

Study finds videoconferencing with family, friends lowers stress for pediatric patients

June 30 2014

To ease isolation during extended hospitalizations, UC Davis Children's Hospital offers secure videoconferencing for patients and families. While anecdotal accounts have suggested the Family-Link program enhances quality of life during long hospital stays, clinicians wondered if the technology also offered clinical benefits.

To answer that, a team led by UC Davis professor James Marcin studied 367 [children](#) who were hospitalized for at least four days. They found that access to Family-Link significantly reduced patient stress. The study was published in the journal *Pediatrics*.

As the popularity of applications like Skype and FaceTime have increased, so has the number of patients interested in using these applications to communicate with family and friends. UC Davis Children's Hospital pioneered the Family-Link program, which provides patients with laptops, webcams and secure internet connections.

"We have many children who transfer from other hospitals and even other states," said Nikki Yang, first author on the study. "Because they are too far away for family and friends to visit, they often ask for laptops so they can teleconference. That was the origin of Family-Link."

While the program began as a service to improve long hospital stays, clinicians wanted to know if it also provided clinical benefits. Earlier studies had shown that in-person family visits can decrease stress and even improve recovery times. But could virtual visits have a similar

effect?

To understand Family-Link's impact on [anxiety levels](#), the team studied 367 children, 232 who took advantage of the teleconferencing service and 135 who did not. They used the Parent-Guardian Stress Survey to assess the children's anxiety levels, both at admission and discharge.

The survey included four question groups centered on each child's behavior and emotions; staff communication, sight and sounds and the child's appearance. Parents/guardians were asked whether the child exhibited a variety of behaviors, such as being demanding, frightened, angry or confused. The survey also included questions about the impact of monitoring equipment on [stress levels](#) and the staff's ability to communicate important details about the child's care.

Overall, children who used Family-Link experienced a greater reduction in stress than children who did not use Family-Link. Oddly, this effect was even more pronounced for children who lived closer to the hospital and had shorter hospitalizations. This group experienced a 37 percent stress reduction when using Family-Link.

In addition to the stress survey, families were also asked about the quality of the video, audio and overall Family-Link experience. The responses were uniformly positive with the majority of parents rating the program excellent or good.

"This study shows that we have another tool to help children during their hospital stays," said Yang. "The improvement in stress scores shows that Family-Link is really helping many children and might possibly be improving outcomes."

Provided by UC Davis

Citation: Study finds videoconferencing with family, friends lowers stress for pediatric patients (2014, June 30) retrieved 11 May 2024 from

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