

Communication among mental health nurses: a field study of mental health nursing practice

Niels Buus, M Nurse

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Official opponents: Magnus Petersen, Professor, MD Michael Traynor, England, and Professor, MD Eli Haugen Bunch, Norway.

Tutors: Associate Professor, MD Helle Ploug Hansen, and Raben Rosenberg.

Correspondence: Niels Buus, Enheden for psykiatrisk forskning, Aalborg Psykiatrisk Sygehus, Moelleparkvej 10, 9000 Aalborg, Denmark.

E-mail: psyk.nbu@nja.dk

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ABSTRACT

This PhD dissertation was aimed at gaining insight into mental health nursing practice by focusing on nurses' communication with each other. Starting from a general concern for the complex ways in which mental health institutions produce clinical knowledge about patients, different areas of mental health nurses' mutual communication was examined in detail: nursing records, nurses' shift reports, interdisciplinary conferences, and the continuous everyday interactions.

The empirical analysis combined an anthropological fieldwork study with a detailed discourse analysis. Fieldwork took place at two Danish mental health hospital "special observation" wards for six and four months respectively. Data were systematically construed by means of continuous fieldnote writing, by transcribing audio-recordings of recurring meetings, by photocopying material written by the nurses, and, finally, by continuously background-interviewing the nurses. The analysis followed the outline for discourse analysis set by N. Fairclough. The major results include:

1. In their mutual communication, the nurses used everyday language with the occasional use of technical words or words with special local connotations. For outsiders, this language use was difficult to understand, because it lacked textual cohesion and descriptions seemed idiosyncratic. However, the language use appeared perfectly coherent for the nurses, as they both mastered the particular genre and had prior knowledge of the conversational topics.
2. Clinical knowledge was mediated by social processes; explicit knowledge of the clinic was produced, negotiated, and interpreted among the nurses in the clinic. This production of clinical knowledge was particularly influenced by hierarchical positioning among the nurses.
3. The nurses' daily language use was constrained by an "institutional order of discourse" which comprised a managerial discourse and a medical-psychiatric discourse. The managerial discourse demanded visibility and control of the nurses' activities, and it forced the nurses to put their experiences into writing. The medical-psychiatric discourse was evident in the collaboration between the professional groups at the interdisciplinary treatment conferences. Through the turn-take system a medical reading of the clinic dominated and re-enacted hierarchical differences between the professions.
4. The nurses' production of clinical knowledge did not follow a particular discursive format. The nurses described everyday hap-

penings and events using an informal logic which reflected their engagement in the commonsensical everyday world.

The results were used to recommend an outline for future research and clinical changes.