

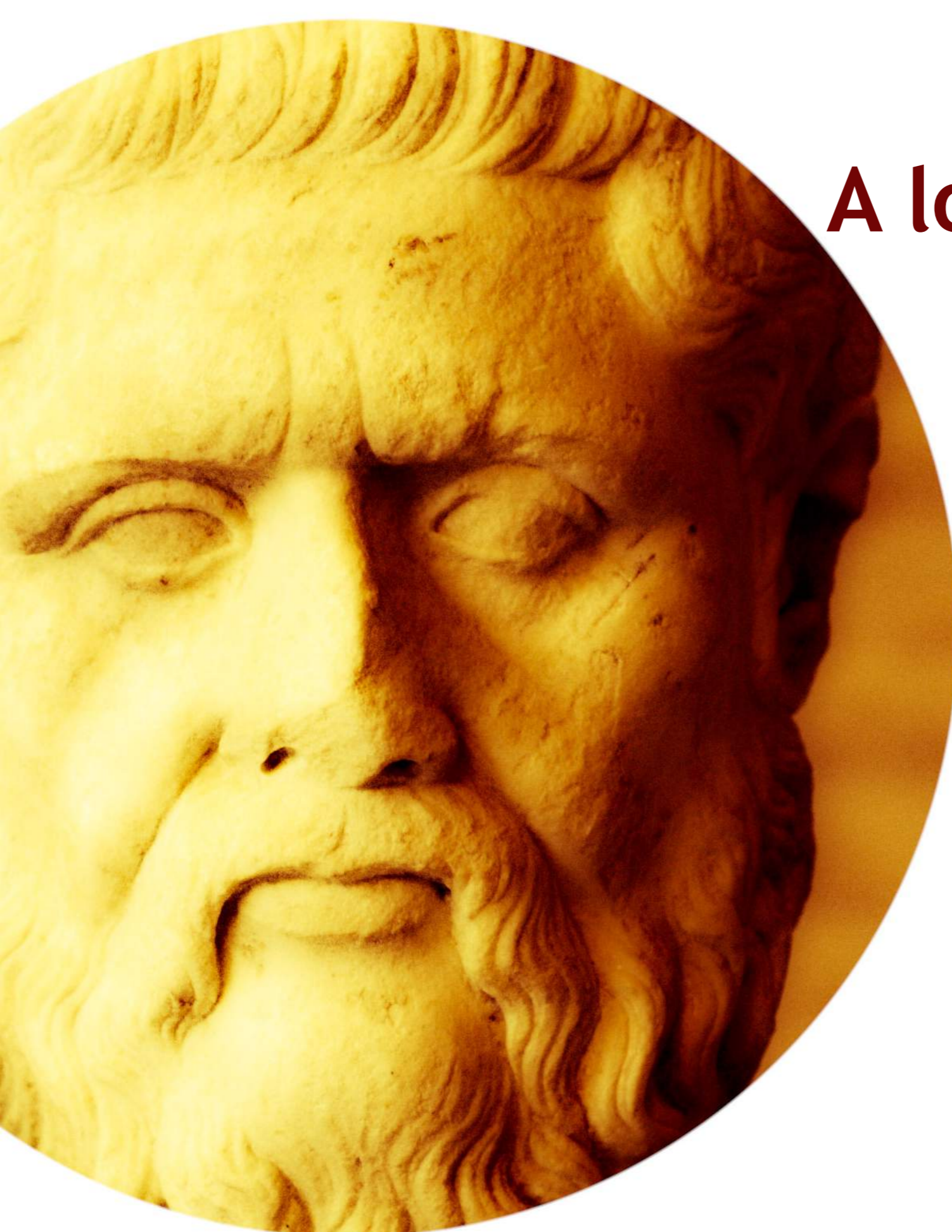
# An ethics-based model for choice of use of autonomy limitations (such as clinical holding) in somatic care of children

