

# Nursing philosophies and theories essay



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Caring in nursing has received a lot of scholarly effort. A lot of theory starts from the premise that the central concept of nursing is caring. The theory of nursing as Caring is presented by Boykin and Schoenhofer is grounded in several assumptions which are that persons are caring by virtue of their humanness, persons are whole or complete in the moment, personhood is living life grounded in caring, personhood is enhanced by participating in nurturing relationships with caring others.

The theory also holds that nursing is a profession and a discipline at the same time (Boykin and Schoenhofer, 1993). Their theory presents the notion of person as complete or whole. Watson's theory of human care views nursing as a human science whose major focus is the process of caring for individuals. The theory is based on humanism and metaphysics (a philosophy of knowing and being).

The goal of nursing as defined by Watson's theory is to help people get a higher degree of harmony with the body, mind and soul. Watson maintains that the goal is achieved through caring transactions. She describes ten carative (as opposed to curative) factors which include sensitivity to others and self, helping-trusting, human care relationship, expression of negative and positive feelings, transpersonal teaching and learning, supportive, protective and/corrective mental, physical, societal and spiritual environments, existential-phenomenological spiritual forces, human needs assistance and creative problem solving processes (Watson, 1979; Watson, 1985). The two theories share some similarities, for instance, they both describe nursing from a humanistic stance.

There is some slight difference in the origins of the caring theories but the derivation from human sciences is evident from the language and terms used in the theories. Both theories mention value systems, relationships, human freedoms all of which are characteristic principles on which the context of a human science is founded. Additionally, both theories view an individual as more than and different from the sum of the parts. The individual also has the freedom to choose and health is seen as a process of becoming and as a set of priorities in which the goal of nursing is to improve the quality of life from the patient's perspective. Boykin and Schoenhofer's theory is a more recent addition to the literature on caring. The theory is simpler than Watson's and has a less measurable approach compared to Watson's theory.

Its approach is also more personal. Watson (1985) defines the person as an individual who has three spheres of being, that is the mind, spirit and body. These spheres are influenced by the person's concept of themselves. This affects the choices that they make. In consideration to the Women's and Children Health practice setting, it means then that I have to consider the women and children who come to the clinic in the context of their environments.

This includes their community, society, culture or family. Thus in addressing the client's problems I am concerned in how the woman and her child are relating to the environment. To be able to enter into the women's phenomenal field, it is important to ask the women questions that will assist them to tell their life stories. Thus it is more likely that the women will provide information that will ensure they get holistic care. The questions

include questions about the life experiences of the women, their cultural and spiritual beliefs, their goals and their expectations.

Part II In a study of patient's lived experiences, a phenomenological approach was used to determine the reasons that led many women who felt a lump in their breasts to delay seeking treatment. The study results showed that there were three recurrent themes which were fear, spiritual needs and need for information (Demir et al, 2008). The study is relevant to clinical practice in the sense that there is an information gap amongst the patients who underwent excisional breast biopsy. The patient's spiritual needs and fears of losing their breasts, having cancer and dying in surgery were also not met. Using the humanistic perspective as described by Rosemary Parse, the nursing is seen as the ability to struggle with the patient through experiences related to suffering and health with regard to the individual's health potential. The goal of the nurse in Parse's humanistic perspective, is to achieve true presence in bearing witness and in being with others as their health patterns change (Parse, 1992; Freshwater, 2003).

Parse identifies this as 'health as human becoming'. With regard to the case study above, in using the humanistic approach as described by Parse, there needs to be more humanness in dealing with the women who have to undergo excisional breast surgery. This can be initiated right from the women's clinic. By working towards creating working relationships that acknowledge the healing capacity of the client, the women are more likely to seek follow up care when a lump is identified. This means providing more information regarding the importance of early intervention once a lump is identified, talking to the client with consideration for their holistic care.

This includes care for their spiritual needs by asking about the woman's bodily sensations, goals, feelings and expectations. Such conversations provide the necessary information to discover whether the client is dealing with their current situation and if not, reasons for this can be explored and the necessary action taken such as counseling if the nurse is able to do so or referral.