Emotional communication between nurses and parents of a child in hospital

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CERTIFICATE OF ORIGINAL AUTHORSHIP

I certify that the work in this thesis has not previously been submitted for a degree nor has it been submitted as part of requirements for a degree except as fully acknowledged within the text.

I also certify that the thesis has been written by me. Any help that I have received in my research work and the preparation of the thesis itself has been acknowledged. In addition, I certify that all information sources and literature used are indicated in the thesis.

Signature of Student:

Date:

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Abstract

In contemporary child healthcare, there is an expectation that parents will be involved in the child's care and work collaboratively with nurses. Collaboration such as this requires that nurses relate to and communicate with both the child and parents. The central concern of this study is emotional communication between the nurse and parent, focusing on parent's feelings and affective responses as they are related to their child's hospitalisation. The aims of the study were to investigate nurses' and parents' experiences of this aspect of communication within the environmental and cultural context of the parent-nurse interaction.

A focused ethnography was conducted, given the importance of understanding the cultural context of nurse-parent interaction. Data collection occurred in a children's ward of a New Zealand hospital, and involved 280 hours of participant observation field work over 22 weeks, 228 informal interviews with parents and nurses, followed by 20 formal interviews with nurses and parents. Data analysis occurred simultaneously as data were interpreted inductively throughout collection.

The findings support the impact of ward and nursing culture as an influence that shapes nurses' behaviour and affect. Parents of a child in hospital were in a vulnerable position, required support and looked to nurses for an interpersonal connection. Parents wanted nurses to provide support and guide them through the hospitalisation journey, acting as cultural brokers. Nurses recognised and responded to parents' need for informational and instrumental support, however there was little acknowledgement that parents also needed emotional support. Nurses responded to parents' overt displays of emotion, but did not elicit emotional expression. The emotional labour that is required by nurses to manage both parents and their own emotions led nurses to engage in self-protection actions. The cultural context of the ward impacts emotional communication between parents and nurses, inhibiting and governing parents' actions and nurses' responses.

This work contributes to further understanding of the concept of cultural brokerage in nursing practice. Eliciting, acknowledging and confirming parents' emotional concerns are core elements of nurses' emotional communication. Organisations must value the labour required to emotionally support others, and recognise the vulnerability of parents and nurses as they work together on their mutual goal of improving the well-being of the child-patient.