- a low arousal perspective

Bo Hejlskov Elvén  
*BA, MA, PhD student*

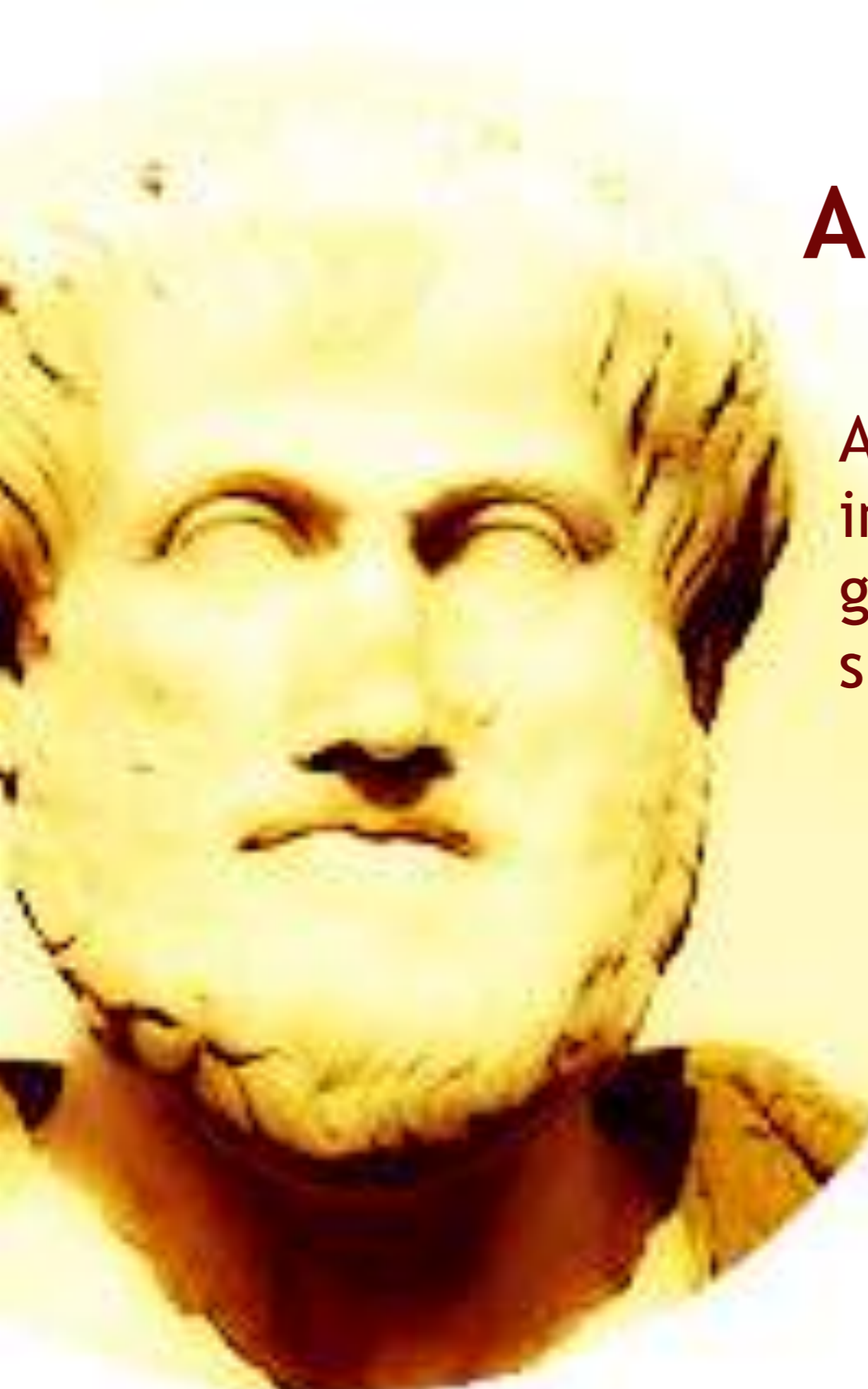






# A long time ago...

Plato thought that children are savages that must be disciplined, tamed and civilised



# A long time ago...

Aristotle thought that children are immature adults who will become good adults if they are adequately supported in their development



# Control or support

These two lines follow us through the ages  
Michael Tomasello regards them as essentially human in an evolutionary framework

