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BACKGROUND

Elder neglect in nursing homes is a preventable and unnecessary burden in elder care. Nursing home staff are at the frontline of detecting and preventing neglect, but may also be the ones causing it. It is essential to understand why and how neglect happens in order to recognize, expose, and prevent its occurrence.

Our aim was to generate new knowledge on the processes leading to and allowing neglect to continue in Norwegian nursing homes, based on the research question "How do nursing homes" staff perceive and reflect on neglect?"

OBJECTIVES

After attending this session, participants will increase their knowledge of nursing home staffs legitimizing of neglect as one of the processes leading to and allowing neglect to continue in nursing homes.

After attending this session, participants will be able to understand that increased awareness of the process of legitimizing neglect by nursing home staff, may be a way of reducing the risk of neglect in nursing homes.

A qualitative exploratory design with a constructivist grounded theory approach were chosen.

Five focus-group discussions (20 participants, total) and ten individual interviews were conducted with nursing staff in Norwegian nursing homes.

We found that staff resisted the use of the word "neglect" which they would reserve only for serious acts that result in major negative consequences. Instead they preferred to uses terminology such as "forgotten" or "missed" care, and tended to both legitimize and normalize it under certain circumstances.

Those circumstances include times when care demand is experienced greater than what the care staff can provide, which may be for reasons related to staffing, resources, and need for efficiency.

Legitimizing neglect in nursing homes

METHOD

RESULTS

The gradual shift between judging actions as neglectful or not are made possible when nursing home staff legitimize and normalize neglect, and this is further allowed by a care culture favoring staff-centered care over patient-centered care.

Increased awareness and reflections on these processes may be a way of reducing the risk of neglect in nursing homes.



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CONCLUSION

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