THE MEANINGS OF HOSPITALIZATION PORTRAYED IN CHILDREN'S LITERATURE

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A brief review on previous studies.

Children's books are widely used in Health Education Programs and in Pre-Surgery Programs. They are highly useful to help nurses, psychologists and therapists in their efforts for patients' adhesion to medical treatments, routine and interventions. They commonly help teachers accomplish classes at hospital schools. When this literature is used in non-heavily directed practices, it is usually enjoyable and pleasant, with a relevant contribution against stress during hospitalization.

Regarding the theme, many kinds of books, related then to a large range of different issues and subjects can be suitable to those tasks. Nevertheless, some specific books, especially the ones that tell stories on a child's journey in to the hospital, or on a child's struggle with her\his illness are better chosen by health professionals dealing with young patients. These were, thus, the books that interested for the current research.

Several researches have been carried out to analyze children's books that deal with disease and health hazards in a critical manner (BYRNE & NITZE, 2000; ROBINSON, 2002; TURNER, 2006; JONES et al., 2000; MANNA, 1984). However, only few focus on books that are specifically on the hospital and pediatric hospitalization. The research by Manworren and Woodring (1998) is a rare exception. It actually investigates and evaluates the correct concept of medical and hospital procedures and routines as given in 23 books written between 1965 and 1986. Searching for content inaccuracies, the authors' ideas were foregrounded on the hypothesis that books are as useful to Health Education Programs as they are coherent to the real thing they describe.

This type of research, focused on the implicit or explicit instructional usage of children's literature, also investigates the compatibility of illustrated narratives with the mentality of young readers. In fact, at each stage of their cognitive development, children elaborate different logical hypothesis to explain the reasons for the need of certain treatments and on the chances of healing

(BURBACH & PETERSON, 1986; REDPATH & ROGERS, 1984; KALISH, 1996; SOLOMON & CASSIMATIS, 1999).

Keeping in mind the above-mentioned research works, current investigation and results aimed at widening empirical studies on children's literature that described hospitalization and illness. Further, current research deepened knowledge within the field of studies on representations of illnesses and health in children's literature.

The theoretical frame of the present research

Differently to most research, current investigation made use of the theoretical and methodological presuppositions in its appreciation and evaluation of the material foregrounding the analyses in a way less concerned with the factual truths and more concerned with the way a phenomenon appeared to be.

Thus, the analysis was based on the principle that the manner a given phenomenon is represented, for instance, in children's books tell us about the manner adult authors, illustrators and, consequently, the society they belong to, think. But this telling is given beyond the words or behind the pictures.

This way of understanding a given phenomenon is called Social Representations. It is not immediately visible or obvious at sight since it is contained in the silences and between the lines of discourses in literary narratives. The extraction of their underlying subject matter require the use of Discourse Analysis based, in current research, on the work of the French social linguists Dominique Manguenou and Patrick Charedeau.

It is worthwhile to state that the philosophical orientation underlying current investigation constituted, in some way, an ethnography of pediatric hospitals' environment and practices. In this kind of ethnography the anthropological immersion occurred within literature's empirical 'place' (LAPLANTINE, 1986). This fact has been possible because the hospitals portrayed in children's books, albeit not concrete as those of the real world, are full of the signs that permeate reality.

The aim of the present research

The current research aimed to answer basically the following question: "What kind of thing is being taught to the children besides the most obvious information? What more comes along with

the stories that are told?"Current analysis evidences the manner hospitalization and its many nuances is represented in illustrated children's books whose contents deal with getting ill and hospitalization. The emergence of these relatively hidden symbols will be of great help to better identify the values, moral principles, biases and habits 'taught' to children through this literature.

Results may also suggest clues on the symbolical approach and range of practices recommended by hospital service. In fact, children's books on hospitalization reproduce illustrations with details since they aim at a type of realism that is close to the educational purposes of textbooks used at school classes.

Within such rich details, current research identified whether and how far certain factors, ideally constitutive of the hospital environment and routine, demanded by managers that aimed at the best quality indexes in hospital attendance, are or are not represented in a communication medium such as children's literature. The perception of these factors will demonstrate the degree they were culturally incorporated in the depiction of the hospital as an institution.

Methodological tools

It was analyzed a convenience sample of 20 children's books, published between 1988 and 2008, that had a maximum of thirty-two pages each. At those books the illustrations conveyed a narrative role as much as the written text. The samplings of children's books included books originally written in English, French, German and Portuguese. Books from different countries do not merely imply language differences but reflect different cultural scenarios featuring different modes as how authors and illustrators picture an aspect of society provided to the children of their respective countries.

The illustrated children's books were chosen because they specifically dealt with narratives (a) on hospitalization in a pediatric ward or on the description of a children's hospital as a health care institution; (b) aimed at child or juvenile readers; (c) featured children, pets, live toys, non-human beings or anthropomorphized animals as characters in the plot.

There were not included books with (d) stories related to healthy children attending doctor's checkups at pediatric clinics; (e) plots with no ill or injured characters; (f) sick adults.

The books were identified by web searching in electronic libraries and some had their titles picked from recommended book lists available at some children's hospital web sites.

