

Research Paper

THE UNDERSTANDING OF THE CONCEPT CARING FOR PROFESSIONAL NURSES IN WINDHOEK

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ABSTRACT

The aim of this study was to explore and describe the concept caring in nursing as understood by professional nurses. A qualitative approach was used. The study was guided by Swanson's theory of caring and the philosophical basis was that of constructivism. The population was all professional nurses practicing in private and public hospitals in Windhoek and purposive sampling was used to select the hospitals and participants for the focus group discussions. Thematic analysis was used, to analyze the data and involved describing and interpreting data and also assisted in selecting the codes to construct the themes. Analysis of the data were conducted by a step-by-step manner. The results of the study were able to accurately portray the professional nurse's understanding of the concept caring which included the following themes, being a person who exercised caring during their nursing interventions, with sound interpersonal relations and a person who adheres to the values of the nursing profession. Participants also experienced obstacles regarding the understanding and exercise of caring because of challenges that they face to fulfil their caring duty. It was concluded that the concept of caring is a content specific interpersonal process which is characterized by professional knowledge, skills and interpersonal sensitivity of nurses, which result in the protection, emotional support, and the meeting of all the needs of the patient. The results of the study could contribute to an explanation and understanding of the nature of caring as a fundamental feature of the nursing profession.

Keywords: Concept of caring in nursing, Nature of nursing, Professional nurses, Role of a nurse

INTRODUCTION

Nursing is as old as mankind and primarily it means helping people sick or well in the performance of those activities contributing to health or its recovery or peaceful death, that people would perform unaided if they had the necessary strength, will or knowledge (Henderson, 2006). Nursing is usually done by nurses and there are different categories of nurses. For the purpose of this study the focus is on professional nurses. A professional nurse is someone who underwent and completed a prescribed time of training and education in nursing and midwifery science at a recognized training institution (Namibia Nursing act 33 of 2005). Thus, nursing is a caring profession and therefore, the dynamic essence of nursing is due to caring. The concept of caring emerged during the 1950's but many factors hampered the development of the concept (Lavadanti, 2014). Historically, the description of what caring in nursing is defined

from different perspectives, from the meaning and essence of nursing to everyday direct care of patients (Drahašová & Jarošová, 2016).

Caring involves a sense of self identity and spirit of a person. It also involves a pure sense of dedication and commitment to the patient (Watson, 1985). Leiniger, another theorist, held that caring for people of many different cultures was a critical and essential need, yet nurses and other health professionals were not prepared to meet this global challenge. Patients culture is important and need to be addressed when nursing care is provided, culture can influence care because patients differ in their beliefs, visions and expectations (Leiniger, 1985). Thus, nursing's goal through the caring process is to be responsive to the needs of the patients to assist them to gain self-confidence again during the recovery stage to be able to adapt to the real life situations and live a quality life again. To fulfill a caring role, professional nurses must understand what the concept of caring

entails. Furthermore, the functional role of nurses are many times described as to diagnose and treat human responses to potential health problems. This description however, underscores the importance of nurses providing care to patients. In statements like this, the essence of nursing's values, expertise, knowledge, and passion are sometimes overlooked (Watson, 2012).

In her/his caring role, the nurse must relate to the patient as a human being, therefore, the nurse patient relationship should include more than nurse patient contact per se. It should include an ability to cultivate a human and a compassionate approach in providing care and to appreciate the importance of human touch in his/her healing service (Searle, 2000). Nursing has a long history of needing to set the priorities of care, there is always more to do for a patient than there is time (Foss-Durant, 2014). There are many reasons why the nursing professional sometimes fails in this regard. There needs to be understanding as to why people in the "caring professions" cease to demonstrate care. Previous studies have shown that nurses experiences difficulties in applying all aspects of caring in their daily dealing with patients (Sargent, 2012).

Caring also involves demonstrating characteristics such as empathy, sensitivity, kindness and warmth. One of the factors that underpins poor care is an attitude to care that is task based rather than person-centered care (Epstein & Street, 2011). Since the concept of care is still debated, there is a need for continuous, critical scientific investigation on the meaning of important concepts like caring. Hence, this study aimed to explore and describe how nurses understand the concept "caring" to describe the factors that result in good or poor care and to identify the values that are important in being able to provide good care.

MATERIALS AND METHODS

Research Design

A qualitative design was selected because the study was concerned with understanding the process in the social and cultural contexts that shape various behavioral patterns. It strives to create a coherent story as it is seen through the eyes of those who are part of that story, to understand and present their experiences, meanings and actions as they encountered and engaged with and lived through the situation (Polit & Beck, 2018). The study was also exploratory because the researchers have employed an open, flexible and inductive approach to the study in an attempt to acquired new insights into the phenomenon the meaning of professional caring. This study was also descriptive in order to obtain complete and accurate information about the understanding of professional caring. The researchers described in detail what each participant cited as their understanding of the concept of

"professional caring". The setting of this study was in local hospitals in Windhoek, Namibia.

