseases is a family experience, and often family members have as many problems coping with it as does the diagnosed patient. The family goes through different stages of adjusting to the disease. The emotional reactions may include anger, resentment, guilt and adjustment pain, and may or may not lead to the acceptance of the disease. The diseases diagnosis, as well as the subsequent phases of the disease and its treatment, may be a source of intense stress both for the patient and for the family.

Objectives :

First : Determining the burdens of the child in the hospital on the family
Second : Knowing the relationship between the family and the specific demographic characteristics.

Methods :

The study was a descriptive cross-sectional study, the sample in this study consisted of 100 participants who agreed to participate in the study, and data collection. A structured questionnaire was used for the purpose of data collection, and data was collected from 2022 to April 1, 2022, and the questionnaire consists of 28 questions that include Social and demographic information. As for the other part of the questionnaire, it included the first five questions about economic burdens, the next nine points about psychological burdens, and the next five points about social burdens, and the answers to the questions include yes alot, yes alittle, no.

Results :

The results showed, 83% their jobs were affected because their children were hospitalized, 58% showed they were in financial hardship, 51% showed drug prices were too expensive, and 71% showed not all medicines are available in the hospital. And 58% showed that traveling to and from the hospital is a financial problem.

And 88% of the families showed that their psychological state was affected by the presence of the child in the hospital, 96% of the families felt tired, 98% were anxious, 93% were depressed, and there was tension and problems between the parents and 86% of the families showed that their interest in the rest of the children decreased due to their preoccupation with the sick child , and 78% of families stayed away from visiting relatives and friends because of their preoccupation with the sick child, and 37% to 58% became difficult for them to manage their lives due to their preoccupation with the sick child.

Recommendations :

Contacting the families of sick children and conducting interviews with family members, and providing all the needs of the sick child to reduce the family burden

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Chapter one

1.1. Introduction

The diseases is a family experience, and often family members have as many problems coping with it as does the diagnosed patient. The family goes through different stages of adjusting to the disease. The emotional reactions may include anger, resentment, guilt and adjustment pain, and may or may not lead to the acceptance of the disease. The diseases diagnosis, as well as the subsequent phases of the disease and its treatment, may be a source of intense stress both for the patient and for the family. (1) (2)

The hospital appears as a complex institution in which patients and accompanying family members live with the pain and disease requiring an effort to adapt the new situation. In this context, they experience the limits imposed by the organization of the work that can disregard their subjectivities, having to adapt to the rules. (3) (4)

Families caring for children with diseases face many challenges such as, financial and time pressures, concerns over the well being of the child, anxieties over life long care, social reaction and stigma, and aspects of future prognosis that can all lead to stress, maladjustment and psychosocial problems in both individual members and the family unit as a whole. (5)

Research findings suggest that there is considerable upheaval in the lives of parents when children are hospitalized. The parents have been studied from the perspectives of diagnosis of the economic , psychological and social burdens.To parents, however, illness, in any form, is an obstacle to

the development of the child. The implication for them, of course, is that somehow they failed. Physicians need to know something about the personal relationships between parents. He noted that marital discord may have been present before the illness, but the burden of a chronically ill child may just accentuate the difficulties. Similarly, that the quality of the marriage relationship before a diagnosis of disease is an important factor in how well parents adjust to the crisis. If the family structure is already weak, the stress associated with a child's illness may severely tax it. (6)

There is terms of what is involved for a family when their child becomes an outpatient. Transportation may leave parents tired. Finding someone to care for the sick child while parents work is hard. It seems that if fathers are able to participate in the treatment process, families have fewer conflicts around meeting the physical needs of the ill child at home. However, if only the father works outside the home, the burden of all outpatient treatment falls on the mother which may result in the father feeling guilty for his lack of involvement. Family reported anxiety about finances and transportation. In a series of studies, looked at the stress childhood diseases imposed on family members. The financial burden of their child's illness was found to be a very great source of distress. In fact, most families had some type of third-party coverage for medical expenses. However, the nonmedical expenses were particularly worrisome. Advised that informal groups formed by parents themselves without professional leadership may lead to inappropriate sharing of sorrows and may increase the emotional burdens of parents. (6)

1.2. Importance of the study:

This study aims to show that parents appear to need support when they have a hospitalized child.

The importance of using relationships for emotional support is an important and effective method of coping for parents of children with disease.

