

**Nurses experiencing layered suffering
Do we care?**

Cynthia Seamark
PCNNZ Conference 2015

“suffering endured by nurses while they mourn the loss of their own loved ones, intermingling layers of silent, walled-in personal suffering with layers of suffering entered into with patients”
(Lucy Mead, 2007)

Relevance

- o Aging population in general
- o Increased demand on hospice services
- o Aging palliative care workforce

Age at death, 1990-2010

Rates per 100,000 population in each age group

(NZ data of age of death) Citation: Ministry of Health. 2013. *Mortality and Demographic Data 2010*. Wellington: Ministry of Health.

- o Palliative care recognised as a stressful specialty
DiTullio M. & MacDonald D. (1999).
- o Accumulated stress is related to burnout
Vachon, M. L. S. (2000). Burnout and symptoms of stress in staff working in palliative care.
- o Burnout is linked with older workers intention to retire
Henkens, K., & Leenders, M. (2010) Burnout and older workers' intentions to retire.



- o International travel - jetlag
- o Still felt emotionally liable
- o Didn't understand the extent of grief and its impact
- o Bought up other grief issues
- o Felt pressured to return, financial and professional
- o Need at least 6 weeks to adjust

What helped when you returned to work?

- o Collegial support and understanding
- o Sense of returning to a normal routine
- o Being busy and distracted
- o Nothing
- o Financial security restored
- o The room where my loved one died was empty

What was most difficult?

- o Exposure to others grief
- o Dealing with patients grieving family & friends
- o Patients with similarities to my loved one
- o Every day a feeling of sadness
- o When people asked me how I was all the time
- o People not recognising how hard it was to return to work

- o Detached myself
- o Withdrew from workmates, focused on job
- o Asked colleagues to take patients who reminded me of my loved one
- o Reminding myself this was their pain and situation not mine
- o Communication
- o Monitoring my boundaries as much as I could

Did working in palliative care make your experience easier or harder?

- o More difficult
- o Both
- o Easier
- o Neither
- o Paradox

We are never so
defensless
against
suffering as
when we love

Sigmund Freud
www.quote-coyote.com



How has your practice changed?

- o Greater understanding of 'wearing two hats' - nurse and daughter
- o Take more time listening to families 'blow by blow' accounts of illness - (I needed to do this myself)
- o Awareness of how exhausting it is for families.



- o Difficulty in concentration
- o Tires easily
- o Errors in judgment
- o Easily distracted
- o Injuries and accidents
- o Indecisiveness
- o Emotional liability
- o Less socially interactive

"Each persons grief is as unique as their DNA. Personal history, particular loss, personality traits, social relationships, and life situation all contribute to differences in grieving"

11/1/2008



Making one's own wounds a source of healing requires the constant willingness to see one's own pain and suffering as rising from the depth of the human condition which all people share

Henry J. M. Nouwen, "The wounded healer"



Resources

- o Skylight - www.skylight.org.nz
 - "When staff are grieving"
 - "Supporting grieving families"
 - "Tips for supporting others through loss and grief"



- o "We were promised sufferings. They were part of the program. We were even told, 'Blessed are they that mourn,' and I accept it. I've got nothing that I hadn't bargained for. Of course it is different when the thing happens to oneself, not to others, and in reality, not imagination."

[C.S. Lewis, A Grief Observed](#)