

The influence of infant death on the nurse's experience: Reflections in the light of phenomenology



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ABSTRACT

There are numerous positive and negative factors that influence the experience of nurses, especially those of a psychic and/or emotional nature, which can manifest themselves in various ways in the professional and even personal trajectory. To understand this experience in pediatric intensive care settings, appropriating the systematics involved in the relationship with children and families, it is necessary to reflect on the influence that infant death can have on this work. This study aimed to reflect on the influence of infant death on the experience of nurses, in the light of phenomenology. This is a qualitative study of the reflective essay type, with phenomenological inspiration, using aspects of the works of Merleau-Ponty, carried out from a dialogue between the scientific literature and the critical analysis of the authors. Each person experiences particular perceptions and sensations, including in the reality of intensive care settings. Professionals acquire special meanings in professional and personal life, because they are prepared for everyday situations of their work, and still have the opportunity to reflect on this world that surrounds them. The reflections demonstrated how the experiences with death infer values to the social role that the nurse routinely translates, considering her humanized attitude as a principle very well applied in reality, and how this set of her various perceptions and sensations have repercussions on the care provided.

Keywords: Child, nurse, death, perception, intensive care.

1 INTRODUCTION

The care experiences of the authors encouraged the construction of the study, based on the assumption that there are numerous positive and negative factors that influence the experience of nurses, especially those of a psychic and/or emotional nature, which can manifest themselves in various ways in the professional and even personal trajectory.



The professional category of Nursing is composed mostly of women, who are exposed to situations of physical and psychological exhaustion due to their performance in several different health scenarios, including hospitals⁽¹⁾.

In the hospital, the Pediatric Intensive Care Unit, for example, is the care sector for children and adolescents with severe conditions, usually life-threatening (2,3). It is an environment where professionals are put in contact with suffering and death, providing physical, psychic and even social affectation, which demands from them some special attributes⁽³⁾.

Among several other factors, the phenomenon of infant death is demonstrated as a generator of suffering at work, associated with the experience before the family, especially in prolonged cases due to the therapy used, often causing feelings of powerlessness and frustration of the team for not having been able to maintain life, although they are experienced and capable professionals^(3,4).

It is clear that the psychic affectation can be present in the life of each and every health professional due to the situations inherent to their work, but there are also studies that demonstrate coping strategies, such as open conversation about working with their own colleagues, as well as family and friends outside the hospital, in order to discharge part of the anguish, sharing their experience. Nevertheless, in the situations that culminate with the successful treatment and cure of the sick child, these same professionals experience the feeling of accomplishment and happiness⁽⁵⁾.

Thus, in order to understand the experience of nurses in pediatric intensive care settings, appropriating the systematics involved in the relationship with children and families, the following question was asked: what is the influence that infant death has on the nurse's experience? Thus, the objective was to reflect on the influence of infant death on the experience of nurses, in the light of phenomenology.

2 METHODOLOGIES

This is a qualitative study of the reflective essay type, with phenomenological inspiration, using aspects of the works of Merleau-Ponty, carried out from a dialogue between the scientific literature and the critical analysis of the authors.

According to Bicudo⁽⁶⁾, an act of intuition and perception is shown by a phenomenon, being something that, individually, is shown to a subject in a contextualized way, which lives an experience. In phenomenological research, experience is that which manifests itself in a sensory way, which is not reduced only to memories and sensations, it is found in the depths of the being, that is, it is not only an experience in the world.

In the philosophical sense, phenomenology is configured as a way of reflecting, investigating and understanding the world, and not as a system of teachings, because this method seeks to



spontaneously contact the phenomenon from the immediate vision of the life of the being about his experience, without separating him from the object⁽⁷⁾.

It is known that the professional category that remains in contact with the patient most of the time is nursing, so this study is directed to these professionals, with the intention of exposing the influences of the hospital routine in pediatric intensive care in the nurse's experience, especially with regard to the death of children under their care in this environment.

The phenomenological principles carry a mutual relationship with nursing, because there is a consensus between the two sciences regarding to consider the relationship of the human being and his world, therefore, phenomenology can be an option for the search for understanding the human experience in the most diverse contexts of care⁽⁸⁾. In this case, the experience between the professionals and their clients is highlighted.

However, in the phenomenological scenario, the systematization of the method is challenging due to the divergence of information and little consistency in the literature, which makes it difficult to operationalize⁽⁹⁾.

In view of the above, for the reflection proposed, the study was based on a literature review, with analysis of texts extracted from books and electronic databases that portrayed aspects of the experience of nurses of pediatric services in the face of infant death, including journals and repositories in nursing and health.

3 DEVELOPMENTS

When reflecting on the term 'Phenomenology', we soon come to mind the study, analysis, investigation of a phenomenon, and before that the association with one or more events. But what phenomenon or event is it? For this occasion, reflections on infant death and its entire path, seen as an influencing phenomenon in the work of nurses.