In order for groups to survive two principles are essential



# Control or support

The group takes care of the weak





# Control or support

The group takes care of  
the weak

And make sure everybody  
are in line using force  
when needed

These are the  
two sides of  
morality

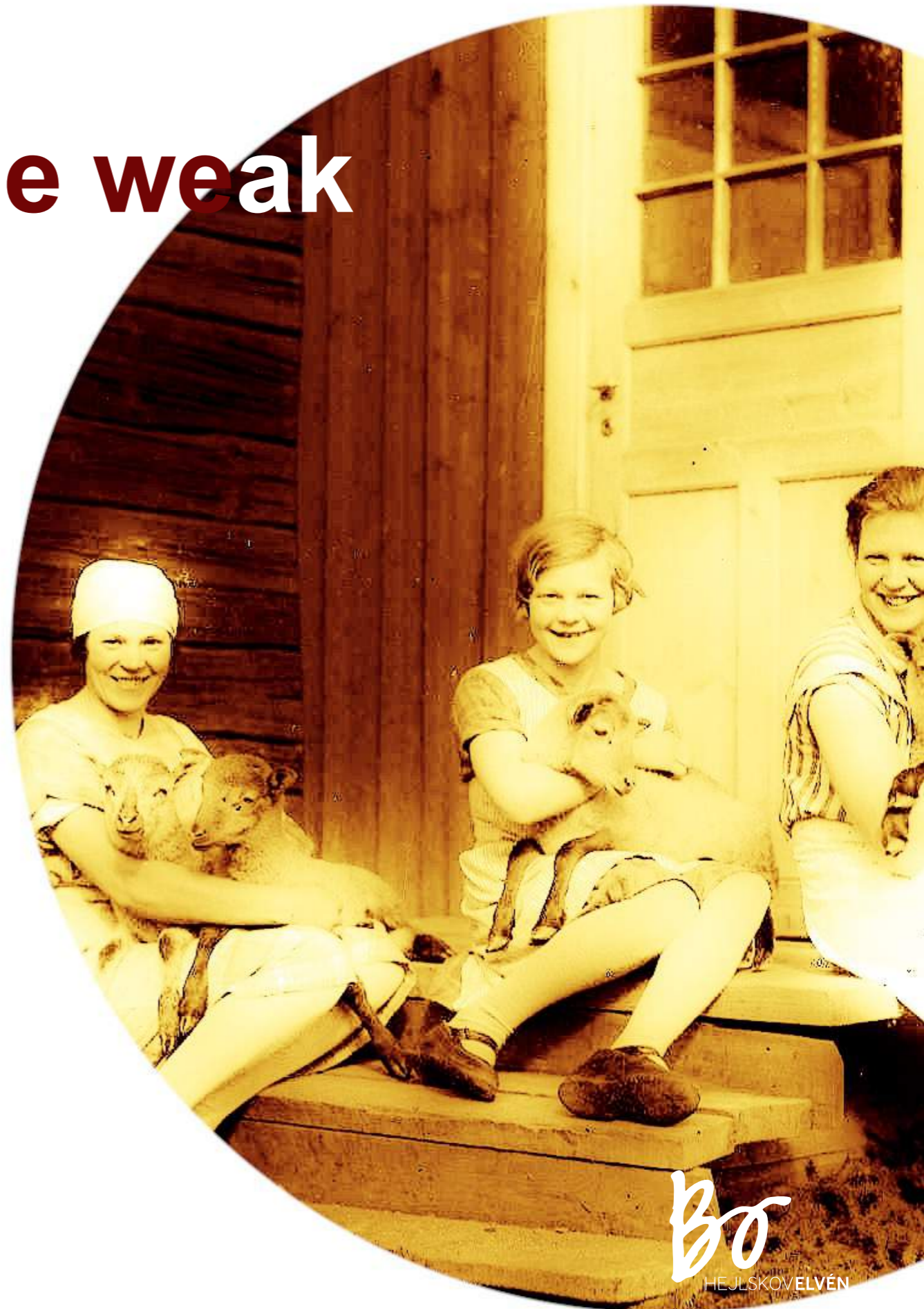




# Taking care of the weak

These two aspects of human morality affects how we manage difficult care situations

One is when we need to perform medical procedures on children who does not cooperate

