

QUESTION

What role does “emotional medicine” play in oncology nursing?

Katherine Ellis, BSN, RN, is an RN at Wentworth-Douglass Hospital in Dover, New Hampshire. The author takes full responsibility for this content and did not receive honoraria or disclose any relevant financial relationships. Ellis can be reached at kellis8@mgb.org, with copy to CJONEditor@ons.org.

In the summer of 2022, the year before my senior year of nursing school, I had the opportunity to participate in a fellowship experience that allowed me to form a deeper connection with nurses and patients in the oncology specialty. The Susan D. Flynn Oncology Nursing Fellowship is an eight-week immersive experience that allows rising senior nursing students to gain clinical experience and promotes professional development in oncology nursing.

Students in the fellowship create an evidence-based project on a topic of their choice. I had a variety of ideas, but I knew I wanted my project to center around the experiences I had encountered earlier in my life, before I even knew I wanted to become a nurse. When I was in fifth grade, my mom was diagnosed with colon cancer. I remember so vividly driving to Boston with my three younger siblings and my dad to visit my mom when she was in the hospital. Despite her sickness and the chemotherapy racing through her body, she would always say that seeing us was like her own form of medicine that did not involve IVs or tiring side effects.

Now, the world of health care has been turned upside down, with a global pandemic that has changed the way patients, nurses, and families interact within a hospital or infusion clinic setting. I wanted to find out more about what nurses were doing to combat this loss of “emotional medicine” that was so important to my mom. Thus, for my fellowship project, I sought to examine how nurses adapted their practice to support patients who could not have loved ones around because of COVID-19 restrictions.

I completed my evidence-based project at Wentworth-Douglass Hospital, a community hospital in Dover, New Hampshire, working in both the inpatient and outpatient oncology settings. The majority of my time was spent at the Seacoast Cancer

Center (SCC)—now the Mass General Cancer Center—infusion clinic, where I worked five days a week with patients and nurses. As part of my project, I had discussions with nurses in loosely formatted interviews, asking questions that focused on their experiences and current practices supporting patients during the pandemic.

Through my interviews, I gathered that nurses working at the SCC generally fit into six different categories of ways that they adapted their practice. Although they embodied key nursing roles such as communicators, educators, and caregivers, these nurses also took on new roles such as family members, adapters, and protectors. Nurses at the SCC discussed walking with patients to the parking garage to meet family members and developing a unity mentality on ways to protect an already vulnerable patient population.

Most notably, however, I found that by providing nurses with the space and time to discuss their experiences adapting their practice, they were also able to explore changes they noticed in themselves. Many of the nurses thanked me for the opportunity, and multiple nurses became emotional during their reflections. This insight helped me understand the positive impact that conversations with fellow nurses can have on a stressful day or patient situation.

When looking back on my fellowship experience, I realize that it came at an interesting time during my path to becoming a nurse. As a student, it was unique to be able to give back to nurses in a way I was not expecting from my time as a Flynn Fellow. At my project

presentation, I shared my recommendation that nurses caring for patients with cancer need space to reflect on the changes that continue to be made in health care. Through my project, I had discovered the importance of this type of emotional medicine in the care of nurses as well as patients. Continuing to find ways that nurses can converse about and connect over shared experiences is one way to give support to nurses who have overcome the challenges I witnessed during my time at the SCC.

KEYWORDS

nurse well-being; student nurse; nurse fellowship; supportive care; COVID-19

DIGITAL OBJECT IDENTIFIER

10.1188/23.CJON.688

RESOURCES

- **Flynn Foundation**

Offers a fellowship program to address a workforce gap in oncology nursing
<https://bit.ly/3tOTpQd>

- **Oncology Nursing Society**

Provides resources for nurse well-being
<https://bit.ly/3FKnUKl>

- **ONS Voice**

Discusses reflection through storytelling
<https://bit.ly/3s1KeMi>