Population

The target population in this study refers to the accessible populations that have common characteristics and include all registered nurses in hospitals private and public in Windhoek. There are seven public and private hospitals in Windhoek.

Sample and sampling method

A purposive sampling method was used. The sample was composed of individuals that contain the most characteristics of the population that fit the criteria required for the phenomenon under study. All hospitals in Windhoek were approached to ask for permission to conduct the study, and only four hospitals responded gave permission. The participants from these hospitals were selected according to the following inclusion criteria, registered nurses working in the selected hospital wards, with one-year minimum experience, of any age and gender and willing to participate in the study. Six participants from 3 hospitals, and 10 participants from 1 hospital accepted the invitation to take part in the focus group discussion.

Data collection

Four Focus group discussions lasting for 40 minutes were conducted. This method was selected because it allowed participants to share their thoughts with one another, generate new ideas and consider a range of views before answering. A quite, well-ventilated, well-lit room where no interruption would occur were identified by the researcher for the focus group discussion. Participants were invited to the focus group discussions well in time. All the rules were explained to them and their consents were obtained before the discussions started. The discussions were audio-taped. The central question that was posed to the participants was "How do you understand the concept caring in nursing?"

Ethical Measures

The ethical measures that were adhered to are subsequently described. The principle of respect and autonomy; was obtained by getting informed consent from the participants. The informed consent was for the focus group discussions as well as consent for the audio-recording. The researchers did not force any individual to take part in this study. Participants could withdraw at any point in time. Approval to conduct the study was obtained from all the stakeholders.

Data Analysis

Analysis of data was done thematically by using a step-by-step as follows: The conversations were transcribed to provide a written record that could be segmented and rebuild visually. The researchers

then familiarized themselves with the data using an inductive approach. Descriptive statements were drawn from the raw data in an attempt to identify similarities and differences. The data was managed by coding and fragmenting. The codes allowed the researchers to gain a condensed overview of the main points and common meanings that recur throughout the data. Data was then grouped together to generate themes.

RESULTS AND DISCUSSION

Caring is interpersonal relations

Interpersonal relations are one of the foundations of caring in nursing and the foundation of nursing practice because the interpersonal relations that the nurse form with the patient serve a critical role in caring for the patient during their daily practices. One of the cornerstone principles of interpersonal relations is communication. Thus, it can be assumed that positive interpersonal relations will allow effective communication and understanding between the nurse and the patient and will influence the quality of nursing care given (Brilowsky & Wendler, 2005). On the other hand, ineffective communication can influence the outcome of patient recovery and create anxiety in patients. Communication and interpersonal relations are the most important factors for improving patient satisfaction, compliance and overall health outcome (Kaur, 2020).

On a question what contribute to poor nursing care a participant answered that: "poor communication, because when colleagues then don't communicate to each other, the reports on the condition of the patient will not be properly communicated". To be effective in communication to a patient or family members, a nurse should be comforting and create trust which can be a powerful therapeutic tool that provide a feeling of wellbeing. Nurses are at the heart of the communication process; they assess, record and report on treatment and care, handle information sensitively and confidentially, deal with complains effectively and are conscientious in reporting the things they are concerned about. This is all part of the concept of caring that is the innermost core of nursing when it comes to relationship between the patient and the nurse. The way patients perceive caring contributes to the creation of a relationship of trust (Erikson, 1993).

This study revealed that nurses conceived caring as creating a genuine patient- nurse relationship in which the nurses use a holistic approach in spite of the fact that they work under difficult circumstances sometimes. One participant responded that they see *"caring as a genuine patient nurse relationship in which nurses use the holistic approach"*. Caring can only be effectively demonstrated and practiced interpersonally and caring means strengthening interpersonal relations by understanding the patient

through tender loving care although it is sometimes difficult due to workload".

