security to most children.

## Involve the Child

Involving children helps to gain their cooperation. Permitting choices gives them some measure of control. However, a choice is given only in situations in which one is available. Asking children, "Do you want to take your medicine now?" leads them to believe they have an option and provides them the opportunity to legitimately refuse or delay the medication. This places the nurse in an awkward, if not impossible, position. It is much better to state firmly, "It's time to drink your medicine now." Children usually like to make choices, but the choice must be one that they do indeed have (e.g., "It's time for your medicine. Do you want to drink it plain or with a little water?").

Many children respond to tactics that appeal to their maturity or courage. This also gives them a sense of participation and achievement. For example, preschool children will be proud that they can hold the dressing during the procedure or remove the tape. The same is true for school-age children, who often cooperate with minimal resistance.

## **Provide Distraction**

Distraction is a powerful coping strategy during painful procedures (Uman, Chambers, McGrath, et al, 2006). It is accomplished by focusing the child's attention on something other than the procedure. Singing favorite songs, listening to music with a headset, counting aloud, or blowing bubbles to "blow the hurt away" are effective techniques. (For other nonpharmacologic interventions, see Chapter 5.)

## **Nursing Tip**

Help the child select and practice a coping technique before the procedure. Consider having the parent or some other supportive person (such as a child life specialist) "coach" the child in learning and using the coping skill.

## Allow Expression of Feelings

The child should be allowed to express feelings of anger, anxiety,