Masters degree an Australian first

Celebrating IBCLC Day on 2 March – participants attending the Murdoch University’s lactation short course who are all planning to either sit the IBLCE for the first time or are recertifying.

From back left: Christine Lock, Christine Amponsah, Debbie Willmott-Tyler, Karen Crook, Bess Hawtin, Sara Lohmeyer
From front left: Sally Mulbern, Jo Robbins, Fiona Smith
Dual roles and conflict – nurses as mothers of critically ill neonates

KATRINA LANE-KREBS

Presenting as an emergency admission to a hospital with a critically ill neonate is a mother’s worst nightmare. When the mother is also a nurse, this situation can lead to role conflict, overwhelming grief and a sense of failure on both personal and professional levels. This important issue was the focus of a Masters research project undertaken by Katrina Lane-Krebs.

Mothers are supposed to nurture, protect and nourish new life. Following the birth of a child a mother is still recovering both physically and emotionally when she is discharged from hospital with an apparently healthy child. When the child unexpectedly becomes critically ill and dies, the impact is devastating. The journey through this turmoil depends largely on the coping mechanisms of the individual. The coping skills nurses develop when working within paediatric and neonatal intensive care units take place within the context of professional boundaries, tempered by degrees of emotional distancing. A mother is unable to escape the emotional attachment associated with her child and she experiences vicarious trauma. Mothers who are nurses, often deal silently with a double dose of guilt when their child becomes critically ill, feeling they have not only ‘failed’ as a mother but also as a nurse.

As a mother, perhaps they did not observe signs and symptoms which they acknowledge in hindsight. Too often this “ought to have known” perception results in a reduction of self-worth and self-esteem with professional collateral damage occurring simultaneously. When a nurse employed by a hospital finds herself a consumer in the same hospital, environmental conflict is likely. In this environment the ‘professional’ status of the nurse cannot be maintained and should not be expected. At this time the mother/nurse has also become the client. The psychosocial needs of the mother should become a nursing priority. The mother’s emotional needs must be met through the development of a therapeutic relationship.

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