An aspect that can influence interpersonal relations is the attitude of the nurse. This can affect the mood of the patient as well, because basic behavior has several important components like a positive greeting from the nurse, a smile and a pleasant tone of voice. Patients are also sensitive to non-verbal communication (Drahašová & Jarošová, 2016). Furthermore, the participants felt comfortable that patients are able to share with them what was bothering them. The following responses were evident from the participant's remarks in this regard; *"The patient was able to share with me all that was bothering her". "I always assure patients that I am there for them and they should feel free to communicate with me". "When I motivate patients I use encouraging words such as well done", "The patients smile when I enter the room" and "Sometimes we are prim and proper and show no emotion"*. It is also sometimes good to know how patients experience interpersonal relations. Drahašová & Jarošová (2016) reported that patients appreciated the good moods of nurses. By good mood they referred to a cheerful attitude, readiness to help and the care provided was conducted in a positive atmosphere. To provide proper care is only possible through developing humanistic, efficient and effective relationships, based on mutual respect and understanding (Shahriari, Mohammadi, Abbaszadeh & Bahrami, 2013). This is in agreement with Swanson's theory of caring that highlights the importance to understand events as they have meaning in the life of others, in this case the patients. Thus, caring implies an intentional activity, sound communication principles, attitude and feelings that shape the professional interaction between nurse and patient.

Caring is nursing interventions (Nursing Practice)

Nursing practice entails that a nurse has contact with a patient with the goal to help the patient to achieve full health recovery in mind, body and soul. Caring is a core concept of nursing and is fundamental to nursing interventions. It means that the nurse enters the world of a patient and encompasses autonomous and collaborative care of individuals of all ages, families, groups and communities sick or well in all setting (Karlsson & Penbrandt, 2020.p.4). A nurse is required to perform certain activities for a patient which are legally and ethically binding. However, the value of human care and caring is much more than the mere action of performances. This aspect is sometimes undervalued by the importance given to technical aspects of nursing care. Bradwell, (2017) emphasizes the fact that that nursing practice is complex and a varied field that requires precision,

dedication care and expertise.

The components of deep caring can be summarized as follows; following consciousness, harmony of the body and mind, connection with a caring moment, honoring both the practitioner and the patient, creating a caring field with new possibilities effective communication in a caring relationship, knowledge, self-control and self-healing (Horton-Deutsch, 2016). This correlates with Swanson's theory of caring where "being with" is one of the aspects of the theory. Being with means emotionally present to others. It conveys to the patient that they and their experiences matters to nurses. According to Anderson, Wilman, Sjöström-Strand & Borgling, (2015) the availability of nurses whenever needed is an important aspect of caring. Their availability and physical presence brings comfort to the patients. In this descriptive theme, "caring is nursing interventions" the nurses conceived caring to be vigilant surveillance resulting in care activities that either relief or improvement of symptoms and enhanced well. Assessing and observing vital signs and physiological readings, while at the same time striving to understand the patient's symptoms and body language, were stated to be an example of caring as intervention. Caring was also described as collecting data about the patient to form a basis for diagnosis, assessment and action in accordance with the patient's needs.

The following statements are evident of participant's views on (professional) caring:

"To me is to treat my patients physically, socially and emotionally well". "To me is to do more for your patient as what is expected from you", "also social and psychological needs of the patient and their family". To me is following procedures that have being well established", "Is person centered and means eliminate physical discomfort", "I am taking care of my patient as if I am at home with my own family, I give them love and care the way I expect others to treat my family", "To me is the skills of nurses which make the performance of certain procedures painless".

On the question when you feel you have given good nursing care what consequences does it have for you?: It motivates me I want to continue and do better", I feel good" "a sense of proud" feeling of happiness" it boosts my self-esteem". On the other hand, there is also the situation where nurses did not care well for the patients. On the question what comes to your mind if you think of poor nursing care the following examples were given: "Patients are left lying in a dirty bed", "Patients are not fed properly during feeding time", "When staff members know what they need to do but do not do it", "Taking shortcuts when doing procedures", "Lack of commitment to patient care".

Nursing is a humanistic profession, therefore the profession has specific criteria including strong

commitment to offer services which includes nursing care the society. Highly committed nurses are more responsible for delivering of quality care to patients (Jafaragae, Parvizi, Mehrdad & Rafii, (2012). Participants expressed their feelings when they felt they did not give good care as feeling guilty, anger, disappointed in themselves, ashamed, self-blame and negligence. According to Ion, Jones & Craven (2016) poor care can be considered to involve acts of neglect, negative attitudes, abuse and incompetence. Poor nursing care is a significant issue world-wide. However, nurses should adhere to the principle of doing for others what they would do for themselves where possible. Doing for consists of comforting, performing competently and preserving dignity (Swanson, 1993).

Participants were asked what they consider the difference between deep caring and professional caring. It was not clear whether all the participants understand the difference between the two concepts well. The following were evident of this statement. "Professional care is when you are treating the patient according to ethical principles, while deep caring is going beyond the patient and include the family and consider the environment where the patient live." "Professional care is providing care according to the regulation which is the scope of practice, while deep caring is going beyond your scope, pharmacist", "Professional care is going by the books while deep care is natural care, instinct feeling, compassion, love emotion and feeling the connectedness to the patient". Participants also indicated the barriers that contribute to not be able to give good nursing care as systematic problems including underfunding, staff shortages, lack of teamwork, different viewpoints on the concept caring and lack of resources.