1.3. Objectives of the study:

- 1- To determine the burdens of hospitalized child on family
- 2- To find out relationship between family and specific demographic characteristics

1.4. Definition of terms:

Theoretical Definition:

- ✓ Burden means something difficult or unpleasant that you have to deal with or worry about.
- ✓ hospitalized child means leaving their home and their caregivers and siblings and an interruption of their daily activities and routines.
- ✓ family of hospitalized child means the family of the sick child in the hospital

Operational Definition :

- ✓ means the worrying, tiring and difficult thing that a person passes through.
- ✓ Hospitalized child means children in hospitals.
- ✓ family of hospitalized child means the family of the sick child in the hospital

Chapter two

2.1. Review of literature

In order to determine the impact the hospitalization of a child has on The parents and the well siblings, the investigator examined the literature Pertaining to how family members were affected by a child's hospitalization. The purpose of this review of literature is to provide background Information on hospitalized and ill children, their parents, and siblings, And the family reaction to such exposure as well as the ameliorative Efforts for all concerned. Parents have to deal not only with their child's disease but also need to follow the prolonged therapy schedule, which could be as distressing as the disease itself . (7)

The care of child with disease complex, challenging and lengthy process . Managing disease can lead to physical, psychosocial, and social problems for the parents . Recently, the researches on family caregiving has expanded rapidly, several studies have reported great burden and stress among family members caring for sick child . (8) (9)

2.2. Diagnosis

Stress, emotional, and adjustment problems have often been seen in Parents of children who are pediatric patients.(10)

2.3. Anxiety and Fears

Much evidence in the literature suggested that parents, especially Mothers, may suffer extreme distress over their child's illness, hospitalization, and surgery . found That children seemed to take their

cues in responding to illness from their Mother's response to illness both in herself and in her child. (11)

2.4. Sources of Emotional Support

Parents appear to need support when they have a hospitalized child. The importance of using relationships for emotional support is an important and effective method of coping for parents of children. When a healthy child becomes ill, family members need to find support and comfort in each other. (12)

2.5. Stress of Hospitalization and Illness

Hospitalization and illness of a child influence family life as a whole no matter what the response or acceptance is. General characteristics, disruption of family life, and finances are herein discussed. That it is not possible to discuss the emotional reactions of a hospitalized child outside the family context. These same researchers noted that "when individuals belong to families, they do not resolve their own problems of stress independently, nor are they immune to effects of stress that may be concentrated in another member of the family". A seriously ill child places tremendous stress on family functioning. The family, however, is a uniquely organized group to carry out stress mediating functions and is in a strategic position to do so. Being chronically ill is vastly different from being acutely ill. It stresses and drains the child and every family member over an indefinite period of time. The wonderful resiliency of the human being is stretched almost beyond endurance especially if there is no prospect of improvement, and even more, if the child deteriorates with the passage of time. (13)

2.6. Disruption of Family Life

Most families felt they were Socially restricted, and over three-fourths reported an adverse effect on Family mobility such as being able to change jobs or residence or to Travel. The longer and more complicated the illness, the greater Is the chance of it affecting the member's role relations. When it did, the major problems Mentioned were inconvenience and restricted mobility of the family because Of the patient's strategy Shifts in roles and household Tasks and responsibilities of family members when a child is ill. That parents require the Older well siblings at home to take on more responsibilities when a child Is hospitalized. That hospitalized child Care has brought about problems for the family. These include traveling Long distances to treatment centers and finding accommodations, transportation, and babysitters or arranging to have the father spend extra time at home. Mothers reported that family life was Considerably disrupted. Siblings were reported to be upset. Even after the ill children had Returned home, the households were not back to normal. An Equal number of subjects, however, said the illness either made the family Relationship more difficult or drew the family closer. There was little, If any, evidence that marital happiness, or strong family solidarity, or Family ties provided any hedge against the disruption in family relations Caused by a member's illness. That families with close ties were brought Closer together and that divided families were torn farther apart by medical crises. (14)

2.7. Economic effect

The fact of the inpatient units provides supply (also for family) medication, materials, equipment and diagnostic tests, without additional costs, since the SUS services cover all costs arising with the treatment, causes some families don't experience economic problems during the time of the child's hospitalization. Another unfavorable factor is the low

income, considered by the family. Sometimes, the reason for the hospitalization of the child, attributed to his lack of policies to achieve a proper treatment at home. Even so, the family has their spending increased during the hospitalization of the child, due to the cost of locomotion, feeding, among others. (15)

2.8. Job of parents

In this period also the family spending increases. Because you dislocated from your house. You don't have access to the things you need. You're not with your fridge with your stove. Who have a low income have everything right, scheduled to spend the month. The husband is not here, he is working these days. So, the money is going out and not coming in. It's a difficult time. There may be a feeling of lost time due to the harsh conditions of the hospital, the loss of social contacts and the interruption of a daily life of work. Taking a child to a physician requires taking time off work and school, arranging alternative child care, driving to the health service, waiting for the appointment, and driving back home. The family problems factor is composed of items concerning problems with children, amount of time family respondent is ill, and father's absenteeism from work. (15)

Chapter three

3.1. Design of the Study:

A descriptive analytic study design to determine the burdens of hospitalized child on family in albasrah teaching hospitals.

The study had started from 1 January 2022 to 1 April Jun 2022.

