A Proposed Philosophy of Nursing in the light of Nursing Metatheory

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ABSTRACT

Nursing is a healing art which goes all the way through the ages of enduring pain and has now emerged in integration and recursivity. All the theorists attempted to guide nursing practice in the light of theory and theory-practice integration is not just a hard sell but a compassionate and empathetic caring and healing relationship. Nightingale stressed on clean environment which improves healing, Watson's Caritas stated that attainment of higher level of harmony potentiates healing, while Newman emphasized on the expanding consciousness of self-healing art. Among these integration approaches, the meta-theory of Complexity Integration Nursing Theory (CINT) provides a diverse and substantial platform for care. This is a review paper/commentary proposing a philosophy of nursing for nurses, extracted from one of the meta-theory of nursing (CINT) to guide and be incorporated in nursing practice.

Keywords: Philosophy, nursing meta-theory, healing, CINT

INTRODUCTION

Entrance through the door way of science in the academia, the nursing discipline has the mixed features of natural sciences, basic or pure sciences, humanistic or social sciences and practice or applied sciences. It has been made statutory for the scholars and students of the nursing discipline to be aware of the philosophical orientation, theoretical foundation, and advancement of knowledge. Philosophy is concerned with the ontological, epistemological, axiological and methodological processes of the discipline. Metaparadigm is defined as globally the greatest interest of the members of the discipline on subject matter, the worldview about the profession which is central and core to the nursing human/person, environment, health and nursing. Nursing theory expert and philosopher Jacqueline Fawcett augment about the considerable agreement regarding the recurring themes of the mentioned metaparadigms among nursing scholars. Metaparadigms are relatively very broad, general, and abstract and the refinement of scientific inquiry is conducted a step ahead, through paradigm or disciplinary matrix. The prolonged discussion on the paradigmatic controversies in nursing has no end but the knowledge generation, testing, and establishing truth are approached through received view (Quantitatively), perceived view (Qualitatively) and post modernism (Mixed method). Because of the complexity and multidimensionality of the sophisticated nature of humans, environment, health and nursing, which are the four meta-paradigms of nursing profession, the multi-modal paradigmatic approaches recommended for nurses to generate and utilize knowledge amelioration. These include: Totality and Simultaneity, Change and Resistance, Mechanist and Organist, Particular and Deterministic, Interactive-Integrative and Unitary-Transformative paradigms. Nursing philosophy statement is a guide and blueprint that outlines the profession core values, ethics, beliefs and also a source of motivation for the decision making. Hence, most of the nurses are unaware about the profession philosophy statements and neither have they tried to explore their personal nursing philosophy. The rationale of this philosophical paper is to inform the nurses about the importance among nursing philosophies and the metaparadigmatic perspective that how nurses can attain the health through healing relationship, uniform entity (wholeness), integration, transcendence, transformation and interconnectedness of humans to humans (nurses) in connection with their environment. Furthermore, this paper will serve as a soft reminder for the nurses that how certain factors influence their personal nursing philosophy and most importantly the missing fragment of the nursing essence, that is empathy, and the multifaceted disposition of humans' diversity and infinitesimal partitions to form whole being in terms of physical, psychological, social, cultural, economical, political, intellectual and spiritual attributes of being.
Personal Views on Nursing Metaparadigm

Human being (Person in the form of individual, family, group, community, society, public) is a complex sophisticated entity, existed central, prime and prestigious, the whole being, unique, own value-laden, needs care, love, energy and healing, the recipient of nursing care to attain best possible health state and maintain integration within and with their environment.

Environment is the domain of the person internal or external implant, more elaborately those circumstances that interact, interchange, affect, connect and influence the processes of health and nursing.

Health is an evolving condition of the best possible functioning and potential of achieving highest capacities of well-being, holism, comfort, transition, transcendence, transformation and adjustment of persons with all aspects of environment.

Nursing is all those core activities and nurturing humanistic relationships through which nurses (healers) heal, care, energize and transform so called human beings/persons/patients/healee. The nursing patterns, networks, energizing dynamics, interconnectedness and key characteristics compass from simple to enlightened activities with all the purposes and aims of achieving and sustaining harmony, transition, transcendence, transformation, care, resilience, strengthening and healing for persons/patients.

Compatibility of own philosophy with the other theorists/philosophers

Nursing philosophy is concerned with statements of beliefs and values about individuals, families, groups, societies, their environment, health, illness, wellbeing and ways of living and practising nursing. Theory considers the core of science and provides framework for the phenomena of interest and research methods guide clinical practice. Nursing scholars and theorists from the Nightingale to the subsequent theorists, although have different viewpoints and stances on metaparadigm concepts because of the distinct approaches and lenses they saw and capture the phenomena of interest to nursing. The flaw of the individual theory itself is to only cover a certain aspect of the holistic dimension, but by purpose all theories ventured for striving to achieve the best possible patient care in that certain aspect.