Beforehand, it is recalled that phenomenology arises with the intention of accessing the pre-reflected world, the way the subject has his experience, that is, the innate experience, even before this subject takes it by consciousness. Therefore, it investigates the phenomenon that is the human experience itself as it was lived, without tying itself to thoughts or theories about the experience⁽¹⁰⁾.

It is seen daily that only the announcement of hospitalization already causes fear on the part of the family of the sick child, given the unknown environment, which worsens when in the ICU, for example, due to the fear of the severity that the case may take. In this sense, the nurse stays a long time with the binomial and, sometimes, from the beginning is already part of and accompanies this complex path, which is permeated by many uncertainties, making the environment emotionally compromised for all who are there.



A study inspired by the ideas of the philosopher Merleau-Ponty, widely recognized for his phenomenological method, brings discourses of nurses in neonatology that expose the emergence of feelings such as fear, anguish and apprehension when dealing with a baby in intensive care, which was idealized by the family. However, they begin to minimize suffering by themselves in an intersubjective way, when they seek to understand this binomial in a painful moment ⁽¹¹⁾.

In care practice, the nurse routinely perceives the need for this understanding of pain towards the client/family, starting from the idea that each human being will have their experience with the disease, treatment, including death in certain situations, and intentionally or unintentionally, gets involved with the phenomenon of hospitalization by putting themselves in the place of the other. That said, each person experiences particular perceptions and sensations.

Merleau-Ponty ⁽¹²⁾ expresses that the world is not what the being thinks, but what he lives; being open to the world, he will communicate directly with it, without possessing it, because it is infinite. We can bring this philosophical conception to the reality of intensive care settings, in which worlds and perceptions coexist, each with its own each.

Death is seen as an inevitable phenomenon, and carries a mixture of feelings such as fragility, incapacity and sadness, presenting itself as an even more difficult moment when it occurs in childhood, because it goes against the natural law of life, generating more intense suffering ⁽¹³⁾. Discourses of professionals who care for children induce that, in the perspective of loss, in comparison with adults and the elderly, the child, as he has not yet had the opportunity to enjoy life, has his death worse assimilated by themselves ⁽⁴⁾.

Daily, in practice, one hears numerous reports similar to the above, raising the value of these lives when prematurely lost. Regardless of the factors associated with death, the monitoring of this phenomenon or even the news given by third parties when at other times and/or institutions, directly influences their work and that of other professionals.

In a study conducted in Brazil with nurses and physicians, the feelings and postures that confer the complexity of these experiences were exposed, addressing factors such as religious beliefs, lack of training and specific experience with the situation that particularize the way the professional deals with the phenomenon of infant death in intensive care ⁽⁴⁾.

For purposes of reflection, it is emphasized that this death said by the authors is not always expected, as in the case of clients with chronic conditions, for example, and may also come from acute conditions and even accidents, among others.

The phenomenon of infant death in an intensive care unit brings to light several implications that go beyond the immediate grief itself for the team. For the nurse, as care manager, before, during and after the event, it will still be necessary to deal with the other demands that do not end there, such as participation in the communication of bad news, the preparation of the body and its referral to an



appropriate place, organization of death documentation, among others. Usually, they can't even have their moment and space of suffering, since their assignments don't allow it.

Regarding the issue of professional training, it is seen that educational institutions hardly include in their curricula disciplines that address death and dying, and often the person will only face it in their own reality. It is recalled on this occasion, the first experiences with child loss as the psychic affectation was intensified by the unknown, and years later the confrontation of this type of situation has acquired new perceptions, without ceasing to be inhabited by empathic values.

Research indicates that the curative model, predominant in our area, can act as an obstacle to face this phenomenon, since the professional should be in charge of reversing the pathological condition, so it does not tend to include death as a perspective of their work⁽¹³⁾.

We totally agree with the study by Silva et al.⁽¹³⁾, when mentioning that there is subjectivity in our work, especially in the processes of loss, because each one has its own perspective, that is, sometimes the professional considers death as the best way out at the moment and even as the only option for the child.

According to reflections by Merleau-Ponty⁽¹²⁾, the way in which the being is affected and the experience of a certain state of its own characterize the sensation. In the relationship with the pediatric patient there is a dichotomy, because sometimes the identification with him can increase the suffering of the professional, and sometimes it gives support, in view of the need for empathy to maximize the humanization of the conducts. In addition, for those professionals who are also fathers/mothers, the perception about infant death can be modified and influence coping⁽⁴⁾.

Some professionals demonstrate that they live the patient's experience as much as the family itself, being able to take advantage of the opportunity, even if painful, as a way to mature and grow in the profession, since they perceive how vulnerable the family is during the whole process of death⁽¹⁴⁾.

Merleau-Ponty⁽¹²⁾ suggests that there is a strong personal involvement of the being with the world, in this way, science is seen by him as empirical, based on the human experience with the world in which they live. Thus, it is the world that offers meaning to human experiences.

