The Role of Nurse Advocate in Caesarean Sections on Maternal Request

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Increasing rate of caesarean section in Canada (CIHI, 2018)

WHO recommend a caesarean rate of less than 10% (WHO, 2015)

Women are requesting caesarean sections in the absence of medical indications (Gallegher et al., 2012; Liu et al., 2007)

HCPs are challenged to choose whether or not they will support women’s choice
• There is a lack of clear guidance for maternity nurses

• Recommend physicians explore context of a woman’s choice and if comfortable, to support her choice by performing the caesarean section. If not to refer to another physician (NICE, 2013; SOGC, 2018)
Ethical or Moral Distress

• “Arises when nurses are unable to act according to their moral judgement” (Rodney, 2017, s7)

• Can lead to anger, frustration, guilt (CNA, 2017)

• Act as catalyst for self-reflection, collaboration, growth, and advocacy (Rodney, 2017)
Knowing the broader context of choice may help resolve nurses’ ethical distress in caring for these women.

Medical procedure developed as life-saving necessity (Lee, 2008)

Women’s rights movements, industrialization, consumerism in health care have contributed to the shift from necessity to commodity (Imanoff et al., 2016)
Patient Perspective

• Sense of control promotes positive physiological and psychological response (Marmot, 1991)

• Feelings of losing control during delivery have been implicated in PTSD and PPD (American Psychiatric Association, 1994; Saisto & Halmesmaki, 2003).
Role of the Nurse Advocate

- Promote individualized care (Waters & Easton, 1999)
- Women feels in control (Saisto & Halmesmaki, 2003)
- Higher birth satisfaction (Saisto & Halmesmaki, 2003)
- Promotes positive transitions into motherhood
Role of the Nurse Advocate

- Nurses need to respond to increasing demand
- New role of nurse consultant
- Advocate for all choices equally
- Provide space to discuss and coordinate individualized care
- Promotes positive transitions into motherhood

(Imanoff et al., 2016)
• Parent-child interactions are foundational (Bowlby, 1988)
• Maternal stress, anxiety, and depression are considered “environmental factors” that influence an individual’s health across their lifespan (CIHR, 2017, para, 2).
What is at Risk?

- Assess quality of relationship
- Promoting healthy relationships
- Referring to other services as needed
• Choice is complex and historically situated
• Impact of allowing choice on maternal mental health and child development
• Nurses are in a unique role to act as advocate and have potential for new role of consultant
References