

# Returning meaning to palliative care staff

**“The search for meaning and values is a concern for all of us throughout our lives. However, it can become a discomforting preoccupation for palliative care nurses,<sup>1</sup> for whom repeated contact with death and dying can lead to personal crisis.<sup>2</sup> Clinical supervision is invaluable because it provides a structure of formal work discussions, and can help staff to maintain a safe work environment, with good teamwork and balance.**

Repeated feelings of existential guilt – guilt arising in a person because they are well while someone else is seriously ill or dying – can result in nurses and other palliative care professionals losing a sense of meaning and feeling inadequate. In addition, the organisational confines of professional practice and demanding work responsibilities, as well as having to cope with the necessary psychological defences of patients, their families and other professionals towards death, can all take their toll. These issues can prevent a sense of satisfactory conclusion to episodes of care.<sup>3</sup>

In clinical supervision interviews, palliative care nurses and other professionals often talk about a crisis of meaning in their own lives that leads them to question their values. They frequently mention problems in personal and professional relationships linked directly to the nature of their work. They report having to reappraise their values and experiencing difficulties in finding meaning in life. Beliefs related to living and dying, love, loss and relationships are typically described as of immense concern.<sup>4</sup>

In my experience of supervising the work of palliative care nurses, strong personal feelings of guilt and emotional perplexity can be aroused. Sometimes, this is because of the contradictions inherent when developing a deep rapport with someone while simultaneously preparing to say goodbye to them. Often, it seems, a sense of irrationality permeates profoundly sad events, causing emotional discomfort. Emotional defences

can sometimes show in inconsistencies or black humour. This is a psychological defence against feeling deep personal discomfort in the face of repeatedly distressing situations, and is a common means of coping in such situations.<sup>5</sup>

Counterbalances are needed to ensure the psychological well-being of palliative care nurses and other healthcare professionals. Examples of such counterbalances might include developing resilience to demanding emotional work and achieving a satisfactory work–life balance. Palliative care nurses often talk of feeling fulfilment and satisfaction from engaging in activities that help them to maintain a sense of personal and professional value and integrity. Having time to reflect on their personal and professional life and to count their blessings encourages them to have a sense of meaning in their work.

Individual and team project work can foster that sense of meaning and purpose, and bolster feelings of wellness and equanimity. Multidisciplinary educational work may also help staff to feel less isolated.

Clinical supervision provides opportunities to consider professional practice in different and constructive ways. It offers palliative care nurses the chance to gain meaning and purpose from their work. When both the rewards and the challenges in providing palliative care are recognised, a balance can be achieved between personal and professional life concerns. A sense of meaning and purpose can be restored and values reappraised.

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## References

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