

Nurses Living with Mental Illness

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Aims

To gain insight and understanding into the workplace experiences of nurses living with mental illness (independent of their work) through exploring the relevant literature.

Objectives

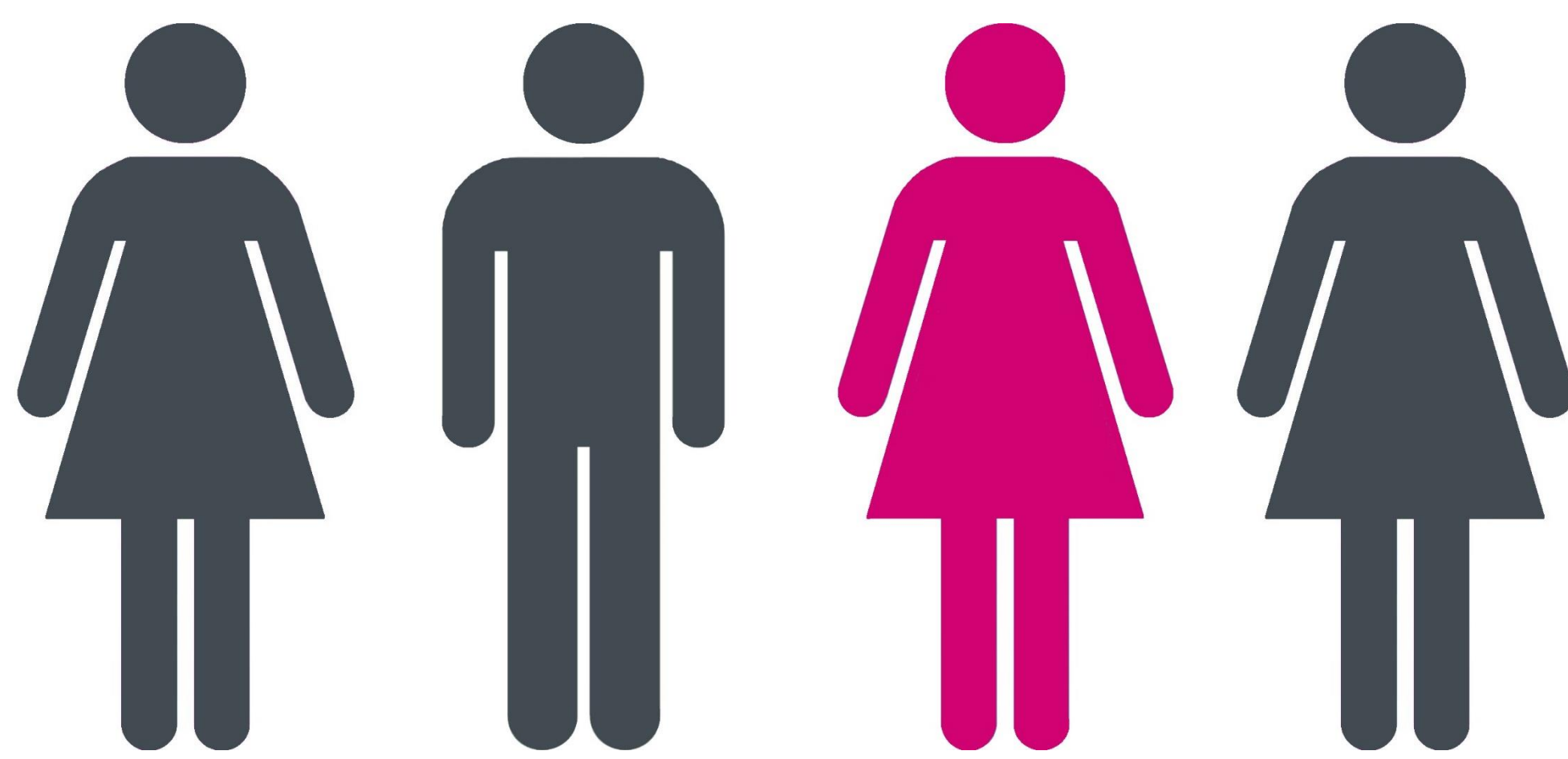
- To learn what unique contribution (negative or positive) they have for the profession.
- To review this literature as a means of optimising the nurses' ability to perform their nursing duties when their mental illness necessitates additional support.

The experience of prejudice, ignorance and discrimination was found in 62% of the articles.

These individuals, who would normally have a secured membership to the nursing 'in-group', possess an unanticipated and undesirable trait which breaks the claim their original attributes would have had on their co-workers. This undesirable trait is their mental illness.

Stigma

"...mental illness has no respect for occupational attainments,



social status or academic degrees." – Olson (2002)

In 38% of the articles it was found that the nurses had lost their former sense of self-conception due to the existence of opposing 'nurse' and 'patient' identities.

Identity

Recommendations for practice

- Research aimed specifically at the workplace experiences of nurses living with non-work related mental illness.
- Longitudinal studies as a means of identifying outcomes of interventions (for example, workplace amendments and treatment interventions).
- Additional emphasis on mental health literacy in the teaching of nurses.

Within 69% of the articles the nurses used their experiences to positively influence their practice.

These nurses report having deeper insight and understanding, subsequently increasing their compassion and empathy. Others become advocates for patients with similar vulnerabilities.

Benefit finding

Conclusions

Through constructing a more positive "wounded healer" identity, overcoming the adversity of stigmatisation and using their experiences to positively influence practice, these nurses promote resilience. This can only lead to increased hardiness within the workforce, subsequently leading to an increased retention of nurses as a whole.