hospitalization. If the behaviors, especially the demand for attention, are dealt with in a supportive manner, most children are able to relinquish them and assume prior levels of functioning.

Nurses should also prepare parents for the reactions of siblings—particularly anger, jealousy, and resentment. Older siblings may deny such reactions because they provoke feelings of guilt. However, everyone needs outlets for emotions, and the repressed feelings may surface as problems in school or with age mates, as psychosomatic illnesses, or in delinquent behavior.

Probably one of the most neglected areas of communication involves giving information to siblings. Frequently, age becomes the only factor that leads to an awareness of this problem because older children may begin to ask questions or request explanations. Even in this situation, however, the information may be seriously inadequate. Children in every age group deserve some explanation of the sibling's illness or hospitalization. In addition, nurses can minimize a sibling's fear of also getting sick or having caused the illness.

Encouraging Parent Participation

Preventing or minimizing separation is a key nursing goal with the child who is hospitalized, but maintaining parent–child contact is also beneficial for the family. One of the best approaches is encouraging parents to stay with their child and to participate in the care whenever possible. Although some health facilities provide special accommodations for parents, the concept of rooming in can be instituted anywhere. The first requirement is the staff's positive attitude toward parents. A negative attitude toward parent participation can create barriers to collaborative working relationships.

When hospital staff genuinely appreciates the importance of continued parent–child attachment, they foster an environment that encourages parents to stay. When parents are included in the care planning and understand that they are a contributing factor to the child's recovery, they are more inclined to remain with their child and have more emotional reserves to support themselves and the child through the crisis. An empowerment model of helping allows the nurse to focus on parents' strengths and seek ways to promote