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Karin Götling, Ph.D
Uppsala University
Department of Sociology

karin.gotling@soc.uu.se

Dilemmas in practice. Handling of ambivalence in a neonatal intensive-care unit

At neonatal intensive-care units conflicts between basic values, such as the one between saving life and minimizing suffering, are constantly present.

This study (dissertation) focuses on how the ambivalence thus created is dealt with in practice by medical staff, specifically focusing on the significance of contextual factors and how the organisation shapes the process of handling ambivalence.

Empirical data were collected by way of fieldwork at a neonatal intensive care unit in Sweden. Everyday care was studied by way of participant observations and a number of interviews with medical staff were performed

Handling of ambivalence is understood as a collective process in which all professional groups participate, although in different ways depending on their position in the division of labour. The whole working group is involved in creating the capacity for action that is necessary for critical decisions.

Ambivalence is primarily handled with the aid of knowledge. For knowledge to work as a tool for handling ambivalence, it must display certain qualities. The knowledge manifested must be convincing, appear reliable, unify, and be interpretable in normative terms. Nurses and doctors play different, and partly conflicting, roles in the process in which such knowledge is constructed. But in the end, to work, knowledge has to be accepted by both groups as the basis for a legitimate decision.

From the staff's perspective, the parents become key figures in the process of handling ambivalence. Three different ways in which parents can influence this process are identified.