

How does attachment state of mind affect the nurse-woman caregiving relationship?

by Fran Chavasse

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the degree of

Doctor of Philosophy

under the supervision of

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CERTIFICATE OF ORIGINAL AUTHORSHIP

I, Frances Chavasse, declare that this thesis, is submitted in fulfilment of the requirements for the award of PhD Nursing, in the School of Nursing and Midwifery, Faculty of Health at the University of Technology Sydney.

This thesis is wholly my own work unless otherwise referenced or acknowledged. In addition, I certify that all information sources and literature used are indicated in the thesis.

This document has not been submitted for qualifications at any other academic institution.

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DEDICATION

This work is dedicated to all the nurse "wounded healers" affected by childhood attachment trauma and whose time has come to be acknowledged and healed.

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LIST OF ABBREVIATIONS

AAI	Adult Attachment Interview
ACE-Q	The Adverse Childhood Experiences Questionnaire
ACEs	Adverse Childhood Experiences
ASQ	Attachment Styles Questionnaire
CASP	Critical Appraisal Skills Programme
CFH	Child and Family Health
ECRS	Experiences in Close Relationships Scales
ECRS-R	Experiences in Close Relationship Scale-Revised
EE	Emotional Expression
EOI	Emotional Overinvolvement
EPDS	Edinburgh Postnatal Depression Scale
FPM	Family Partnership Model
IWM	Internal Working Model
NPCRI-N	Nurse-Patient Caregiving Relationship Interview, Nurse
NPCRI-P	Nurse-Patient Caregiving Relationship Interview, Patient
PAM	Psychosis Attachment Measure
PND	Postnatal Depression
PTSD	Post-Traumatic Stress Disorder
RPS	Residential Parenting Services
RQ	Relationship Questionnaire
RSQ	Relationship Style Questionnaire
TIC	Trauma-informed Care

ABSTRACT

The quality of the care provided to a client has been central to the essence of nursing and clinical practice since Florence Nightingale. The nurse-client caregiving relationship is a significant component of all healthcare interactions, and research has found that quality care is linked to positive client outcomes. More recently, Attachment theory has been used in psychological research to understand the link between therapists' adult attachment states of mind and the type of caregiving relationships they develop with their clients. Specifically, it explores how attachment states of mind affect the caregiving provided to clients. This research aimed to explore how the attachment states of mind of 12 child and family health nurses and the attachment states of mind of 13 women affected their caregiving and care-receiving relationship during the woman's stay in a Residential Parenting Service.

The data collected in this theory-building case study were the Adult Attachment Interview used to classify the child and family health (CFH) nurses and women's attachment state of mind, a short semi-structured interview called the Nurse-Client Caregiving Relationship Interview (Nurse and Client versions) administered to understand the caregiving and care-receiving relationship, the Adverse Childhood Experiences questionnaire to score the nurse and women's exposures to adverse childhood experiences and demographic data of both nurses and women. The Adult Attachment Interview was analysed using the Adult Attachment Interview Scoring and Classification System and Adverse Childhood Experiences questionnaire; the Nurse-Client Caregiving Relationship Interview was analysed using narrative analysis.

Results showed that this sample had higher frequencies than a normative community sample of insecure attachment classifications. This included a higher frequency of unresolved/cannot classify sorts, not generally found in community samples. In addition, there was higher exposure than community norms to Adverse Childhood Experiences in some categories of the Adverse Childhood Experiences questionnaire.

Results also showed that insecure attachment states of mind were associated with less sensitive and responsive nurse caregiving. A secure state of mind was associated with more sensitive and responsive nurse caregiving. An unresolved/cannot classify state of mind was associated with nursing care lacking a coherent caregiving strategy.

This case study has drawn attention to the powerful influence of the CFH nurse and woman's attachment state of mind and the potential to either enrich or disrupt the nurse-client caregiving relationship. The CFH nurses with unresolved childhood trauma are understood to have an unconscious motivation to help clients with troubled pasts and are described as wounded healers. To address this problem for the CFH nurses and the women in their care, the implementation of an organisational trauma-informed model of care may raise awareness for nurses of ACEs and subsequent trauma. A trauma informed model of care may develop strategies to address susceptibility to workplace re-traumatisation through prevention and supportive intervention.

Several limitations must be considered when interpreting the results of this case study. This small, purposive sample was chosen for deep analysis of the four case studies. The characteristics of the CFH nurses and women and their reasons and interests for volunteering to participate in this particular study cannot be known, leaving the sample open to selection bias. Additionally, the small sample size reduces the transferability of the findings. In future studies, larger sample size may be more instructive. Other limitations were that all the women had English as their first language, all were Caucasian except one Aboriginal woman, and all were middle class and had at least 12 years of education.

Further research, using a larger sample of nurses, would enable a deeper understanding of how nurses' attachment state of mind affects the nurse-client caregiving relationship. Additionally, the impact of the complex interplay of the nurses' attachment state of mind, early childhood attachment trauma and the cumulative effects of their ACEs on the nurse-client caregiving relationship requires further examination.