

Some Comments About Roles

by

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THE concept of "the role" enjoys a certain popularity as one or another groups of people seek to identify their place in the scheme of things, to clarify to themselves and to others their role, their own "place in the sun." The concept of roles is useful also on the individual level. It is recognized that each individual has a role. "All the world's a stage", says Shakespeare, rather grandly, "and the men and women are merely players on it; they have their entrances and their exits." That is to say, they have their "roles."

A role is defined as a part to play which has certain sets of behaviours which are suitable and appropriate for that particular role. These behaviours are *learned*. It is also noted that each person in his lifetime has many different roles to play. For example the nurse has her nursing role and there are certain behaviours, ways of acting, which are appropriate for her in that role which would be inappropriate for her in another setting. But in addition to her role as a nurse, she has other roles. She is a woman; she is a daughter, may be a sister, probably a wife and mother, a daughter-in-law and perhaps a mother-in-law. So, there are six roles and there may be more, including such temporary roles as a member of committee, delegate to a conference, actor in a drama and many others. Each role has its own set of appropriate behaviours; each role makes demands on the time, talents, attention and energies of the nurse. Perhaps her child awakens with a fever; as a "good mother" she wants to stay at home with her child; as a "good nurse" she wants to appear punctually on duty and devote her time and efforts to providing skilled nursing care to patients. Conflict arises: She cannot do both! How to resolve the conflict? The concept of roles *describes* the problem of conflicts between roles but does not *solve* them. Shall she go on duty and

spend the day worrying about the sick child, seeing his wan and tearful face as Mommy "deserted" him? Or, alternatively, shall she stay at home with her child and worry about what the matron and her colleagues are thinking about her failure to "do her duty"? Perhaps the conflict is resolved by a loving grandmother who can be a substitute mother for day. The point is that conflicts arise in life and need to be resolved. The way in which these conflicts are resolved depends upon our maturity, ego strengths, resources available and other aspects of the situation.

The patient also has roles to play. From the moment the patient is admitted to the hospital in addition to whatever roles he carries in life, he has added another, 'the Patients.'

Each role in life, we have said, has certain behaviours, ways of acting, that are appropriate for that role. We have also said that these are *learned*. Learning takes time. The patient has to learn how to adjust to the hospital routine (which may be organized around the needs of the hospital to get everything done, rather than the needs of the patient); he or she also has to cope with all the physical and emotional strains which this illness poses for him now. The patient uses energy to learn his new role; he has to learn to cope with the demands of being a patient in hospital and at the same time he may be overwhelmed with many anxieties and worries which illness brings, as well as pain and other physical symptoms.

And it is here that the role of the nurse and the role of the patient inevitably interact. Whatever the nurse's other roles be when she wears her uniform and appears at patient's bedside, she is "the nurse". And there is a growing body of knowledge that supports the belief that the way in which the nurse uses herself to fulfill her nursing role has a great deal to do with the outcome of the patient's illness.

It is obvious that the skills and knowledge of the nurse play a crucial role in the well-being of the patient. In addition, there is another important aspect, and that is the realm of inter-personal relationships. In modern nursing, knowledge and skills are as important as they ever were, but by themselves they are not enough. An important skill of the nurse, according to Gladys Sellow, in her textbook on Paediatric Nursing, is "the ability to establish and maintain good interpersonal relationships with the patient and his family." These relationships help the patient to cope with his illness.

It is the nurse who has an important role in helping the patient to cope with the stress of his condition. If she has an understanding and genuine interest in the well-being of her patient, her activities greatly support the patient's coping abilities. Helping the patient to cope with anxiety of being ill is a skill. Skills can be learned. This implies an understanding of the ways in which individuals respond to stressful experiences and a willingness to accept the patient as he is and to attempt to meet the patient's needs. False reassurances that "everything will be alright" rarely, if ever, give reassurance to the patient. But, nursing care which shows a sensitive awareness of the patient's spoken and unspoken needs and attempts to meet those needs, while carrying out physical care and physician's orders, does inspire confidence. The patient is helped to realize that illness is something with which he can cope; his own resources come into play and healing processes are facilitated.

The purpose of this article is to sharpen the awareness of nurses regarding their role and to stimulate their empathatic understanding of all that which the patient faces in coping with his new and unwelcome status of "the Patient", a role which he/she must learn how to play.