

# April Newsletter Australia and New Zealand Chapter IFNA



**Newsletter Number 40: April 2024**

## Australian and New Zealand Chapter News

This month's newsletter focuses on family and culture in New Zealand. Dr Julie Blamires shares her experience as a paediatric nurse and child and family researcher. Providing insight into how to provide culturally safe care and respect the family. Julie's clinical expertise comes from a variety of specialty areas in children and young people's health, with a special interest in respiratory and rheumatology. She teaches in both the undergraduate and post graduate nursing programs and her teaching expertise and interest lies in child and youth nursing and advanced assessment and diagnostic reasoning.

Julie's current research interests include children and young people's experience of long-term illness and their participation, engagement, and voices as consumers of healthcare. Julie completed her doctoral study in 2020 which explored the experiences of young people living with bronchiectasis.

<https://academics.aut.ac.nz/julie.blamires>

## Reflections on Family (Whānau)-Centered nursing in Aotearoa New Zealand

As a child and youth health nurse, lecturer, and researcher the concept of Family Centered Care (FCC) is familiar. Thinking and writing about FCC provided opportunity for reflection about how this concept was actualised in my own practice in New Zealand.

When I moved to NZ from Canada over 27 years ago and began working as paediatric nurse one of the first Te Reo (Māori language) words I learned was whānau (family). Although the word whānau is commonly interpreted or translated as 'family', the meaning of whānau is more complex, multi-layered, and dynamic (Walker, 2017) and the role of whānau is recognised as an essential aspect of wellbeing for Māori (Durie, 2001). In this piece I will share a reflection on a patient case that illustrates my own ongoing learning regarding what family (whānau) centered and Te Tiriti o Waitangi\* (The Treaty of Waitangi) honouring care means within the NZ context.

\*A treaty outlining the relationship between Māori and the British Crown that affirmed the rights of Māori – referred to as 'Te Tiriti' (Te Tiriti o Waitangi, February 6, 1840, <https://waitangitribunal.govt.nz/treaty-of-waitangi/te-reo-maori-version/>)



### Make time. Make Connections

Dylan aged 9 years was a young Māori boy, with a rare condition called juvenile dermatomyositis (JDM). JDM is a complex autoimmune condition that affects skin and muscle but also the small blood vessels. Dylan had the most severe type and had several complications that brought him in and out of hospital. This story focuses on the last few weeks of Dylans life, where I was privileged to care for Dylan and his whānau (family) and the key lessons I carry with me today.



Dylan came from a **small rural community** several hours from the children's hospital. He had a large family and there were sometimes family members present and at other times Dylan was on his own. Dylans grandmother was his main caregiver and always had lots of questions for me, day, and night. Sometimes there were questions about Dylans condition, his care plan, his pain relief whereas other times it was just generally chatting, questions about me, about Canada and my family etc. Whenever I went in Dylan's room these conversations took a lot of time and sometimes made me late for other 'tasks.' I found this hard, and I didn't realize at the time, how crucial those late-night conversations and cups of tea, and sharing personal stories were for building trust with Dylan and his family. Even when pressed for time, **placing value on these moments of connection and interaction** with family members is so important. For Māori establishing these connections, lays the groundwork for building trust, aids in the removal of barriers and should be seen by paediatric nurses as a tool for building whānau strengths and working towards a family centered approach (Elder, 2017). Despite sometimes feeling pressured for time, the connection I made with Dylan and his family meant they not only trusted me, but also they felt **enabled to advocate, participate and collaborate** with the healthcare team.



### Be Flexible.

Dylan's gran often stayed over, had all the questions for the doctors and nursing team and was always the quiet advocate for Dylan. Although I was familiar with grandparents as primary caregivers, I did not fully appreciate the deeper significance of these ties between Dylan and his grandmother. For Māori, children and young people, are intimately linked and viewed as the responsibility of, their wider whānau and hapu ( including, parents, grandparents, uncles, aunts, great uncles and great aunts ) (<https://teara.govt.nz/en/nga-tamariki-maori-childhoods>). **Family and intergenerational wellbeing** is considered a collective responsibility and therefore family involvement in health care and decision making is an essential ingredient of good nursing care, creating positive outcomes and greater satisfaction within healthcare settings (Graham & Masters-Awatere, 2020; Masters-Awatere & Graham, 2019; Tipa et al., 2015). To actualise this in the case of Dylan and his whānau, the team had to learn to be flexible about the scheduling of meetings, information sharing and clinical rounds. Individualising the timing to ensure family members were present, required co-ordination of multi-disciplinary team members and sometimes drew irritation (among the 'busy' clinical staff), however this ensured the whānau were able to support Dylan and be active participants in his care and decision making and valued the role of the extended family in Dylans healthcare journey.