3.2. Approval Arrangements:

After the project of the study is approved by the College of Nursing, set out of official letters have started. Before the data collection, permissions were obtained to conduct the study. Another approval was obtained from the Basra health Department . Then, permission was obtained from hospitals Itself .

3.3. The Study Setting:

The study carried out in albasrah teaching hospitals (Ibn Ghazwan Teaching Hospital, Al-Fayha Teaching Hospital, and Al-Sadr Teaching Hospital) about their Burden of family of hospitalized child . the number of family of hospitalized child who participated in the study was (100) participant by convenient selection sample .

3.4. The Study Sample:

Non – probability (purposive) sample of (100) family of hospitalized child

3.5. The Study Instrument:

The tool of the study is the questionnaire which has been constructed and design for the purpose of the study after extensive reviews of available literature and related studies. The study instrument consists of two parts. The first part includes participants' demographic characteristics of the study sample, the second part include Burden of family of hospitalized child at Al-Basrah teaching hospitals.

Part I: Demographic Characteristics of the Study Sample

This part related to the socio-demographic characteristics of the family of hospitalized child consists of (9) items , Child's age , sex, sequence of the child in the family, housing environment , the educational level of the parents , father job , mother job , is there kinship relationship between the parents , the economic situation of the family

Part II: burdens

This part include (19) items , This part include (19) items , first five points talk about Economic burdens , The next nine points talk about psychological burdens , The next five points talk about social burdens.

3.6. Data Collecting:

The data is collected through the utilization of a developed questionnaire (Arabic version), the researcher had held the whole responsibility of interviewing the study sample after explanation and clarification the objectives of the study, after taking the initial consent of each family of hospitalized child to participate in the study.

The data collection process has been performed from 1 January 2022 to 1 April 2022.

An approximately (10-20) minutes spent with each mother of hospitalized child to complete the interview and filling of the questionnaire format.

3.7. Validity of the Study Instrument:

The validity has been determined for the evaluation of the tool through a panel of five experts, faculty members from College of Nursing / University of Basrah; who have necessary experience that qualify them to exam the content of the questionnaire. Those experts were request to review the instruments for content, clarity, relevancy, and competence; some items were accepted and others were added after a face-to-face discussion with each expert and subsequently the instrument was represent valid after getting all the comments and recommendations in consideration.

3.8. Statistical Data Analysis:

The data of the present study were analyzed through the use of Statistical Package of Social Sciences (SPSS) version 20. The following statistical data analysis approaches were used in order to analyze and evaluate the results of the study

3.9. Inferential Data Analysis:

Chi-Square – for testing the difference between several categories
Nominal scales.

3.10. Limitation of the study

Lack of cooperation from some participants, and some feel shy as giving more information. The small number of samples per day .

Chapter four

Results

Explanation of functions :

- Mean : average value
- Standard deviation : Most used value
- Point Likert Scale : A measure of behaviors and preferences and depends on the percentage of approval and disapproval
- Reliability Statistics : General congruence of the measurement. A meter has high reliability if it produces similar results under constant conditions.

Reliability Statistics	
Cronbach's Alpha	N of Items
0.709	19

3-Point Likert Scale

Low	Medium	High
1	2	3
1-1.66	2.33-1.67	3-2.34

Table 1 Demographic Characteristics of Sample

Variables	Statistics	F	%
Age of Child	Less Than Six Years	72	72%
	More Than Six Years	48	48%
Gender	Male	52	52%
	Female	48	48%
Father Job	Government Employee	42	42%
	Freelance Work	55	55%
	Retired	1	1%
	Unemployed	2	2%
Mather Job	Government Employee	3	3%
	Freelance Work	0	0%
	Retired	0	0%
	Housewife	97	97%
Housing Environment	Civilized	53	53%
	Countryside	47	47%
Parents Relationship	Yes	50	50%
	No	50	50%
Parents Educational Level	Uneducated	4	4%
	Primary	22	22%
	Average	30	30%
	Middle School	16	16%
	Institute or Above	28	28%
Economic Situation of The Family	Satisfies Perfectly	50	50%
	It's enough	50	50%
	Not enough	0	0%
Sequence of The Child in The Family	1th, 2th	46	46%
	3th,4th	45	45%
	5th,6th	7	7%
	7th,8th, 9th	2	2%

Table (1) about demographic characteristics show that 72 % of participants was less than 6 years and 28 % of participants was more than 6 years , most of them 52 % was male and 48 % was female , father's job 55 % freelance job and 42 % government employee and 1 % retired and 2 % unemployed , mother's job 97 % Housewife and 3 % government employee , Housing Environment 53 % civilized and 47 % countryside , parents relationship 50 % yes and 50% no , parents educational level 50 % Satisfies Perfectly and 28 % Institute or Above and 16 % middle school and 30 % average and 22 % primary and 4 % uneducated , economic situation 50 % Satisfies Perfectly and 50 % enough.,

