

Arts-informed research dissemination: Patients' perioperative experiences of open-heart surgery

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ABSTRACT

BACKGROUND: The integration of humanistic approaches, in which patients' personal experiences are acknowledged and inform practice, is integral to optimal healthcare.

OBJECTIVES: In this study, we used an arts-informed narrative approach to understand and highlight the experiential and subjective qualities of illness and recovery from heart surgery.

METHODS: An arts-informed analysis was conducted and we represented participants' stories of open-heart surgery through the media of poetry and photographic images.

RESULTS: By using the arts as a method for analysis and dissemination, patients' unique and deeply personal experiences of heart surgery were illuminated.

CONCLUSIONS: The arts can be particularly beneficial in healthcare and cardiovascular research, because they can inspire practitioners to become refamiliarized with the emotional, embodied, and psychosocial perioperative experiences of heart surgery from patients' perspectives.

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"I may be the 7,024th patient... but at this particular time, I'm the one that's the patient... Lay your healing hand on me, if it's just to touch my face, my hand, just

to show that interest in me It's not just your body that can be in trouble, it can be your mind and your spirit, so you need the human touch."¹ (pp129-130)

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This frank and emotionally laden statement was articulated by a man who had undergone open-heart surgery and participated in a narrative study. This primary research was intended to explore patients' narratives of heart surgery and recovery in the context of technological environments.² A key finding pertained to the importance of humanistic approaches to healthcare, which this participant so eloquently expressed. Although individuals recognized that they may literally be the 7,024th patient entering the healthcare system, they do not want to be treated as such.

A humanistic approach is defined as a conscious consideration of what it means to be ill and human.³ As practitioners become attuned to patients' unique attributes in terms of the contextual variables related to the experience of illness, the integration of this knowledge into practice is vital. Nurses are well trained and often engage in a holistic approach to care, demonstrating therapeutic communication and empathy. Many studies have brought attention to the social, affective, and psychological dimensions of recovery from heart surgery.^{4,5} Researchers, however, still find that patients believe a humanistic focus is neglected.¹ As a result, our team was inspired to consider critically how research evidence specific to this finding could be disseminated in ways that more fully affect practice.

An integral component of healthcare research involves considering the type of dissemination method that may facilitate the translation of knowledge into practice. Keen and Todres⁶ indicated the importance of developing the method so that it is tailored to the message to be conveyed. Based on the study's results, we conducted an arts-informed, secondary analysis to design a dissemination product that would emphasize the experiential and subjective qualities of illness. We arrived at the vision of translating participants' stories into poetry and photographic imagery, displayed as a three-dimensional, sculptural installation. This approach was inspired by patients' stories and their experiences of heart surgery and recovery.

Patients undergoing heart surgery encounter contemplations of mortality, bodily disruption, and unfamiliar, technologized environments. Patients have longed for a system that is more humanistically oriented,⁷ in which unique attributes of care and authentic dialogue about concerns are integrated.⁸ Problematically, cardiovascular environments are often fast-paced and technologically structured. Practitioners are vigilant in attending to and implementing evidence-informed protocols and algorithms. The stability of the body is the foremost criterion for treatment and discharge. Decision-making is intimately shaped by protocols, pathways, and algorithms to the extent that these routines of care become deeply embedded in practitioners' ways of thinking and being. Although the patient's emotional, embodied, and psychosocial experiences are

significant elements of recovery, practitioners' capacity to attend to these elements can be constrained within the technologized environments of care. Although a focus on routines and technology is critical, it can sometimes result in a sense of dehumanization for patients.^{9,10} Technological vigilance can result in practitioners concentrating on the physical body to an extent that patients feel unseen and unheard.¹¹ Although most practitioners recognize the significance of balancing the subjective nature of human experience with the provision of objectivity through technology, this balance is too often not achieved.

Here, we represent participants' stories of open-heart surgery and recovery, using the arts as a method of dissemination. We use poetry and photographic imagery to recount patients' narratives. In our primary study, we included three research questions: How do patients narrate technology in stories of heart surgery? How do patients frame identity in these narratives? How are the moral concerns narrated in these stories? In the secondary phase, we used the arts in an analytic and a dissemination method to refamiliarize practitioners with, and reemphasize the significance of, the emotional, embodied, and psychosocial perioperative experiences of heart surgery from patients' perspectives.

METHODS

An arts-informed focus on narratives constituted the methodological approach of this study. The researchers in the primary study² used a narrative methodology that involved a focus on stories.^{12,13} This approach entailed attending to the shaping forces and narrative components of stories, such as characters, voices, and situations.^{14,15} For example, an integral element of the methodology involved taking into consideration the ways that characters (eg, practitioners or family) and their voices shaped participants' stories. In addition, what were the common situations (eg, tensions and highlights) in stories, and how were they narrated and resolved by participants? We maintained a focus on participants' narratives, and augmented this arts-informed method with further attunement to the aesthetic qualities of the data. This theoretical orientation to the aesthetics¹⁶ facilitated close observations of the sensory qualities within participants' stories, so that we could perceive the world through the patient's lens.

Sixteen participants, including 8 men and 8 women, were recruited through convenience sampling at a preoperative clinic in a regional hospital. Six participants underwent coronary artery bypass graft, 6 received mitral or aortic valve repair/replacement, and 4 experienced a combined procedure. They were aged 59 to 85 years. Two semistructured interviews were

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