

## The Lived Experience of Pediatric nurse-caregiver relationship in the PICU: a descriptive phenomenological study

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### Background / Introduction

Pediatric intensive care nurses care not only for critically ill children but also for their caregivers. Under unfamiliar and critical situations, caregivers demand nursing care to ease their negative emotions and to cope. Pediatric intensive care nurse is the bridge to connect the healthcare team to the caregivers in the pediatric intensive care units (PICU). Nurses' and family caregivers' roles shifted and changed in different times and settings. However, the relationship between the two had not been acknowledged in the PICU context.

### Aims and/or Objectives

- The authors through this research intends to explore the lived experience as to the meaning of nurse-caregiver relationship among pediatric intensive care nurses in Hong Kong.
- This qualitative study disclose the nurse-caregiver relationship and the complex nursing relationship role in the context of PICU in Hong Kong and allow clinical reasoning to improve family centered care via understanding pediatric intensive care nurses' experience.

### Methods

- Descriptive phenomenological approach was adopted to gain an accurate and unbiased description of the lived experience.
- A convenience sample of 5 pediatric intensive care nurses who had experience of interacting with NICU/ PICU patients' caregivers were invited to undergo individual, in-depth, semi-structured interviews. Each interview took 45-60 minutes.
- Colaizzi's seven-step strategy was used for data analysis

### Results

Five themes were generated on PICU nurses' experience of nurse-caregiver relationship, including (1) **Understanding the emotions of caregiver: Experiencing of Empathy**, (2) **Building and destroying of Trust**, (3) **Transitioning relationships**, and (4) **Living wit the ups and downs**.

The NICU/ PICU nurses described their experience on the relationship with the caregivers consist of dynamics. Throughout the interaction with caregivers, they upheld of their empathetic characteristics to understand the emotion of caregivers and their role in patients' disease management. During their interaction, they built but also lost trust with caregivers. Meanwhile, they lived with the uncertainty that being trusted and distrusted by caregivers during their engagement.

They expressed that their relationship transited upon the nature of admission, duration of engagement and the needs of caregivers. The progression of relationship consisted of *Professionalism, Support, Education, Empowerment, Collaboration and Rapport*. PICU nurses also experience of emotional distress from feeling difficult to comfort caregivers, tolerating negative feelings and hiding emotions from caregivers. Nonetheless, they also experienced sense of satisfaction and happiness from receiving gratitude from caregivers and felt happy about helping the patients and their caregivers.

### Conclusion

This study found that NICU/ PICU nurses' intention towards nurse-caregiver relationship was based on empathy. Mutual trust was essential in further develop their relationship into more functional ones. The roles of nurses in their relationship change during different stages of hospitalization. During the engagement with caregivers, nurses experienced positive and negative emotions. Caregivers who being cooperative, understanding and supportive to the nursing team, sublimate the perception of better nurse-caregiver relationship from nurses. Nurses believed colleagues who had more clinical experience in the field can develop better nurse-caregiver relationship than less experienced nurses.

### Implications for Practice and Research

This study revealed the complex nursing relationship roles in PICU. Nurses participated in this study recalled experience of emotional distress, from feeling helpless and difficult to comfort caregivers. Further education and support to the PICU nurses are required to facilitate the experience of nurses and parents in the PICU.

This study also provided a better understanding of the complexity of the nurse-caregiver relationship in the Hong Kong PICU context from nurses' lived experiences. In addition, a better understanding of caregivers' lived experiences is also essential so that different structured models of family centred care in the PICU can be developed and evaluated.

## Key messages

- Empathy is the foundation of nurse-caregiver relationship.
- The relationship roles of NICU/PICU nurses changes and progress over time of hospitalization.
- Trust is essential in relationship development.
- Nature and restriction of NICU/PICU posed unique progression of relationships among nurse-caregivers.