

Māori whānau experiences of critical illness in Wellington Intensive Care Unit

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Summary

This kaupapa aligns with Te Niwha's mission to improve pandemic preparedness. Aotearoa's response to COVID-19 was hard and fast, to reduce the spread; a team of five million. Systems used to limit public gatherings and contact points extended to the hospital. The Intensive Care Unit (ICU) already limits the number of visitors a patient can have at the bedside. While these visitor restrictions are surprisingly more liberal than the ward, more restrictive periods during COVID-19 meant whānau were further restricted, and in some cases, unable to see their loved ones. Māori are a collectivist culture and being able to support loved ones through illness is important for the patient and whānau visiting. Further, a meta-analysis performed by Nassar Junior et al. (2018), brought together a large group of studies looking at infection spread in ICU to compare open visiting (current practice for Wellington ICU), and restrictive visiting. The analysis examined 16 qualitative, and 7 quantitative papers, and found open visiting did not increase the risk of ICU-acquired illness, while reducing symptoms of anxiety in patients. Although, they do note concern for increased risk of burnout in nurses.

The goal of this kaupapa was to provide research to inform policy for pandemic preparedness and better equip Māori whānau to manage the complexities of having a whānau member admitted to the intensive care unit (ICU). The Royal Commission of Inquiry into COVID-19 Lessons Learned (2024¹), have been reviewing how we as a country can do better next time, and it is worth highlighting their findings on the impact such strict visiting restrictions had. Patients left feeling alone, whānau distressed, and calls for a more compassionate approach. This is a problem with the rapid implementation of such strict visiting policy and having no evidence to the contrary. This kaupapa will make it evident just how important it is to whānau to be there for patients. Prioritising being beside their loved one over their own wellbeing – something that can't be totally understood until you're in that situation. How overwhelming it is to navigate the ICU but not being able to do it alone – whānau are there for the patient, but they are ultimately supporting each other.

Te Tuhinga Whakarāpoto - Te Niwha Abstract Submission

To understand this, whānau of rima (five) Māori patients admitted to Wellington Hospital Intensive Care Unit, participated in a hui to share their experiences. Months of whakawhanaungatanga with these whānau has provided rich data, in the form of transcripts from the hui. Reflexive Thematic Analysis, a qualitative approach to data analysis was used to understand these experiences. Overall, whānau who participated expressed their appreciation for the level of care their loved one received, but it is clear that navigating the ICU journey is not simple. They are dealing with seeing their loved one critically unwell with lines and tubes going in and out of them. Whānau were worried and uncertain, being beside the patient showing their love and support is prioritised. During the journey whānau were also managing the expectations of what their whānau think is in the best interest of the patient. It is not easy to disseminate what the doctors have told you to varying levels of expectations and queries from their whānau. The benefit the whānau that participated in this kaupapa had, was that there are only restrictions to how many could be at the bedside, not who could get into or travel to the hospital.

The impact of this research will primarily be seen in ICU. However, disseminating the research and publishing journal articles will provide policy makers with what it means for whānau to visit, and the importance. This kaupapa would not have been possible without the involvement of the whānau. However, there were some difficulties with recruitment. Reflecting on the recruitment process and how to best engage whānau in whānau centred research in the ICU is needed for future research. The ICU is an important part of the healthcare system and provides lifesaving care to patients. As many participants stated, they are grateful for what the ICU does, and feel their loved one likely would not be alive if not for the ICU. Engaging with more whānau, to get a larger picture of what it means to experience ICU in Aotearoa is necessary to improve whānau wellbeing during this stressful life event. It is clear that future policy requires a compassionate approach, that balances the best interest of public health, social impacts of visiting restrictions, and healthcare worker wellbeing.

References:

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Royal Commission of Inquiry into COVID-19 Lessons Learned. (2024). *Royal Commission of Inquiry into COVID-19 Lessons Learned: Main report*. Wellington, New Zealand: Royal Commission of Inquiry. Retrieved from www.covid19lessons.royalcommission.nz