Table 2 Descriptive Statistics for Economic Burden

Questions		Yes, a lot	Yes, a little	No	Mean	St. Deviation	Rank
Have mom and dad jobs been affected recently?	N	83	12	5	2.78	0.524	Yes, a lot
	%	83%	12%	5%			
Since he was admitted to the hospital, is there financial hardship?	N	57	28	15	2.42	0.741	Yes, a lot
	%	57%	28%	15%			
Are drug prices too expensive?	N	51	43	6	2.45	0.609	Yes, a lot
	%	51%	43%	6%			
Are all medicines available in the hospital?	N	10	19	71	1.39	0.665	No
	%	10%	19%	71%			
	N	10	58	32	1.78	0.613	

Table (2) about economic burdens "ave mom and dad jobs been affected recently?" 83 % yes a lot and 12 % yas alittle and 5 % no , " Since he was admitted to the hospital, is there financial hardship?" 57 % yes a lot and 28 % yes alittle and 15 % no , " Are drug prices too expensive? " 51 % yes a lot and 43 % yes alittle and 6 % no , " Are all medicines available in the hospital?" 10 % yes a lot and 19 % yes alittle and 71 % no , " You think traveling to and from the hospital poses financial problems?" 10 % yes a lot and 52 % yes a lot and 32 % no

Table 3 Descriptive Statistics for Psychological Burdens

Questions	*N * %	Yes, a lot	Yes, a little	No	Mean	St. Dev	Rank
Has the child's presence in the hospital affected the psychological state of the family?	N	88	7	5	2.83	0.493	5
	%	88	7	5			
Do parents feel tired?	N	96	4	0	2.96	0.197	2
	%	96	4	0			
Do parents feel anxious?	N	98	1	1	2.97	0.223	1
	%	98	1	1			
Do parents feel depressed?	N	93	6	1	2.92	0.307	3
	%	93	6	1			
Is there tension in the relationship between family members?	N	27	39	34	1.93	0.782	7
	%	27	39	34			
Are there problems between family members?	N	12	30	58	1.54	0.702	8
	%	12	30	58			
Have they become problems between the parents?	N	10	27	63	1.47	0.674	9
	%	10	27	63			
Has your child's admission to the hospital affected your daily life in any way?	N	38	55	7	2.31	0.598	6
	%	38	55	7			
Is there tension in the parents' jobs because of their preoccupation with it?	N	88	8	4	2.84	0.465	4
	%	88	8	4			
Weighting mean					2.4189		
St. Deviation					0.26230		

Table (3) about psychological burdens " Has the child's presence in the hospital affected the psychological state of the family?" 88 % yes alot , " Do parents feel tired?" 96 % yes alot , "Do parents feel anxious?" 98 % yes alot , " Do parents feel depressed?" 93% yes alot , " Is there tension in the relationship between family members?" 27 % yes alot and 39 % yes alittle and 34 % no , " Are there problems between family members?" 12 % yes alot and 30 % yes alittle and 58 % no , " Have they become problems between the parents?" 10 % yes alot and 27 % yes alittle and 63 % no , " your child's admission to the hospital affected your daily life in any way?" 38 % yes alot and 55 % yes alittle and 7 % no , Is there tension in the parents' jobs because of their preoccupation with it ? " 88 % yes alot and 8 % yes alittle and 4 % no.

N = Number , % = Ratio

Table 4 Descriptive Statistics for Social Burdens

St. Deviation					0.36974		
% no.							
Questions		Yes, a lot	Yes, a little	No	Mean	St. Dev	Rank
Did he lose interest in the remaining children because he was in the hospital?	N	86	11	3	2.83	0.451	1
	%	86	11	3			
Did the parents stay away from relatives because of their preoccupation with him?	N	78	19	3	2.75	0.5	3
	%	78	19	3			
Did the parents stay away from friends because of their preoccupation with him?	N	79	18	3	2.76	0.4952	2
	%	79	18	3			
Has it become difficult to manage your life properly because of your preoccupation with it?	N	37	58	5	2.32	0.566	4
	%	37	58	5			
Has the child's presence in the hospital affected the family's annual project schedule?	N	18	40	42	1.76	0.74	5
	%	18	40	42			
Weighting mean					2.4840		

Table (4) about social burdens " Did he lose interest in the remaining children because he was in the hospital? " 86 % yes a lot , "Did the parents stay away from relatives because of their preoccupation with him? " 78 % yes a lot , " Did the parents stay away from friends because of their preoccupation with him?" 79 % yes a lot , " Has it become difficult to manage your life properly because of your preoccupation with it?" 37 % yes a lot and 58 % yes alittle and 5 % no , " Has the child's presence in the hospital affected the family's annual project schedule?" 18 % yes a lot and 40 % yes alittle and 42

Table 5 Overall Burdens

Statistics	N	%	Mean	Result
No	1	1%	2.3689	High
Yes, a little	40	40%		
Yes, a lot	59	59%		
Total	100	100%		

