WHAT IS THE CENTRAL UNIFYING FOCUS IN NURSING?

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Dear Madam,

There are many perspectives from different standing points with distinguished context of truths in nursing. Some philosophers might hold multiple truths, and others hold only one truth. However, truth in nursing is assumed in the eye of beholder, which means multiple perspectives are appropriate for knowledge development in nursing.¹ There are no less than nine different philosophical orientations identified have some relevance to nursing knowledge development, including empiricism, pragmatism, paradigmatic historicism, and science as a problem solving, feminism, phenomenology, hermeneutics, critical theory, and post-structuralism. It could be said that a plurality of philosophies maybe necessary to reflect the many facet of nursing science.²

Nevertheless, some philosophers argue that as long as the multi worldviews have been embraced by nursing as the basic of conception, nursing knowledge would be fragmented because of a plurality of nursing conceptualism.³ In addition, Claxton mentioned, “we are like the inhabitants of thousands of little islands, all in the same part of the ocean, yet totally out of touch with each other”⁴. Thus, Meleis suggested that to avoid being forever fragmented and divided, the integration of different perspectives is needed,⁵ which is also supported by Newman who also agreed with multi-perspectives, but convincing to a unitary-perspective for nursing.⁶ At this point, it can be drawn that multi-paradigms for nursing are accepted, but the same location/unified conceptualization need to be centered.

It is similar with Roy’s view of Unity in Diversity and Universal Truth, a way to bridge multiple approaches in nursing. The belief in the existence of
universal truths is the idea that no simple insight is enough, in and of it self, to disclose the whole truth, which believed that this broadened perspective is what makes nursing’s multiple ways of knowing accessible to other disciplines. Unity is due to logic of truth, nursing as a discipline is obligated to monitor whether its propositions cohere and are compatible with propositions known to be true inside and outside the discipline. However, to find the unity in diversity is depends on the level of awareness of human. There are two things happens when one raises the level of awareness: 1) one’s perception of multiplicity dissolves, while at the same time, each level is reflecting all others. Similarly, if one examines a human being from a microscopic level, one sees a multitude of cells, 2) but if one raises the level of awareness to the whole person, one sees just one person. Consequently, one can possess both unity and plurality at the same time. In the process, one can choose to focus on separateness or unity.

In line with that, there are some concepts have been proposed to be the central focus of the profession of nursing, such as Caring and Human health experience (Newman and colleagues), human living (Kim), and human dignity (Jacobs). However, Willis et al said that, those concepts could not mark the end of our search for clarification in nursing’s evolution because many facets of nursing knowledge require further development. Willis then offers a central unifying focus, which consists of facilitating humanization, meaning, choice, quality of life, healing, living and dying. These concepts might address the essential points in nursing, but might be overlapping in some parts; for instance, the concept of choice can be a part of Facilitating Humanism. Humanism is knowing and engaging human as a whole, including the choice of human, life experience, belief and quality of life, which are practiced by nurses to patients. Although Willis et al mentioned that the concepts are interrelated and integrated, it might be a bit challenging to understand each concept. Therefore, the meaning of central-unifying focus in nursing needs further clarification.

To clarify its meaning, the concept of caring might be needed to consider as the essence of nursing and the central, dominant, and unifying focus of nursing. But caring does not mean to control, in the form of addictive co-dependency. Caring means depending on where you are (time, space, culture), one’s level of development (e.g training, experience, education), and the situation (e.g disaster, high pressure situation, relax, etc), including consideration of patient’s (subjective) perspective and nurse (objective) perspective. An understanding and awareness of what it means to care, and be cared for, from different perspectives also provides a solid foundation to guide ethical decision-making. Thus, caring is considered as a central unifying focus for nurses, dependent on environment, nursing competency, and the context of situation.

However, because there are different perspectives among nursing philosophers, it raises the question again “What is the central focus in nursing actually? Does nursing need a central focus or keep holding multiple truths?” The discussion about it should be raised, and remarks that ‘the central unifying focus addresses unitary human-natural world phenomena of concern in nursing practice and provides a basis for conceptual progress in the discipline’.

REFERENCES


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