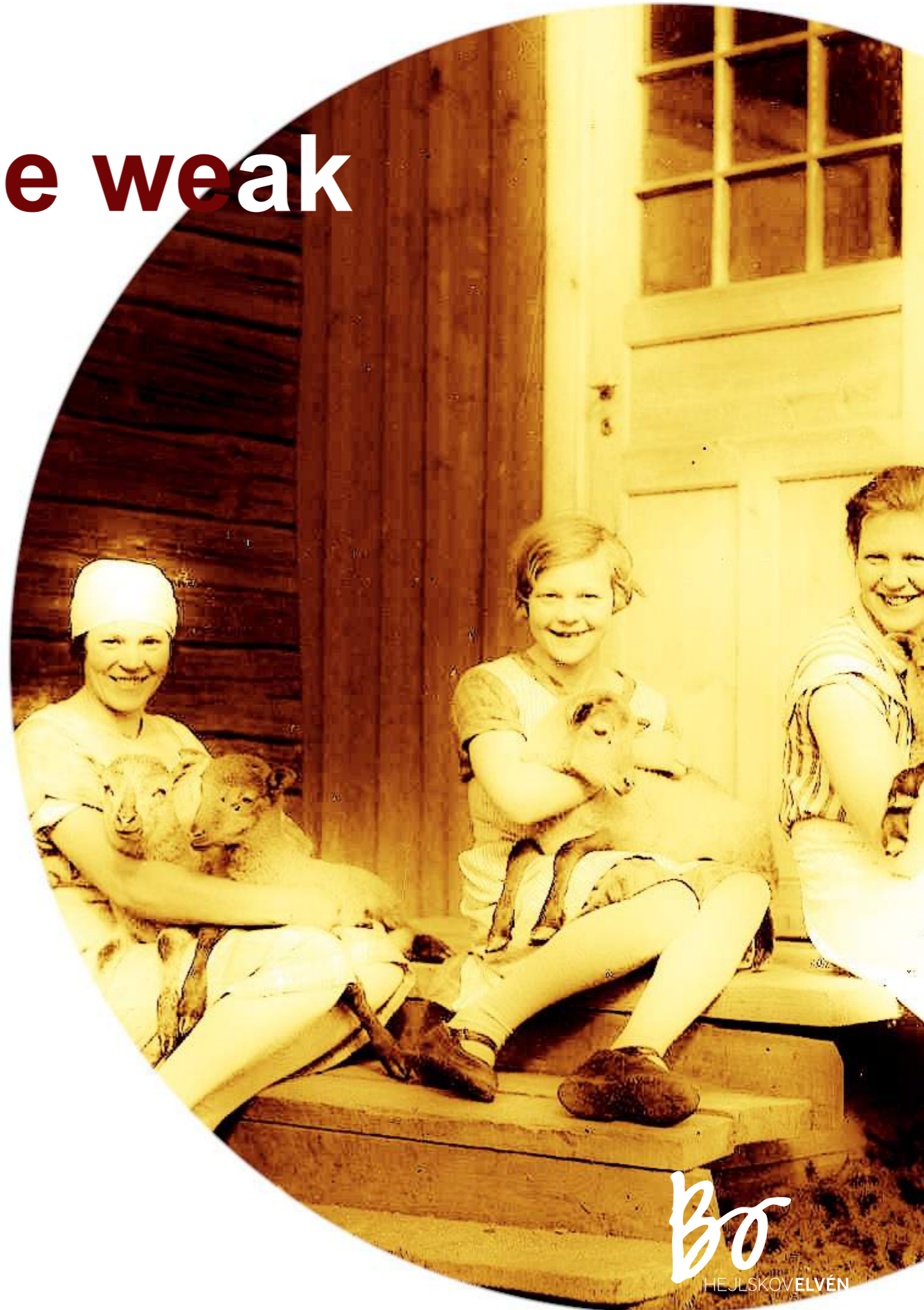




# Taking care of the weak

Andrea Page has shown that doctors who need the child to be still often ask somebody to hold the child

