



الجامعة السورية الخاصة
كلية الطب البشري

Communication Skills in Pediatrics

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What we'll talk about

- **Developmental stages**
- **What parents like**
- **Nonverbal communications**
- **Tools, toys and tricks**

Developmental Stages



Birth to 6 months



Infant is learning to regard the environment, especially faces.
No stranger anxiety until late in this phase.

Nonverbal communication is key

Facial expressions

Tone of voice



What Are the Signs of Infant Constipation?

Parents warm to medical
personnel who treat their children
as babies, not patients.
Make faces and talk baby talk!



6 – 18 months

- Stranger anxiety! Try to keep the child with a caregiver.
- Communication is still mostly nonverbal but talk to the child anyway.
- Development in motor skills is often faster than communication skills.
- Use stimulating objects to catch attention for distraction or assessment.
- Use toe to head approach.



18 months – 3 years

- More explorative but still shelter with parents.
- Will understand more words than they can say.
- Constantly moving.
- Play and curiosity are big motivators.
- Use your tools and toys.
- Toe to head approach.
- Try not to hold them down but don't wait forever for cooperation with exam.





3 to 6 years

- Usually a great age to work with.
- Learning to explore and be independent. Very curious!
- Can be very talkative and verbally enthusiastic.
- Are starting to understand about being hurt or sick and that people will try to help them.
- Are starting to understand the concept of “the future”.
- May misinterpret words they hear.
- Have “magical thinking”.
- Worry about being in trouble.
- Like to have choices.



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3 to 6 years

“Would you like your IV in this arm or that arm?”

NOT

“Where would you like your IV?”



Peripheral intravenous (IV) catheter insertion for
neonates

6 – 12 years

- Fear failure, inferiority. Want to be treated as “big kids” but may feel “baby” insecurities.
- Want to be accepted and blend in
- Body-conscious and modest
- May feel pain intensely
- Feel comfort with touching

6 – 12 years

- Question the child directly and in simple but not babyish terms.
- Use common interests to build trust.
- Sports
- TV and movie characters
- Treat them with respect.
- Offer limited choices.



6 – 12 years

- Don't embarrass them in front of peers.
- Don't tell them not to cry!
- OK to touch in comfort.
- Respect their modesty.



12 years and up

- Identity and peer relationships are the key issues at this age.
- Body image and future deformities and dysfunctions are very important.
- Reactions can be under- or over-exaggerated.
- Regressive behavior is common.

12 years and up

- Respect modesty and privacy.
- Avoid embarrassing the child.
- Direct yourself to the child as you might to an adult, with an adjustment in language.
- Make eye contact but don't force it unless you need to make a point.

12 years and up

- Touch cautiously until you're sure touch is welcome.
- Don't lie. Don't be condescending.
- Don't try to "be one of the group" unless you are. These guys can spot fakes a mile away.

Cautions

- Don't ever intentionally lie to a child patient. If you're caught, it blows the credibility of all medical personnel.
- Always tell a child if something is going to hurt!
- Explain procedures in simple terms but not until it's time to do it. Anticipation is often worse than the procedure.



What parents like



جنتوني

The hardest part of taking care of kids is usually dealing with their parents and guardians.

Whenever you're caring for a child, you must consider the family members to be your patients too.

جنتوني شو إعمل بحالي

What parents like and want

- Treat children as people.
- Learn and use their preferred name.
- At least get the sex right!
- Keep children as physically and emotionally comfortable as possible.
- Basic and advanced pain management is important.
- Try to relieve fear and anxiety as early and as much as possible.



جنتوني شو إعمل بحالي

What parents like and want

Treat every child as if they were the most special, beautiful, smartest child in the world. A compliment to a child is a complement to their parents.



What parents like and want

- Listen to what the child has to say, even if it sounds like nonsense.
- Every child has something you should honestly be able to complement them on, even if it's just that they have such good lungs for them to be able to scream so loudly...



Rule of Smiling

- If you can make the child smile first, the parents' smiles will follow soon after.



- A smile is as calming for everyone on scene as a collective deep breath.

Nonverbal communications



What your face and body say are every bit as important as what your mouth says.



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Nonverbal communications

- Get to the child's eye level.
- Try not to make the child look at you at an awkward angle.
- Make eye contact but don't hold it in a challenging manner.
- Use your eyebrows to exaggerate your expressions, especially for babies through elementary-age kids.

Nonverbal communications

- Use a soft voice with a moderate pace and interrupt only when necessary.
- Use noises like “um-hmm” and “I see” to encourage children to talk.
- For preverbal children, use a happy voice and bring the tone up at the ends of sentences (inviting a response from the patient).

Nonverbal communications

- Infants less than about 6 months can be touched anywhere first, but go to the most painful place last.
- For children with stranger anxiety, offer your hand or a tool for them to touch and explore first. Go for their heads and trunks and any painful parts last.

Nonverbal communications

- Touch school-agers in a playful fashion. “High five” is often a good way to start.
- Tickling is good in young school-agers but don’t do it until you’ve gotten your assessment.
- Once a school-ager trusts your touch, try to maintain some contact while getting info from the parent.

Nonverbal communications

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Tools, Toys and Tricks