### Family are not visitors.

The visiting policy at the hospital was strictly two people at a time and only one caregiver allowed to stay overnight. These rules did not suit Dylan and his whānau. I remember often in the evenings, there would be 6-7 adults and 2-3 other children surrounding the bed and spilling out into the hall. They would bring food, and guitars and would sing and laugh, making lots of noise in the hallway. I can recall feeling that the presence of all these family members made it 'difficult' for me to get in the room, to assess 'my patient' and provide care. **To me it felt hectic and unsafe.** A colleague pointed out to me at the time that he wasn't 'my patient'. My colleague was right, Dylan wasn't 'my patient' he was a son, grandson, nephew, brother, and his whanau were not 'visitors.' My westernised approach was dominant, however looking back I learned **important lessons about softening this view** about being more open, respectful, and taking a more individualised approach to the rules that may exist in our hospital systems. Carter et al (2014) have previously highlighted how hospital rules around 'visitors' or 'open visiting' policies in children hospitals imply that the parent/caregiver and **family role is undervalued and misrepresented.** In NZ, although there are policies that encourage support by family/whanau for Māori patients in hospital (King & Turia, 2002), whanau continue to experience rigid hospital rules that fail to account for individual contexts and create barriers to family centered care (Masters-Awatere et al., 2024).



### Make an effort to understand and accommodate cultural beliefs and values.

In Dylans final days in hospital the family sang waiata (hymns) and other songs he loved, and his cousins' played games on his bed that seemed to me to almost crowd him out. I can recall also his auntie bringing something that looked like a poultice and placing it on his chest. Sometimes I felt compelled to put a stop to all the people and noise and what I thought was too much for Dylan but I couldn't deny that the

presence of his extended family created calm for Dylan. I realised, **despite my intention to provide 'family centered care'** that my western views influenced what I thought family centered care looked like. **Māori, like most indigenous communities worldwide, perspectives on health and wellbeing differ from mainstream** Western views and are characterised by a holistic approach that emphasises collective well-being over individualism. For Māori, children are upheld as the centre of the family; embodying the lineage of their ancestors and holding the future of their whānau, hapū, Iwi (tribal groups) and whenua, health, and well-being (Adcock et al., 2021). To provide family centered care in the NZ context is to practice in a way that builds on this strongly interwoven relationship between children, family, and culture (Adcock et al., 2021; Crawford et al., 2017). Meeting Dylan and his whānau encouraged me as new paediatric nurse to acknowledge and reflect on my own culture and understanding of what family and providing family centered nursing care means .

Adcock, A., Cram, F., Edmonds, L., & Lawton, B. (2021). He Tamariki Kokoti Tau: Families of Indigenous Infants Talk about Their Experiences of Preterm Birth and Neonatal Intensive Care. *International Journal of Environmental Research and Public Health*, 18(18). <https://doi.org/10.3390/ijerph18189835>

Crawford, R., Stein-Parbury, J., & Dignam, D. (2017). Culture shapes nursing practice: Findings from a New Zealand study. *Patient Education and Counseling*, 100(11), 2047-2053. <https://doi.org/10.1016/j.pec.2017.06.017>

Durie, M. (2001). *Mauri Ora, Dynamics of Maori Health*. Oxford University Press.

Elder, H. (2017). Te Waka Kuaka and Te Waka Oranga. Working with Whānau to Improve Outcomes. *Australian and New Zealand Journal of Family Therapy*, 38, 27-42. <https://doi.org/10.1002/anzf.1206>

King, A., & Turia, T. (2002). He korowai oranga: Māori health strategy. *Wellington, New Zealand: Ministry of Health*.

Masters-Awatere, B., Cormack, D., Graham, R., Boulton, A., Brown, R., & Tangitu-Joseph, M. (2024). Whānau experiences of supporting a hospitalised family member away from their home base. *Kōtuitui: New Zealand Journal of Social Sciences Online*, 19(1), 86-104. <https://doi.org/10.1080/1177083X.2023.2227234>

## Members Publications

### Dr Karin Plummer Paediatric procedures

Dimanopoulos, T. A., Chaboyer, W., Plummer, K., Mickan, S., Ullman, A. J., Campbell, J., & Griffin, B. R. (2023). Perceived barriers and facilitators to preventing hospital-acquired pressure injury in paediatrics: A qualitative analysis. *J Adv Nurs*. <https://doi.org/10.1111/jan.16002>

Plummer, K., Adina, J., Mitchell, A. E., Lee-Archer, P., Clark, J., Keyser, J., Kotzur, C., Qayum, A., & Griffin, B. Digital health interventions for postoperative recovery in children: a systematic review. *Br J Anaesth*. <https://doi.org/10.1016/j.bja.2024.01.014>

Plummer, K. J., McCarthy, M. C., Newall, F. H., & Manias, E. (2024). "Their Bodies Just Give It Away": A Qualitative Study of Pain Assessment in the Context of Pediatric Hematopoietic Stem Cell Transplantation Therapy. *Cancer Nurs*, 47(2), 151-162. <https://doi.org/10.1097/ncc.0000000000001199>

Rich, V., Plummer, K., Padhy, S., Barratt, T., Tran, J., Treadgold, C., & Robertson, E. G. (2024). Captains on call: A qualitative investigation of an intervention to support children with retinoblastoma undergoing regular eye examinations. *Psycho-Oncology*, 33(3), e6315.