- First the parents are asked
- Second the student nurse







**Pergamon**

Child Abuse & Neglect 30 (2006) 1333–1342

Child Abuse  
& Neglect

## Learning from tragedy: A survey of child and adolescent restraint fatalities

Michael A. Nunno<sup>\*</sup>, Martha J. Holden, Amanda Tollar

*Residential Child Care Project, Family Life Development Center, College of Human Ecology,  
Cornell University, Ithaca, NY 14853, USA*

Received 3 March 2005; received in revised form 3 February 2006; accepted 24 February 2006  
Available online 15 November 2006

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### Abstract

**Objective:** This descriptive study examines 45 child and adolescent fatalities related to restraints in residential (institutional) placements in the United States from 1993 to 2003.

**Method:** The study team used common Internet search engines as its primary case discovery strategy to determine the frequency and the nature of the fatalities, as well as the characteristics of the children and the adolescents involved.

**Results:** Male children and adolescents were over represented in the study sample. Thirty eight of the fatalities



# Autonomy

Martha Nussbaum argues that autonomy is the essential human right

Holding a child is the most clear violation of autonomy

Nussbaum argues that we sometimes need to limit autonomy

But we can't do that without a good argument





# Autonomy

Nussbaum does not provide any argument

So we set out to do it and propose

- Avoidance of immediate danger
- Movement during the required procedure is dangerous
- Care
- Autonomy actually increases

The power of the argument  
against the intervention







# Danger

Immediate danger is a strong argument

But we only hold when

- The child is unable to cooperate
- There is immediate danger

We need to professionalise the holding

- Using the least dangerous procedure
- And trained staff

## CLINICAL HOLDING

# Developing a website to demonstrate clinical holding techniques

Page A, Warren A, Vanes N (2017) Developing a website to demonstrate clinical holding techniques. *Nursing Children and Young People*. Date of submission: 19 May 2016; date of acceptance: 9 November 2016. doi: 10.7748/ncyp.2017.e801

**Andrea Page**

Associate professor, learning disability and mental health department, Birmingham City University, West Midlands, England

**Alison Warren**

Clinical matron for children and young people's services, The Royal Orthopaedic Hospital NHS Foundation Trust. She was previously lecturer/practitioner, department for children and young people's health, Birmingham City University/Birmingham Children's Hospital NHS FT, West Midlands, England

**Abstract**

Healthcare staff routinely use clinical holding to help infants, children or young people stay still when treatment is being administered, to prevent children or young people from interfering with the treatment, or when invasive examinations are being carried out. However, healthcare staff rarely have any formal discussion with children and young people, or their parents, on the techniques used for clinical holding. Visual tools are important when talking to children or young people about their healthcare, and a website with images of clinical holds would allow staff to discuss relevant holds with their patients. In this article, we describe a collaboration between Birmingham City University and Birmingham Children's Hospital to develop a website that presents 3D images of clinical holds, outlining how we introduced it to staff in the clinical areas that would benefit from it and how we have been evaluating its effectiveness. We hope this website will formalise the professional discussion of clinical hold techniques. This will allow information on the appropriate holds for different situations to be documented, which will enhance best practice. In addition, the website should provide information needed to allow children, young people and their parents to give true, informed consent for any procedures they need.

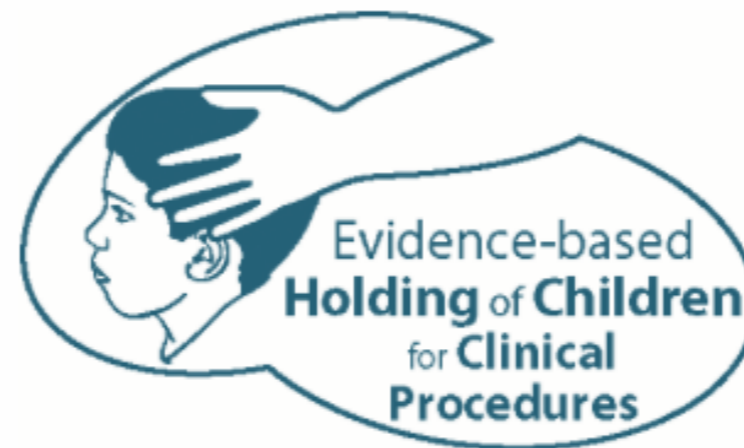
**Keywords**

child health, clinical holding, e-learning, paediatric nursing, procedures, website