Results

In the world of children's literature, a kid has great chances to undergo a surgery when hospitalized. This procedure was portrayed in half of the storybooks under analysis.

Instructed by children's literature, hospitalized children are made to believe that broken arms and legs are the main reasons for hospitalization in children's hospitals. In fact, the above event occurs in 12 out of the 20 books under analysis.

When the immediate causes of the traumas are investigated, eight out of 14 books featuring broken limbs, choking and other lesions tell us that the injuries had been caused by accidents triggered by bad behavior of the children themselves. The following examples are highly revealing: *Eddy va à l'hôpital* narrates the story of a boy who runs after a ball and is run over by a car.

Conni im Krankenhaus tells the story of a small girl who makes a playground toy became too much slippery, slides at great speed and crashes her leg.

In When you're sick or in the hospital, the tiny gnome falls off the skate after extreme maneuvering.

In *Gaspard à l'hôpital*, the small dog swallows the keychain which he placed in his mouth to hide it from its friends.

Teddy muss ins Krankenhaus tells the story of a teddy bear that falls off a bicycle because his owner had forgotten to fasten the safety belt.

A operação de Lili narrates how a baby elephant was almost choked by his friend - the frog - who became stuck when they used the elephants as a sort of 'vacuum cleaner'.

In the world of children's literature, hospitalized children are almost never attended by female physicians. Female pediatricians are a rarity in children's books, or rather, present in only 5 out of the 20 under analysis. This 'hidden' lesson leads children to believe that the only job a woman can attend at a hospital is the one of a nurse. Female nurses are in 16 out of the 20 children's books under analysis. Moreover, nurses are frequently characterized wearing caps, as observed in 8 of the books that narrate hospitalization events.

If physicians are mostly males, children's books show us that they are white; being so depicted in 14 out 15 books featuring male doctors.

The race issue is also extant in the representation of the the main protagonists of the stories. A black kid as a main character was found only in two out of the 20 books analyzed.

Hospitals of children's fiction are predominantly characterized by icons such as injections, found in 10 books; serum bags and drips, in 12 books; wheel chairs and crutches, in 10 books; plaster and splints, in 14 books; anesthesia, present in 8 out of the 9 books which mentioned surgeries; pictures or descriptions of a venous perforation, found in 10 books.

On the other hand, the total absence of certain items and themes in narratives or illustrations is highly revealing. The pediatric hospital in children's literature is devoid of boxes for the collection of perforating and cutting objects and the habit of frequent washing of hands expected by health professionals. It rarely exhibits beds with side protection or identification bracelets on children's wrist.

Children informed by the fictional hospital in the literature are more likely to know that their companion would be the teddy bear rather than their mothers during the hospitalization period. Although the mother's place as a caregiver is warranted in 10 out of the 20 books analyzed, she is not as ubiquitous as the teddy bear, with occurrences in 17 out of the 20 books investigated.

The fictional children's hospital is a significantly humanized place since it embodies the practices of health psychology (*O dodói da Gigi* and *Harry goes to the hospital*) and the practices of doctor-clowns (*L'hôpital, Camille va à l'hôpital, Martine, l'accident, Teddy muss ins Krankenhaus, Heut gehen wir ins Krankenhaus*). Besides and is undoubtedly linked with the Toy Room, portrayed in 12 out of the 20 books analyzed.

However, image and textual references to hospital schools are extremely rare, with only one occurrence all over the 20 stories (*L'hôpital* and *Bald nach Hause zurückkehren*)

Discussion

Some finding in current research corroborate previous studies. This is especially true with regard to the fact that most books deal with events caused by accidents which justify the hospitalization of the characters. Turner (2006, p. 186) states that "injury themes are most likely portrayed in books related to hospitals". Important comments are worthwhile on the findings according to which children's or the characters' behavior and attitudes caused the accidents which provoked their hospitalization.

Whereas this symbolic appropriation favors the identification of the child with the character in the story since it contains factors on the children's daily life, on the other hand, it may reinforce the question of blame, assimilated by the children in a cognitive manner when they seek the

purpose of their hospitalization. This explanative model, called "immanent justice", tells the children that the illness or the injury occurred because of their misbehavior ("people get what they deserve").

Since several studies (BIBACE &WALSH, 1980; KISTER &PATTERSON, 1980; RAMOS, 1975; BURBACH & PETERSON, 1986) suggest that both healthy and hospitalized children may view surgery or hospitalization as a punishment, health professionals should be aware about the ways young readers could use these books with regard to their understanding about hospitalization.

Otherwise, all the efforts put on the moral messages carried by phrases such as "But it's not their fault" (*Going to the Hospital*) or "None become ill because they did or failed to do something" (*Harry goes to the Hospital*) will not reach the expected effect. Once the power of moral messages contained in books for children is a function as old as the place of storytelling in children's lives and for this reason better not to be contested, they would rather, at least, not appear to be contradictory.

The gender biases stating that only 25% of the physicians found in children's books are female should be challenged by real numbers. Actually, during the last thirty years a significant feminization of the medical profession has occurred in all countries. Female physicians are currently about 60% of total, particularly in the case of Pediatrics. Heut gehen wir ins Krankenhaus and A operação de Lili are two books that go beyond the gender issue and place the female doctor within the relevant place of surgery.