Table 6 Relationship Between Family Burdens and Demographic Characteristics

Variables	Statistics	Mean of Burdens	P-value	Result
Age of Child	Less Than Six Years	2.3509	0.204	Insignificant
	More Than Six Years	2.4154		
Gender	Male	2.3947	0.240	Insignificant
	Female	2.3410		
Father Job	Government Employee	2.3120	0.137	Insignificant
	Freelance Work	2.4057		
	Retired	2.6316		
	Unemployed	2.4211		
Mather Job	Government Employee	2.2982	0.587	Insignificant
	Freelance Work	0		
	Retired	0		
	Housewife	2.3711		
Housing Environment	Civilized	2.3923	0.279	Insignificant
	Countryside	2.3427		
Parents Relationship	Yes	2.4095	0.075	Insignificant
	No	2.3284		
Parents Educational Level	Uneducated	2.6053	0.117	Insignificant
	Primary	2.4234		
	Average	2.3175		
	Middle School	2.3454		
	Institute or Above	2.3609		
Economic Situation of The Family	Satisfies Perfectly	2.3705	0.945	significant
	It's enough	2.3674		
	Not enough	0		
Sequence of The Child in The Family	1 th , 2 th	2.2986	0.001	significant
	3 th , 4 th	2.4000		
	5 th , 6 th	2.5038		
	7 th , 8 th , 9 th	2.8158		

Chapter five

Discussion of the Results

Part 1: Discussion of the Socio-Demographic Characteristics for the Study Sample:

In the first table, the average age of children in the hospital was 72% less than 6 years, 28% more than 6 years, and their sex was 52% males and 48% females. The children's families' businesses were mostly government employees and self-employed, while the mothers were mostly government employees and housewives. The parents' relationship with each other was 50% kinship between them and 50% no kinship relationship between them, the educational level of the parents was 4% uneducated, 22% primary, 30% middle, 16% middle school, 28% college or higher, and the economic level of families 50% were completely satisfied and 50% met, and the order of the children in the family was 46% the first or second child, 45% the third or fourth child, 7% the fifth or sixth child, and 2% the seventh, eighth or ninth child.

Part 2 : In the second table, 83% of the families said that their jobs were affected because their children were admitted to the hospital, 58% said they had financial hardship, 51% said the medicine prices were too expensive, 71% said that not all medicines were available in the hospital, and 58% said that traveling from And to the hospital is a financial problem.

In the third table, 88% of the families said that their psychological state was affected by the presence of the child in the hospital, 96% of the families felt tired, 98% felt anxious, and 93% were feeling depressed, and there was tension and problems between parents and family members.

Esc Anna Nery 2014 ,Where the results showed that psychological burdens are the most apparent burdens on the samples

In the fourth table, 86% of the families said that their interest in the rest of the children decreased due to their preoccupation with the sick child, 78% of the families stayed away from visiting relatives and friends because of their preoccupation with the sick child, and 37% to 58% became difficult for them to manage their lives due to their preoccupation with the sick child.

As in search of Nicole Yantzia, *, MARK W. Rosenberga, Sharon O. Burkeb, Margaret B. Harrisonb, C where the most social burden are social

Part 3 :Regarding the association between (all demographic characteristics) and burden showed insignificant relationship except regarding the association between sequence of child in family and burden showed insignificant relationship and economic situation of the family

And results showed that there is a link between the number of children in the family with the economic, psychological and social burdens.

Most families would have 3-5 children that could be socially involved in the extra burden on mothers. The activities and vacations of parents will be affected.

There is a correlation between the monthly income of the participants and the level of economic, psychological and social burdens, especially the psychological burden. More than half of the families have enough monthly income to some extent, and the majority of mothers are housewives. Caring for children with medical needs can be overwhelming for some families. Social isolation affecting parents All of these can lead to increased stress on family members.

Chapter six

Conclusions:

1. Based on the result obtained from the data analysis, the results of the study show various changes in the burdens of the child's family in the hospital, and it was concluded that the main predicament for the families of the child in the hospital is the burden on the child's family, whether it is economic, psychological or social.
2. The review of literature also indicates that hospitalization frequently appears to affect the family system causing more disruption in some families and family members than in others.
3. A recurring theme points out that siblings are an important component of the family system and should not be neglected when studying the effects of the child's hospitalization on the family. A vital step in that effort seems to be encouraging siblings to share their feelings and ideas.

Recommendations:

1. Well siblings were interviewed either in their home or a mutually agreed upon place set by the parents or the interviewer.
2. Parents were contacted at home or at the hospital and asked to complete the parent Questionnaire and return it by mail. For some parents who could not read, the interviewer would read the questions and mark the answers.
3. Additional investigation into the effect a child's hospitalization has on all family members. In view of the very limited number of well-

designed studies dealing with how the well siblings actually perceive the hospitalization, further research is needed to provide understanding in this area.

