



The involvement of relatives in the care of patients in medical settings in Australia and
Saudi Arabia - an ethnographic study

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Declaration

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بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ
وَأَجْرُكُمْ فِي مَا كُنْتُمْ
تَعْمَلُونَ

Abstract

Relatives play an essential role in looking after patients in hospitals and help to improve quality of care in many ways. Currently, hospital policies acknowledge the role relatives play as partners in the healthcare sector; their role is also encouraged through the 'family and patient centred care' model. The role of relatives as advocates is a key element in critical health settings, where patients need help from family members to make decisions regarding their treatment. However, some healthcare professionals see a relative's presence in hospital as a threat to a patient's autonomy. Additionally, there is little known about how nurses and relatives respond to the involvement of relatives in patient care in a healthcare context, and the impact of their participation on quality of care and the fundamentals of care. The aim of this study was to explore the role relatives play in the care of patients in medical settings in Australia and Saudi Arabia and to understand the nature of this involvement. This is an ethnographic study based on an interpretive paradigm. The study was conducted in acute hospital medical wards, one in Australia and another in Saudi Arabia. Data collection was carried out over a six month period, three months spent in each setting. The Spradley data analysis framework was adopted to analyse the results of this ethnographic inquiry (Spradley, 1979, 1980). These indicated that there was no shared understanding of the role of relatives. In both fields nurses and relatives faced ongoing ambiguity about the role relatives should play in the hospital environment and nurses were challenged by the unpredictability of relatives' participation in patient care. The fear of taking responsibility and uncertainty about their responsibility towards relatives led nurses to take a varied and individualised approach to the involvement in patient care. Relatives were unclear about how to behave in the role, what the needs of patients were, and whether they were contributing to care and this increased their frustration. Lack of guidelines around the role relatives play in patient care affected the interaction between relatives and nurses and their ability to work in partnership.