<https://doi.org/https://doi.org/10.1002/pon.6315>

Ullman, A. J., Larsen, E., Gibson, V., Binnewies, S., Ohira, R., Marsh, N., McBride, C., Winterbourn, K., Boyte, F., Cunninghame, J., Dufficy, M., Plummer, K., Roberts, N., Takashima, M., Cooke, M., Byrnes, J., Rickard, C. M., & Kleidon, T. M. (2024). An mHealth application for chronic vascular access: A multi-method evaluation. *Journal of Clinical Nursing*, n/a(n/a).

<https://doi.org/https://doi.org/10.1111/jocn.17034>

### Dr Elisabeth Coyne Chronic disease and family

Dhar, A., Needham, J., Gibb, M., & Coyne, E. (2024). The client and family experience of attending a nurse-led clinic for chronic wounds. *Aust J Prim Health*, 30(1), Null. <https://doi.org/10.1071/py23081>

Østervang, C., Jensen, C. M., Coyne, E., Dieperink, K. B., & Lassen, A. (2024). Usability and Evaluation of a Health Information System in the Emergency Department: Mixed Methods Study. *JMIR Hum Factors*, 11, e48445. <https://doi.org/10.2196/48445>

### Dr Mandie Foster Paediatric

Al-Motlaq M, Foster M. Accreditation as an approach for quality assurance: Is it useful in improving quality of care in pediatric nursing? *J Pediatr Nurs*. 2024 Mar-Apr;75:ix-x. doi: 10.1016/j.pedn.2024.01.008. Epub 2024 Jan 18. PMID: 38238135.

Blamires, J., Foster, M., Rasmussen, S., Zgambo, M., & Mörelius, E. (2024). The experiences and perceptions of healthy siblings of children with a long-term condition: Umbrella review. *J Pediatr Nurs*, 77, 191-203. <https://doi.org/https://doi.org/10.1016/j.pedn.2024.03.022>

Foster M. Children in hospital over Christmas. *J Pediatr Nurs*. 2024 Jan-Feb;74:vii-viii. doi: 10.1016/j.pedn.2023.12.030. PMID: 38307687.

Quaye AA, Foster M, Whitehead L, Hallström IK. Parents' experiences of their child's best interests during a hospital stay in Australia. *Journal of Child Health Care*. 2024;0(0). doi:10.1177/13674935241243101

## Family nursing conference in Australia in 2025

Start developing your research ideas to share in an international audience. Family is the focus across disciplines and diseases. Great conference to attend and organisation to be part of.

International Family Nursing Association<sup>1</sup>

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<sup>1</sup><https://internationalfamilynursing.org/>



**SAVE THE DATE!**

17th International Family Nursing Conference

Promoting Family Strengths  
Globally in Challenging Times

Tuesday, June 17, 2025 - Friday, June 20, 2025  
Crown Perth | Perth, Australia  
#IFNC17

International Family  
Nursing Association

Cityscape of Perth

Next meeting Wednesday • April 10th ,1400-1500 AEST

Join the meeting now<sup>2</sup>

Microsoft Teams

Join meeting Microsoft Teams<sup>3</sup>

Meeting ID: 489 891 574 321

Passcode: aY4GsW

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*Written by Dr Julie Blamires, edited by Dr Elisabeth Coyne*

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<sup>2</sup>[https://teams.microsoft.com/l/meetup-join/19:meeting\\_NTczMmJhZmEtN2E2Yy00ZWJlLTkyNWYtZDliNDM1YTM4NGRm%40thread.v2/0?context={\"Tid\": \"5a7cc8ab-a4dc-4f9b-bf60-66714049ad62\"%2c\"Oid\": \"2fa526d7-e268-410f-9277-42360c0b3876\"}](https://teams.microsoft.com/l/meetup-join/19:meeting_NTczMmJhZmEtN2E2Yy00ZWJlLTkyNWYtZDliNDM1YTM4NGRm%40thread.v2/0?context={\)

<sup>3</sup>[https://teams.microsoft.com/l/meetup-join/19:meeting\\_NTczMmJhZmEtN2E2Yy00ZWJlLTkyNWYtZDliNDM1YTM4NGRm%40thread.v2/0?context={\"Tid\": \"5a7cc8ab-a4dc-4f9b-bf60-66714049ad62\"%2c\"Oid\": \"2fa526d7-e268-410f-9277-42360c0b3876\"}](https://teams.microsoft.com/l/meetup-join/19:meeting_NTczMmJhZmEtN2E2Yy00ZWJlLTkyNWYtZDliNDM1YTM4NGRm%40thread.v2/0?context={\)