4. Replication studies are also necessary. More research utilizing different ages of children, different sample groups, different severity in illnesses of the hospitalized children, and other testing instruments would also give additional insights into how the well siblings perceive the hospitalization of a brother or sister.

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Appendix :

1. Child's age	less than six years <input type="checkbox"/>		more than six years <input type="checkbox"/>		
2. Sex	Male <input type="checkbox"/>		Female <input type="checkbox"/>		
3. The sequence of the child in the family					
4. Housing environment	countryside <input type="checkbox"/>		civilized region <input type="checkbox"/>		
5. The educational level of the parents	uneducated <input type="checkbox"/>	Primary <input type="checkbox"/>	average <input type="checkbox"/>	middle school <input type="checkbox"/>	Institute or college or above <input type="checkbox"/>
6. father's job	government employee <input type="checkbox"/>	freelance work <input type="checkbox"/>		Retired <input type="checkbox"/>	unemployed <input type="checkbox"/>
7. Mother's job	government employee <input type="checkbox"/>	freelance work <input type="checkbox"/>		retired <input type="checkbox"/>	housewife <input type="checkbox"/>
8. Is there a kinship relationship between the parents?	Yes <input type="checkbox"/>		No <input type="checkbox"/>		
9. The economic situation of the family	satisfies perfectly <input type="checkbox"/>	It's enough <input type="checkbox"/>		Not enough <input type="checkbox"/>	

economic burdens:

10. Have mom and dad jobs been affected recently?	Yes a lot <input type="checkbox"/>	Yes a little <input type="checkbox"/>	No <input type="checkbox"/>
11. Since he was admitted to the hospital, is there financial hardship?	Yes a lot <input type="checkbox"/>	Yes a little <input type="checkbox"/>	No <input type="checkbox"/>
12. Are drug prices too expensive?	Yes a lot <input type="checkbox"/>	Yes a little <input type="checkbox"/>	No <input type="checkbox"/>
13. Are all medicines available in the hospital?	Yes a lot <input type="checkbox"/>	Yes a little <input type="checkbox"/>	No <input type="checkbox"/>
14. You think traveling to and from the hospital poses financial problems?	Yes a lot <input type="checkbox"/>	Yes a little <input type="checkbox"/>	No <input type="checkbox"/>

- **psychological burdens:**

15.Has the child's presence in the hospital affected the psychological state of the family ?	Yes a lot <input type="checkbox"/>	Yes a little <input type="checkbox"/>	No <input type="checkbox"/>
16.Do parents feel tired ?	Yes a lot <input type="checkbox"/>	Yes a little <input type="checkbox"/>	No <input type="checkbox"/>
17.Do parents feel anxious?	Yes a lot <input type="checkbox"/>	Yes a little <input type="checkbox"/>	No <input type="checkbox"/>
18.Do parents feel depressed?	Yes a lot <input type="checkbox"/>	Yes a little <input type="checkbox"/>	No <input type="checkbox"/>
19.Is there tension in the relationship between family members ?	Yes a lot <input type="checkbox"/>	Yes a little <input type="checkbox"/>	No <input type="checkbox"/>
20.Are there problems between family members?	Yes a lot <input type="checkbox"/>	Yes a little <input type="checkbox"/>	No <input type="checkbox"/>
21.Have they become problems between the parents?	Yes a lot <input type="checkbox"/>	Yes a little <input type="checkbox"/>	No <input type="checkbox"/>
22.Has your child's admission to the hospital affected your daily life in any way ?	Yes a lot <input type="checkbox"/>	Yes a little <input type="checkbox"/>	No <input type="checkbox"/>
23.Is there tension in the parents' jobs because of their preoccupation with it ?	Yes a lot <input type="checkbox"/>	Yes a little <input type="checkbox"/>	No <input type="checkbox"/>

- **social burdens:**

<p>24. Did he lose interest in the remaining children because he was in the hospital?</p>	<p>Yes a lot <input type="checkbox"/></p>	<p>Yes a little <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>25. Did the parents stay away from relatives because of their preoccupation with him ?</p>	<p>Yes a lot <input type="checkbox"/></p>	<p>Yes a little <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>26. Did the parents stay away from friends because of their preoccupation with him ?</p>	<p>Yes a lot <input type="checkbox"/></p>	<p>Yes a little <input type="checkbox"/></p>	<p><input type="checkbox"/> No</p>
<p>27. Has it become difficult to manage your life properly because of your preoccupation with it?</p>	<p>Yes a lot <input type="checkbox"/></p>	<p>Yes a little <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>28. Has the child's presence in the hospital affected the family's annual project schedule?</p>	<p>Yes a lot <input type="checkbox"/></p>	<p>Yes a little <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>