There is coherence with the idea described above, considering that certain phenomena can hardly be defined and even investigated by common science, as in the case of infant death and its influence on the experience of nurses.

It is also necessary to direct reflections to the pleasure of the professional because he perceives his work in a pleasurable way when he sees himself satisfied in the exercise, becoming rewarding while he gets involved with the patient and family, obtaining success in the care provided. In this perspective, they acquire special meanings in their professional and personal lives, because in addition to being prepared for everyday situations of their work, they still have the opportunity to reflect on this world that surrounds them⁽³⁾.



Nursing is universally recognized as a provider of care to sick people, and this process includes great solidarity and sensitivity to others, that is, in addition to considering the physical, it also involves the other aspects of the human being, which has distinguished it from other nearby categories. However, it is worth mentioning that the commitment of these feelings became an inherent value of the profession from the beginning, which does not diminish its technical-scientific capacity to the detriment of the others.

4 FINAL CONSIDERATIONS

The research allowed the authors to reflect on the phenomenon of infant death when investigating other studies on the subject, most with reports from the professionals themselves about this phenomenon that, notably, presents itself in a particular way for each person, how it is perceived and felt.

In addition, the reality of care directed not only to the sick child, but also to his family, was evidenced, encompassing all the load of feelings that the child loss causes in those who are involved in the care, including the nurses.

These reflections demonstrate how the experiences mentioned infer values to the social role that nurses routinely translate, considering their humanized attitude as a principle very well applied in practice, and how this set of their various perceptions and sensations have repercussions on the care provided.

The limitations of the study are the scarcity of research aimed at understanding the phenomenon of infant death in the perception of nurses, since most are focused mainly on the area of oncology and palliative care. Therefore, it is suggested investigations that consider the philosophical aspects of care in the other spheres.



REFERENCES

1. Silva MCN, Machado MH. Health and work system: challenges for the nursing in Brazil. *Cien Saude Colet*. 2020; 25(1):7-13.
2. Bazzan JS, Milbrath VM, Gabatz RIB, Cordeiro FR, Freitag VL, Schwartz E. The family's adaptation process to their child's hospitalization in an Intensive Care Unit. *Rev Esc Enferm USP*. 2020; 54:e03614.
3. Vasconcelos LS, Camponogara S, Dias GL, Bonfada MS, Beck CLC, Rodrigues IL. Prazer e sofrimento do trabalho de enfermagem em Unidade de Terapia Intensiva Pediátrica. *Rev Min Enferm*. 2019; 23:e-1165.
4. Nina RVAH, Lamy ZC, Garcia JBS, Álvares MEM, Cavalcante MCV, Nina VJS, Thomaz EBAF. As diversas faces da morte de crianças na perspectiva de médicos e enfermeiros. *Medicina (Ribeirão Preto)* 2021; 54(2):e-167273.
5. Barbosa IA, Barbosa KA, Silva CRS, Fonseca ADG, Paiva MM, Silva CSO. Aspectos emocionales de los profesionales de enfermería en atención oncológica pediátrica: narrativa fenomenológica. *Cultura de los Cuidados*. 2021; 25:(60): 6-18.
6. Bicudo MAV. Pesquisa qualitativa segundo a visão fenomenológica. São Paulo: Cortez; 2011.
7. Forghieri YC. Psicologia Fenomenológica: Fundamentos, Métodos e Pesquisas. São Paulo: Cengage Learning; 2010.
8. Souza MA, Cabeça LPF, Melo LL. Pesquisa em enfermagem sustentada no referencial fenomenológico de Martin Heidegger: subsídios para o cuidado. *Av Enferm*. 2018;36(2):230-237.
9. Nascimento YA, Filard AFR, Abath AJ, Silva LD, Ramalho-de-Oliveira D. The phenomenology of Merleau-Ponty in investigations about medication use: constructing a methodological cascade. *Rev Esc Enferm USP*. 2017; 51:e03296.
10. Pereira PS. Fenomenologia da prática: investigação em enfermagem da experiência vivida. *Rev Enferm UFPE on line.*, Recife, 9(10):9608-15, out., 2015.
11. Refrande SM, Silva RMCRA, Pereira ER, Rocha RCNP, Melo SHS, Refrande NA, et al. Vivências do enfermeiro no cuidado ao recém-nascido de alto risco: estudo fenomenológico. *Rev Bras Enferm*. 2019; 72 (Suppl 3):111-7.
12. Merleau-Ponty, M. Fenomenologia da percepção. São Paulo: Martins Fontes; 2015.
13. Silva IN, Salim NR, Szylit R, Sampaio PSS, Ichikawa CRF, Santos MR. Conhecendo as práticas de cuidado da equipe de enfermagem em relação ao cuidado na situação de final de vida de recém-nascidos. *Esc Anna Nery* 2017; 21(4):e20160369.
14. Monteiro DT, Mendes JMR, Beck CLC. Percepções dos profissionais da saúde sobre a morte de pacientes. *Revista Subjetividades*. 2020; 20(1).