



The emotional evolution of an oncology nurse

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You have completed your training and become a registered nurse. The sense of accomplishment and excitement is thrilling. The world is your oyster, you ask yourself where to now? A range of specialities awaits; emergency medicine, surgery, community nursing or even oncology nursing. Often referred to in more general terms as 'cancer nursing', it is not always the chosen pathway for some nurses. However, over the years many more newly-qualified nurses are entering the specialism. An immensely rewarding speciality, the continued kindness, strength and knowledge shown by those who are in it means it is one that is widely admired.

Nurses continue to constitute the largest group of healthcare professionals. Those working within the area where cancer is the focus need specialised skills and knowledge to deliver advanced care. Oncology nursing involves observing patients through their full cycle of care from diagnosis to treatment and sometimes death; intense interaction at numerous intervals takes place between the nurse and the patient. Caregiving is both rewarding and satisfying – helping people in need has been identified as a great source of motivation for nurses. However, leaving the emotional experience unexamined can have cumulative adverse consequences for nurses' physical and psychological health.

Setting boundaries

Research has shown oncology nurses are exposed to a significant amount of suffering and loss with findings suggesting novice oncology nurses are unprepared for the emotional ordeal of being an oncology nurse. The first few patients for whom novice oncology nurses primarily care can create an increased risk for secondary traumatic memories as healthy boundary setting is often limited. Setting a healthy boundary as a novice nurse can be difficult at times. At some point during our careers, every nurse has probably found it hard to leave work at work. Oncology nurses are even more vulnerable, with rates of compassion fatigue and burnout on the rise due to increased emotional labour and unpredictable workloads.



A supportive environment

How do you positively cope outside of work? Do you spend time with family and friends or have a general conversation about the hardship of the work with your colleagues? I know from experience that being an oncology nurse has both immense highs and lows. Where does work stop and time off begin? This can be a hard balance to achieve, emotional baggage is not easy to just shake off. Giving time and space to open discussions surrounding the impact on the personal consequences of caring for cancer patients needs to be shared. This could help shift the culture in the work environment to value the mental health of its practitioners as there has been a longstanding history of silence. Oncology nurses should not be overcome by deteriorating psychological health. Nursing management should strive to encourage openness and create a supportive professional environment. A valuable investment of resources including education and support programmes for oncology nurses highlighting prevention strategies for compassion fatigue and burnout could be the first step to providing sufficient support to all of us who work in oncology.

It would be next to impossible to look after someone else if we do not look after ourselves.

Look out for Kathell's blog next month on promoting a balanced lifestyle in oncology nursing, and remember, EONS is always here to support you!