1. عمر الطفل		أقل من 6 سنوات <input type="checkbox"/>		أكثر من 6 سنوات <input type="checkbox"/>	
2. الجنس		ذكر <input type="checkbox"/>		أنثى <input type="checkbox"/>	
3. تسلسل الطفل في الأسرة					
4. بيئة السكن		ريف <input type="checkbox"/>		حضر <input type="checkbox"/>	
5. المستوى التعليمي للأبوين		غير متعلم <input type="checkbox"/>		ابتدائية <input type="checkbox"/>	
		متوسطة <input type="checkbox"/>		اعدادية <input type="checkbox"/>	
		معهد او كلية فما فوق <input type="checkbox"/>			
6. مهنة الاب		موظف حكومي <input type="checkbox"/>		أعمال حره <input type="checkbox"/>	
		متقاعد <input type="checkbox"/>		عاطل عن العمل <input type="checkbox"/>	
7. مهنة الام		موظف حكومي <input type="checkbox"/>		أعمال حره <input type="checkbox"/>	
		متقاعد <input type="checkbox"/>		ربة منزل <input type="checkbox"/>	
8. هل توجد صلة قرابة بين الابوين		نعم <input type="checkbox"/>		لا <input type="checkbox"/>	
9. الحالة الاقتصادية للعائلة		يفي تماما <input type="checkbox"/>		يفي <input type="checkbox"/>	
		لا يفي <input type="checkbox"/>			

• الاعباءالاقتصادية :

كلا <input type="checkbox"/>	نعم قليلا <input type="checkbox"/>	<input type="checkbox"/>	10. هل تأثرت وظائف الام والاب مؤخرا ؟
كلا <input type="checkbox"/>	نعم قليلا <input type="checkbox"/>	<input type="checkbox"/>	11. منذ ان دخل المستشفى، هل هناك ضائقة مالية؟
كلا <input type="checkbox"/>	نعم قليلا <input type="checkbox"/>	<input type="checkbox"/>	12. هل اسعار الأدوية مكلفة للغاية؟
كلا <input type="checkbox"/>	نعم قليلا <input type="checkbox"/>	<input type="checkbox"/>	13. هل تتوفر كل الأدوية في المستشفى؟
كلا <input type="checkbox"/>	نعم قليلا <input type="checkbox"/>	<input type="checkbox"/>	14. تعتقد أن السفر من وإلى المستشفى يمثل مشاكل مالية؟

• الأعباء النفسية:

كلا <input type="checkbox"/>	نعم قليلا <input type="checkbox"/>	<input type="checkbox"/>	نعم كثيرا	15. هل أثر وجود الطفل في المستشفى على الحالة النفسية للعائلة؟
كلا <input type="checkbox"/>	نعم قليلا <input type="checkbox"/>	<input type="checkbox"/>	نعم كثيرا	16. هل يشعر الوالدين بالتعب؟
كلا <input type="checkbox"/>	نعم قليلا <input type="checkbox"/>	<input type="checkbox"/>	نعم كثيرا	17. هل يشعر الوالدين بالقلق؟
كلا <input type="checkbox"/>	نعم قليلا <input type="checkbox"/>	<input type="checkbox"/>	نعم كثيرا	18. هل يشعر الوالدين باكتئاب؟
كلا <input type="checkbox"/>	نعم قليلا <input type="checkbox"/>	<input type="checkbox"/>	نعم كثيرا	19. هل اصبحت هناك توتر بالعلاقة بين افراد العائلة؟
كلا <input type="checkbox"/>	نعم قليلا <input type="checkbox"/>	<input type="checkbox"/>	نعم كثيرا	20. هل اصبحت مشاكل بين افراد الأسرة؟
كلا <input type="checkbox"/>	نعم قليلا <input type="checkbox"/>	<input type="checkbox"/>	نعم كثيرا	21. هل اصبحت مشاكل بين الوالدين؟
كلا <input type="checkbox"/>	نعم قليلا <input type="checkbox"/>	<input type="checkbox"/>	نعم كثيرا	22. هل أثر دخول الطفل الخاص بك للمستشفى في حياتك اليومية بأي طريقة؟
كلا <input type="checkbox"/>	نعم قليلا <input type="checkbox"/>	<input type="checkbox"/>	نعم كثيرا	23. هل اصبح هناك توتر في وظائف الوالدين بسبب انشغالهم به؟

• الأعباء الاجتماعية :