Some authors took the authority to write a children's book from the experience of being a health professional. In this cases, they focused its purposes on the provision of scientific information and in bringing moralizing messages that told the children how they should better behave when under hospitalization.

Sometimes this ideological engagement cost the aesthetic quality of those works, which have not preserved their artistic assumptions, as well as have not granted the commitment of literature in offering pleasure.

This discussion drives us to an old question, that maybe will never be answered at all: - What should be the main role of literature in children's lives? Giving information (moral, scientific, or whatelse) or just offering pleasure? Could these functions play roles together?

Final considerations

The challenge in writing and illustrating children's books on such delicate subjects consists of making it so real that empathy and identification by the children occur and, at the same time, care is taken to hide shocking aspects on the theme. In this play between truth and fiction, some books and authors are more successful than others are.

Besides, the following-up of a fast-transforming phenomenon as has occurred in the case of the modern hospital and its practice during the last fifty years is a challenge that may be coupled to that which deals with delicate events. If there are still children's books on children's hospitalization successively published since the 1960s and which are out of fashion in their manner of picturing the hospital, although they still satisfy contemporary young readers and inspire today's authors, we may understand the difficulties in representing true but relatively exotic aspects for the social imagination.

A good children's book provokes in the young story reader or listener feelings of empathy through the hospitalization scenes represented. This occurs either because the children have already experienced a similar situation or because they have imagined the situation through schoolbooks, films or accounts by friends or relatives.

Children will thus experience a psychic calmness when symbolically handling reality that is not altogether unknown and with which they maintain a dialogue when they recognized objects, instruments and typical persons pertaining to the hospital environment. Once more, some books and authors are more successful than others in this game between familiarity and uncanniness.

A space for artistic freedom in literature should exist so that, even in current children's literature, nurses may be depicted wearing caps and patients' charts may still be pinned to their beds. Similarly, one may soften the critiques against the ideological trends that have been identified in current essay.

People should remind themselves that the reality that children's literature represents is not mere that on hospitalization. Children's fictional books may covertly reproduce a whole series of conflicts established among the medical and hospital professions and between the patients' rights and the interests of the health services market. To assure such books will be accepted by the young readers with joy and satisfaction, they should maintain equilibrium between promised transformations and the symbolical traditions they provide.

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The list of screened books

French

- 1. **L'hôpital** Gallimard Jeunesse/Eva Schweikart/Charlotte Roederer (il). Édition Gallimard Jeunesse, 2000.
- 2. **Opération Fantôme**. Jacques Duquernnoy/ Jacques Duquernnoy (il.). Édition Albin Michel Jeunesse, 1998.
- 3. Camille va à l'hôpital. Aline de Pétgny/ Nancy Delvaux (il.). Édition Hemma.200?
- 4. **Eddy va à l'hôpital**. Christian Lamblin/ Régis Faller & Charlotte Roederer (ils). Éditions Nathan. 2002.
- 5. **Gaspard à l'hôpital**. Anne Gutman/ Georg Hallensleben (il.) Hachette Livre, 2001.
- 6. Martine, l'accident. Gilbert Delahaye/ Marcel Marlier(il.). Casterman, 1996.

German

- 1. Conni im Krankenhaus. Liane Schneider/ Eva Wenzel-Bürger (il.). Carlsen Verlag, 1998.
- 2. Heut gehen wir ins Krankenhaus. Susa Hämmerle/ Kyrima Trapp (il.). Annette Betz, 2001
- 3. Teddy muss ins Krankenhaus. Patricia Mennen/ Antje Flad (il.) ArsEdition, 2008
- 4. Bald nach Hause zurückkehren. Linda Worrall/Linda Worrall (il.) Pestalozzi-Verlag, 1990.

English

- 1. Emergency Mouse. Bernard Stone/ Ralph Steadman (il.) Andersen Press Ltd., 1978
- 2. **My trip to the Hospital**. Mercer Mayer/ Mercer Mayer (il.). Harper Festival/Harper Collins Publishers, 2005
- 3. Harry goes to the Hospital. Howard J. Bennett*/Michael Weber (il.) Magination Press, 2008.
- 4. **Topsy and Tim go to Hospital**. Jean and Gareth Adamson/Belinda Worsley (il.) Penguin Company, 2010
- 5. When you're sick or in the Hospital. Tom McGrath/ R.W. Alley (il.) One Caring Place, 2002
- 6. **Going to the Hospital**. Fred Rogers/ Jim Judkis (II.*) PaperStar Books/The Putnan Group, 1997

Portuguese

- 1. A operação de Lili. Ruben Alves/Andre Ianni (il.). Paulus, 1999.
- 2. O dodói da Gigi. Francisco Alves/ Renata Alves de Souza (II.) Signus, 2007.
- 3. Hospital não é mole. Bel Linares/Alcy Linares (II.) Salamandra, 2008.
- 4. O menino paciente. Letícia Wierzchowski/Marcelo Pires/ Virgílio Neves (II.) Record, 2007.