Factors Influencing Sleep for Parents of Critically Ill Hospitalized Children: A Qualitative Analysis

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Key Concepts/Context

Given the shift in pediatric hospitals toward family-centered care, many parents spend the night with their hospitalized child. For parents who are already challenged by their child’s health condition, sleep is important to sustain their physical and emotional health and their strength to cope with the illness event, support their child and other family members, participate in decision-making, and maintain relationships. A number of factors may affect quality and quantity of sleep for parents while their child is hospitalized, but these remain unexplored in the literature.

This study took place in Canada.

Methods

One hundred and eighteen parents of 91 children recruited during their child’s pediatric intensive care unit stay responded in writing to open-ended questions assessing their experiences with sleep and eliciting ideas for strategies to promote sleep to be used by parents and provided by hospital staff. Patterns and concepts were coded and organized into themes using a qualitative descriptive approach.

The questions appeared on two pages in the same order for all participants:

1. It is often difficult to sleep whilst your child is in hospital. What things got in the way of sleeping well for you?
2. What things helped you get sleep whilst your child was in hospital?
3. What things would you suggest other parents should do to help them sleep better when their child is in the hospital?
4. What could the staff or the hospital do to help you sleep better when your child is in the hospital?

Findings

Seven themes emerged related to influences on and strategies to improve sleep: (1) the child’s condition, (2) being at the bedside or not, (3) difficult thoughts and feelings, (4) changes to usual sleep,(5) caring for self and family,(6) the hospital environment, and (7) access to sleep locations. Parents described multiple, often competing, demands that affected their ability to achieve sleep, regardless of location. Many more factors that influenced sleep were described than strategies to improve sleep, highlighting the need for nurses to explore with parents the unique barriers and facilitators to sleep they encounter and develop and rigorously test interventions to improve sleep.

Limitations

The study did not collect any demographic data on parents who did not participate in the study, so the authors were unable to determine if parents who refused were different than those who participated. Written responses may have limited the information parents provided; more detailed responses might have been received in a face-to-face interview where probes could elicit further information. However, since the study collected written responses sealed in envelopes without any identifying information, parents might have answered more openly and honestly in writing. Further, given the cognitive and emotional demands of having a child in the hospital, parents might have found it difficult to respond to the questions and been less able to suggest strategies for other parents or healthcare professionals.

Design Implications

Parents made a variety of suggestions as they relate to the physical environment such as reduce sound, reduce light, monitor use of shared spaces, and provide sleep supplies and comfortable beds. Designers should read this article to explore innovative ways to solve some of the factors affecting the parents’ successful sleep (and likely others who stay overnight with their loved ones).

As the authors noted, “...the tension between preservation of an environment for sleep embedded within an environment of high technology and acute care merits further examination.” The reviewer believes some of the solutions can be found in design of the physical environment.