

Chapter 1

Research

Sarah Daniels

St. Jude Children's Research Hospital, USA

Shawn Brasher

St. Jude Children's Research Hospital, USA

ABSTRACT

Although the value of research has long since been acknowledged in the child life profession, limited resources exist that prescribe concrete steps for child life leaders to take which promote research in daily work efforts. Whether working on research part-time or full-time, it is important that child life specialists take on research activities as part of their job responsibilities. With options to work fully remote or to have boots on the ground, the impact of a child life research specialist reaches patients and families; professionals and students; the academic, psychosocial, and biomedical scholarly communities; and beyond. Throughout this chapter, readers will obtain justification and inspiration for the proposal of this unique position into their own programs. Further, this chapter will offer concrete tools and suggestions for implementing this role successfully.

INTRODUCTION

Child life specialists have many skills that are transferable from the hospital setting to other non-traditional environments. With an ability to understand children's responses to stress and to provide developmentally appropriate interventions, child life specialists are prepared to directly support children and families in any environment. Those who work in the child life profession acquire numerous additional skills that fulfill other job responsibilities outside of their direct clinical care. For instance, they may chair or participate on multidisciplinary committees, and contribute to institutional strategic planning, event organizing, student supervision, and more. Indeed, the roles of a child life specialist even within the hospital setting are ever-evolving, with unlimited potential.

This chapter encourages a new meaning of the phrase non-traditional as it applies to the child life specialist profession. Rather than describing how to apply the child life role to new settings outside of a hospital or medical clinic, this chapter reflects one example of how a child life specialist within the

DOI: 10.4018/978-1-6684-5097-0.ch001

hospital setting can take on a full-time role as a researcher. Although the hospital setting is traditional, the child life research specialist role is anything but typical of the child life profession. Fortunately, child life specialists have many qualities that enhance those of a researcher. When compassion and creativity are paired with a spirit for inquiry, we can best serve patients and families and contribute to remarkable growth in the child life profession.

BACKGROUND

Research is a formal process of inquiry, which aims to discover new information. There are several different types of research activities. The two most common approaches to doing original research are through the use of quantitative or qualitative methodologies. Quantitative research is an investigation aimed at discovering new truths about reality, testing hypotheses against theories, and measuring relationships between variables (Daniels et al., 2021a). Quantitative methodology is often characterized by its investigation of numbers as data and through its statistical analysis (Daniels et al., 2021a). Qualitative research explores, understands, or deconstructs the experiences of people, places, or things (Daniels et al., 2021a). Qualitative methodology commonly utilizes interview, observation, or document review for data collection and is characterized by its use of content, narrative, and thematic coding (Daniels et al., 2021a).

In addition to research, there are several other ways to engage in formal inquiry. For instance, evidence-based practice, quality improvement, and program evaluation are other forms of inquiry that involve examining practices or programs with the goal of improving those practices. Evidence-based practice (EBP) strives to solve problems in the health care setting by integrating an examination of current evidence on the topic, patient perspective and values, and clinical expertise (Sackett et al., 1996). EBP is used to meet standards of care and to inform clinical decision-making (Daniels et al., 2021a). Quality improvement (QI) projects are cycles of evaluation and intervention aimed at improving patient care, feasibility, and safety in an organization (Shirey et al., 2011). Program evaluation is a method of synthesizing information to look at the efficacy of programs and policies (Chen, 2015). Each of these distinct inquiry formats provide guidance for researchers to make improvements grounded in evidence.

For the child life profession to thrive and emerge as a field of inquiry, all child life specialists must embrace the importance of knowledge generation and acquisition. We must critically evaluate our foundation and build an evidence base that is not only grounded in research about children's development or psychology. Child life is its own unique profession, and each day child life programs are introducing new practices that we anecdotally know improve children's and families' experiences in stressful situations. It is more important now than ever to study and to document this work so that it can continue to be built upon.

UNCOVERING THE CHILD LIFE SPECIALISTS' ROLE IN RESEARCH

The role of scholarly inquiry and research is evident in the inception and growth of the child life profession (Sisk & Daniels, 2021). Consider first the preliminary works of Emma Plank, known anecdotally as the 'mother of child life' and for her creation of the first child life program for Cleveland's City Hospital in the 1950s (Case Western Reserve University, 2022). Emma Plank's efforts to address children's psy-

21 more pages are available in the full version of this document, which may be purchased using the "Add to Cart" button on the publisher's webpage:

www.igi-global.com/chapter/research/313803

Related Content

Developing Multicultural Counselling in an Australian University: Applying Hinduism to Counselling

Carl Vadivella Belle (2019). *Multicultural Counseling Applications for Improved Mental Healthcare Services* (pp. 168-182).

www.irma-international.org/chapter/developing-multicultural-counselling-in-an-australian-university/214144

A Matter of "Care-Full" Consideration: Introducing Wellness and Leadership in Higher Education During a Time of Uncertainty and Unrest

Cynthia Jacqueline Alexander and Amy Tureen (2022). *Leadership Wellness and Mental Health Concerns in Higher Education* (pp. 1-21).

www.irma-international.org/chapter/a-matter-of-care-full-consideration/303267

The Benefits of Self-Talk and Imagination for Your Mental Health and Happiness Adolescence in Higher Education

Vijendra Nath Pathak and Prattusha Chatterjee (2024). *Mental Health Crisis in Higher Education* (pp. 278-293).

www.irma-international.org/chapter/the-benefits-of-self-talk-and-imagination-for-your-mental-health-and-happiness-adolescence-in-higher-education/335992

Addressing "Another" in the Aftermath of School Shootings Using Dance and Rhetoric

Chelsea K. Magyar (2022). *Impact of School Shootings on Classroom Culture, Curriculum, and Learning* (pp. 89-112).

www.irma-international.org/chapter/addressing-another-in-the-aftermath-of-school-shootings-using-dance-and-rhetoric/289241

The Dynamics of Parent-Teacher Relationships in the Socio-Emotional Development of Young Children

Keshni Bipath and Corne Oosthuizen (2022). *Provision of Psychosocial Support and Education of Vulnerable Children* (pp. 170-184).

www.irma-international.org/chapter/the-dynamics-of-parent-teacher-relationships-in-the-socio-emotional-development-of-young-children/298250