CLINICAL HOLDING is the proactive immobilisation of a part or all of the body to carry out a procedure safely. For example, holding an arm

the practice of holding children or young people to help them cope with painful or invasive procedures: therapeutic holding (RCN 2010), holding still





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# Evidence Based Holding of Children for Clinical Procedures

<http://comslive.health.bcu.ac.uk>

# Procedure is dangerous

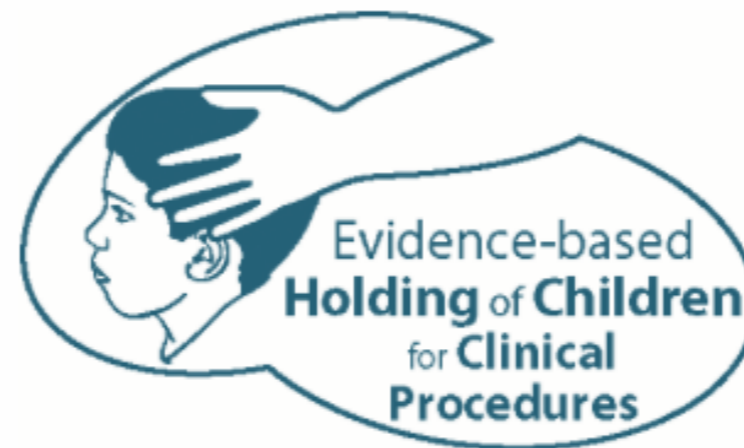


Procedural danger is also a strong argument

But we need to make the situation bearable for the child

- We do what's necessary to get the child to cooperate
- We make the child feel safe
- Using the least dangerous procedure
- And trained staff





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# Evidence Based Holding of Children for Clinical Procedures

<http://comslive.health.bcu.ac.uk>



# Care

Care is a weak argument  
Which means that we need  
to use softer methods

- We do not wash a child holding it
- We use paedagogics to get the child to cooperate

This applies to all  
situations that do not ...  
danger



# Autonomy increase

Could be using braces to support being able to participate in normal activities

Again a weak argument  
Which means that we need to use paedagogics to get the child to consent