Caring is nursing values

Participants expressed their viewpoints on nursing values and the importance thereof in a caring for patients. Nurses are expected to provide nursing care to patients based on values of the nursing profession. The behavior with regard to self, patients, families and the larger community reflect the values of the nursing profession. Nursing values are the principles and standards that nurses follow to ensure they're doing ethical, quality work. Thus, nursing values offer a framework for behavior assessment, and nursing values influence nurses' goals, strategies and actions (Weis & Schank 2017). The values that are most important are; human dignity, altruism, social justice, autonomy in decision making, precision and accuracy in caring, responsibility, sympathy and trust (Shahriari et al., 2013).

On the question of what values do you think are most important in being able to give good nursing care, the study revealed that nurses feel honesty,

justice, confidentiality, responsibility, compassion, respect, trust, accountability are important values for a caring nurse. *"I feel compassion is an important value"* *"Compassion is an important value; one must put yourselves in the patient's shoes"*. *"Compassion is sharing the joys, sorrows, pain and accomplishments with patients"*, *"Compassion and commitment towards caring is important"*.

Compassion is a value important to nursing because being compassionate helps patients feel respected during their care. Compassion can be shown by listening to patients' concerns, quickly addressing concerns and speaking kindly. McGhee (2021) reported that compassion encompasses empathy caring and the promotion of each patient's dignity. There must be a commitment to promote caring abilities, satisfying of being a nurse and belonging to the nursing profession. The participants gave the following responses: *"Some nurses join the profession for the wrong reasons, they don't have the patient's interest at heart"*. *"Nursing is a calling, it is not just a job, so you have to have a heart for it, it has to be your whole, your everything"*. *"Nurses sometimes don't have the desire to provide care to the patients, there is a difference between nurses who want to provide care and those who are not interested in rendering care"*.

Caring is inherent to nursing practice and arises from respect and concern for the patient. Respect and the maintenance of a patient's dignity is essential for a better health outcome. Respect for a patient refers to how nurses treat a person with value and dignity, because it is difficult for patients to uphold dignity if they are not treated with respect. Dickert & Kass (2009) reported that patients believe that respecting a person incorporates the following major elements: empathy, care, and autonomy, provision of information, recognition of individuality, dignity and attention to needs. Thus, making patients feel respected or valued as a patient, is a multi-faceted task that involves more than recognizing autonomy (Beach, Sugerman, Johnson, Arbelaez, Duggan & Cooper, 2005).

Another value that was mentioned by participants was accountability and responsibility. Being accountable means acknowledging your actions and learning from mistakes, which is important for professional growth. Because each action you take affects patients. Responsibility has been defined as a nursing value. It is defined with traits of commitment, feeling responsible for the duties toward patients, and respecting the patients' rights. Caring requires nurses who focus on the relationship with the patients by seeing, understanding and taking responsibility for the delivering of quality nursing care (Karlsson & Penbrandt, 2020).

A participant said; *"Professional nursing values wouldn't be complete without accountability and responsibility"*. Lack of accountability diminishes the

level and quality of customer service it also impacts how patients are treated which can lead to negative reviews, dissatisfied patients and shaken patient nurse relationships. Also, taking responsibility in the workplace is essential to the team's success (Dagher, 2020). Trust was also indicated by participants as an important value. According to Shrihari et al. (2013), trust is an important value and is defined by traits of honesty in words and practice. Participants also echoed this during the focus group discussions. *"Nurses should gain patient's and society's trust through understanding the patient's situation"*, *"There should be increased levels of trust between us and the patient"*, *"You need to be competent, confident, compassionate, committed and conscience"*. Gaining patient's trust and reliance comes true when nurses are honest in their communication and practice and by doing their duties appropriately (Pang et al., 2009). Patients who trust their healthcare providers also have less stress and may recover better from their illnesses. The way to do it is to be interested in how your patients care is affecting them, answer their questions honestly and tell them important and accurate information.

CONCLUSIONS

The concept caring in nursing is understood differently and it was not easy to define the phenomenon, although opinions of nurses coincide in many areas. The most comprehensive understanding of caring was their recognition and acknowledgement of the patient and their families that are in need of care. Three main themes emerged from the data namely; caring in nursing is a relationship between nurses and patients which was characterized on their part by interpersonal relations, nursing interventions (nursing practice), and nursing values. The findings reported can help to elucidate the nature of caring as an essential component of nursing and to understand and preserve its values.

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