24. هل قل اهتمامكم بالأطفال الباقين بسبب وجوده في المستشفى؟	نعم كثيرا <input type="checkbox"/>	<input type="checkbox"/>	نعم قليلا <input type="checkbox"/>	كلا <input type="checkbox"/>
25. هل ابتعد الوالدين عن الأقارب بسبب انشغالهم به؟	نعم كثيرا <input type="checkbox"/>	<input type="checkbox"/>	نعم قليلا <input type="checkbox"/>	كلا <input type="checkbox"/>
26. هل ابتعد الوالدين عن الأصدقاء بسبب انشغالهم به؟	نعم كثيرا <input type="checkbox"/>	<input type="checkbox"/>	نعم قليلا <input type="checkbox"/>	كلا <input type="checkbox"/>
27. هل اصبح من الصعوبة إدارة حياتكم بشكل صحيح بسبب انشغالكم به؟	نعم كثيرا <input type="checkbox"/>	<input type="checkbox"/>	نعم قليلا <input type="checkbox"/>	كلا <input type="checkbox"/>
28. هل أثر وجود الطفل في المستشفى على جدول مشاريع العائلة السنوي؟	نعم كثيرا <input type="checkbox"/>	<input type="checkbox"/>	نعم قليلا <input type="checkbox"/>	كلا <input type="checkbox"/>

ت	الاسم	اللقب العلمي	الشهادة	الاختصاص	مكان العمل
1	سجاد سالم	استاذ	بورء	طب اسرة	كلية التمريض
2	عءء الكرعم سلءان ءضفر	استاذ مساعء	ماءسفر	فرمرفء بالءفن	كلفة الفرمرفء
٣	سندس باقر ءاووء	مءرس	ءكفرراه	فرمرفء الام والولفء	كلفة الفرمرفء
4	افكار فاضل	مءرس	ماءسفر	فرمرفء نفسة وعقلفة	كلفة الفرمرفء
5	سجاد عبء الصاءق	م.باءء	ءبلوم عالف طب اطفال	طب اطفال	كلفة الفرمرفء

النتائج

النتائج أظهرت 83% من العائلات أن وظائفهم تأثرت بسبب دخول أطفالهم إلى المستشفى ، و 58% يعانون من ضائقة مالية ، و 51% أسعار الأدوية باهظة الثمن ، و 71% ان لا تتوفر جميع الأدوية في المستشفى. و 58% أن السفر من وإلى المستشفى مشكلة مالية. 88% من العائلات أظهرت إن حالتهم النفسية تأثرت بوجود الطفل في المستشفى ، 96% من العائلات شعروا بالتعب ، 98% قلقون ، 93% كانوا مكتئبين ، وكان هناك توتر ومشاكل بين الوالدين و 86% من العائلات أن اهتمامهم بباقي الأطفال انخفض بسبب انشغالهم بالطفل المريض ، و 78% من العائلات ابتعدوا عن زيارة الأقارب والأصدقاء بسبب انشغالهم بالطفل المريض ، و 37% إلى 58% أصبحوا من الصعب عليهم إدارة حياتهم بسبب انشغالهم بالطفل المريض.

التوصيات

الاتصال مع عوائل الاطفال المرضى و إجراء المقابلات مع افراد العائلة ، وتوفير جميع الاحتياجات للطفل المريض للتقليل من اعباء العائلة

الخلاصة

المقدمة

العبء يعني شيئاً صعباً أو مزعجاً عليك التعامل معه أو القلق بشأنه. الأمراض هي تجربة عائلية ، وغالباً ما يواجه أفراد الأسرة العديد من المشاكل في التكيف معها مثل المريض الذي تم تشخيصه. تمر الأسرة بمراحل مختلفة من التكيف مع المرض. قد تشمل ردود الفعل العاطفية الغضب والاستياء والشعور بالذنب وآلام التكيف ، وقد تؤدي أو لا تؤدي إلى قبول المرض. قد يكون تشخيص الأمراض ، وكذلك المراحل اللاحقة من المرض وعلاجه ، مصدر ضغط شديد لكل من المريض والأسرة.

الأهداف

- أولاً • تحديد أعباء الطفل في المستشفى على الأسرة.
- ثانياً • معرفة العلاقة بين الأسرة والخصائص الديموغرافية المحددة.

الطريقة

كانت الدراسة عبارة عن دراسة مستعرضة وصفية ، تتكون العينة في هذه الدراسة من 100 مشارك والذين وافقوا على المشاركة في الدراسة ، وجمع البيانات تم استخدام استبيان منظم لغرض جمع البيانات ، وتم جمع البيانات من 2022 الى 1 ابريل 2022 ، ويتكون الاستبيان من 28 سؤال تشمل المعلومات الاجتماعية والديموغرافية ، اما الجزء الآخر من الاستبيان كان يتضمن اول خمس اسئلة حول الابعاء الاقتصادية ، والنقاط التسعة التي تليه حول الابعاء النفسية ، والنقاط الخمسة التي تليه حول الابعاء الاجتماعية ، وتتضمن اجابات الاسئلة صح ، خطأ ، غير متأكد .



وزارة التعليم العالي والبحث العلمي
جامعة البصرة
كلية التمريض



الاعباء التي تقع على عاتق اسر الاطفال المرضى في مستشفيات البصرة التعليمية

مشروع بحثي مقدم الى مجلس كلية التمريض
في جامعة البصرة استيفاء جزئي لمتطلبات درجة البكالوريوس
في علوم التمريض

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