# The road ahead

Train staff in the least dangerous procedures

Assess every situation using the four arguments



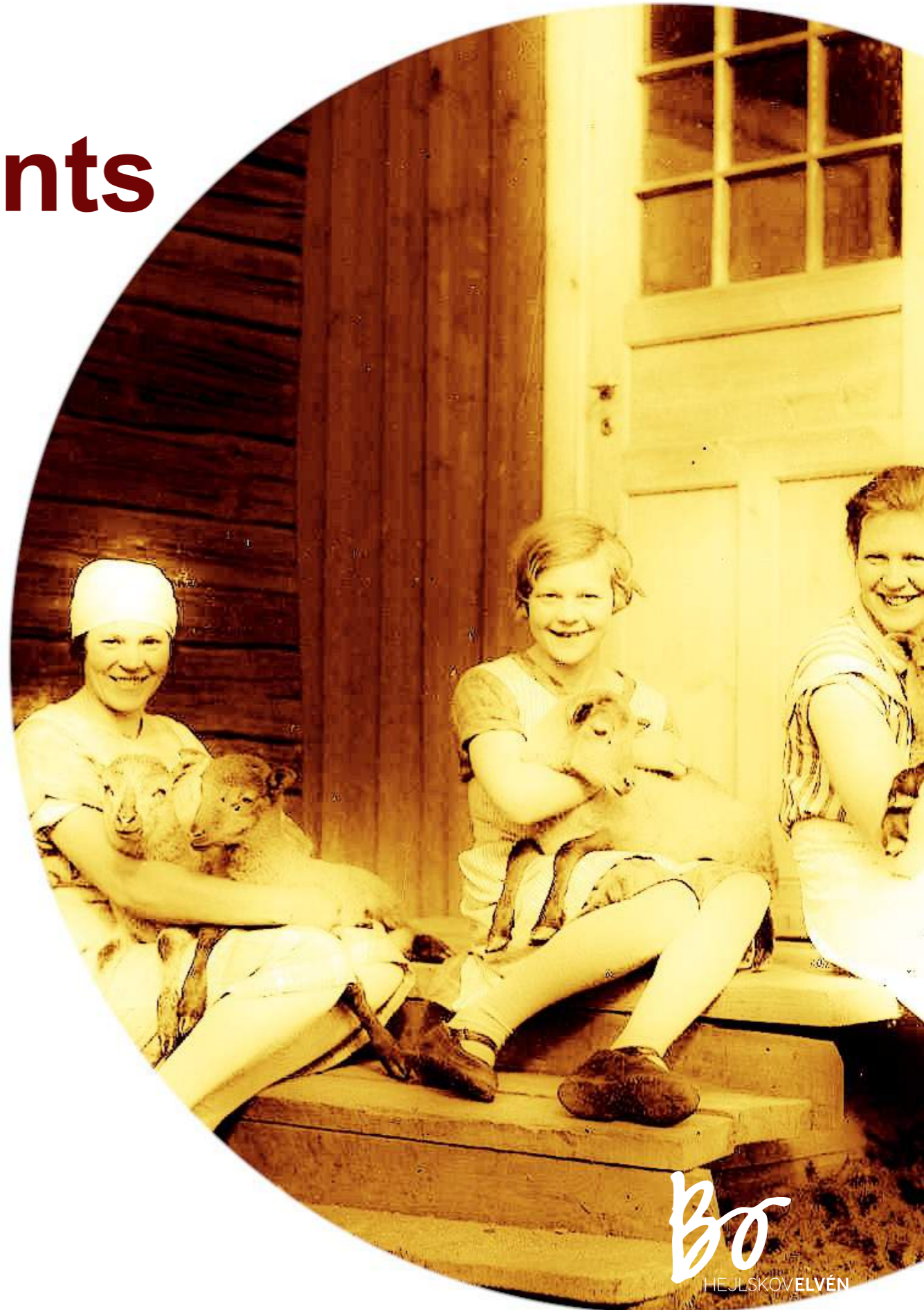


# Acknowledgements

The research is supervised  
by

- Dr Andrea Page
- Dr Andrew McDonnell

Birmingham City University







Bo Hejlskov Elvén  
**Padėkime nesimušti, nesikandžioti, nešūkauti...**  
 Kaip pasiekti, kad žmonės, turintys autizmo ir kitų vystymosi sutrikimų, elgtųsi gerai

Bū Hejlskovs-Elvėns  
**Bez klieždieniem, kodzieniem, sitieniem**

Bo Hejlskov Elvén David Edfelt  
**Beteendeproblem I FÖRSKOLAN**  
 Om lågaffektivt bemötande

**CONFUSED ANGRY ANXIOUS?**

**PROBLEMER HOS ANBRAGTE UNGE**

BO HEJLSKOV ELVÉN  
**Herausforderndes Verhalten vermeiden**  
 Menschen mit Autismus und psychischen oder geistigen Einschränkungen positives Verhalten ermöglichen

Bo Hejlskov Elvén  
**KENEN ONGELMA?**  
 Mistavat tilanteet koulun arjessa

**поведение у людей с особенностями развития**

Bo Hejlskov Elvén Tina Wiman  
**BARN SOM BRÅK**  
 Att hantera känslostarka barn i vardagen

Bo Hejlskov Elvén  
**Problemskabende adfærd**  
 ved udviklingsforstyrrelser eller udviklingshæmning

**ADFERDS-PROBLEMER I VUGGES- & BØRNEALDER**

**ADFERDS-PROBLEMER I SKOLEN**

BO HEJLSKOV ELVÉN OG TINA WIMAN  
**RABALDER I BØRNEFAMILIEN**  
 En bog til forældre om at håndtere børn med stærke følelser

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 How to Make Behaving Positively Possible for People with Autism and Other Developmental Disabilities

**RÖWDY BÖRDE?**

[www.eng.hejlskov.se](http://www.eng.hejlskov.se)

**Bo HEJLSKOV ELVÉN**