Theorists views on recurring themes and metaparadigms are found almost in all the theories to guide theory, education, research and practice. The healing philosophy started from Nightingale as she studied the Greek philosophers and stated that, “Nature alone heals and nursing is to put the patient in best environment for the natural reparative process to heal.” Chandler works based on Rogers’ theoretical framework depicts integrality and continuous interaction of persons with their environment. Watson believes her theory focus on the holistic approach of healing and in order for a person to be fully healed, it is crucial to include the healing of mind, body, and the soul. Orem through her self-care theory expressed that it is the duty of the persons to take charge of their own health, make their environment conducive and prevent ailments. Through self-care and the purpose of learned behaviour to take care of dependent family members is to regulate structural integrity, functioning, and human development. Moreover, Orem's nursing system theory maps out for nurses a direction to whom, when and what extent prescribe or tailor nursing interventions and system of actions. Newman proposes that, “The expansion of consciousness is what life is, and health repertoire.” Roy Adaptation Theory proposes that, “the person is a system that adapts to a constantly changing environment.” Kings' Goal Attainment Theory also stated the relations of the metaparadigms in which, the clients interact with nurses and through nursing transactions, communication, and interpretation health outcomes occur as well as stressors in the environment are identified and modified. Swanson in her middle-range Theory of Care stated, “Caring as a nurturing way of relating valued to whom one feels a personal sense of commitment and responsibility.” Kolcabas' Comfort Theory, Reed's Self-transcendence Theory, and Meleis Transition Theory have the same aims for the clients. Ideally, the nurse-client relationship at highest level is considered biogenic or life giving. One consideration regarding the competing paradigms suggest that, “Competition per se should not be encouraged among nursing professionals, but rather cooperation and collaboration so that the development of its knowledge achieves a higher purpose the multidimensional transformation of the context to which it belongs.” Theoretical contexts which deal with the phenomena of importance to nursing in different aspects demand for the paradigmatic integration and interconnectedness. As Newman
proclaimed that, “Since nursing is to study care in experiencing of human health, then it cannot have a single paradigm.” This discussion leads to the search of theories which cover the multidimensionality, fulfillment of all aspects and complexity of the client. In a health care complex environment doubtlessly, nurses always perceived pressure to provide care that is person-centred, cost-effective and unified or integrated. The endeavour for unifying nursing theories is compiled and as a result devised some metatheories to fulfill that complexity need. Among those few metatheories, “Complexity Integration Nursing Theory” (CINT) professes to be more comprehensive, dynamic, integrated and complete in one of the scoping review for nursing metatheories interpretation. That scoping review posits nine research questions and concluded that the CINT is the only nursing metatheory to enable answers to all those nine research questions. These questions included: identity as a nursing metatheory, definitions and inclusion of nursing meta-paradigms, target or focus on nurses, application to nursing domains, perspective of nursing theories and integration, acknowledgment of past nursing theories, guiding practice and research, and overall contribution to the nursing discipline.

The CINT is philosophically rooted and underpinned in several grand nursing theories included that of humanistic, human needs, social entirety, interaction, therapeutic relationship or human becoming and prescriptive or praxis theories. The interrelationships among these theories and concepts are addition of nursing foundation, methodology, nursing essence, and disciplinary inquiry which is equal to nursing knowledge/wisdom. In addition, this nursing knowledge wisdom in multiplication with individual being is equal to praxis/practice, which is equated mathematically by:

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\text{Nursing Foundation (NF) + Methodology (M) + Nursing Essence (NE) + Disciplinary Inquiry (DI) = Nursing Knowledge /Wisdom (NK/W)}
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\text{Nursing Knowledge Wisdom (NKW) (×) Individual Being (IB) = Praxis/ Practice (P)}
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In addition, the syntactical essence of this philosophy is the encompassing nature of empathetic and human caring evolving essence of true caring relationships nurses and clients develop in the pursuance of health and wellness perspective.

**CONCLUSION**

The underlying premises of CINT helps nurses’ to embed and congregate their own personal and professional philosophy in which nursing and caring exists as natural processes, and the nurse serve as an apprentice in interaction with the patient and environment for commencing the healing process.

**Recommendation**

Nursing profession as a discipline still lacks nursing meta-theories, as till date only two meta-theories exist, so the sole responsibilities for the professional scholars currently and in the future to expand and make broader the theoretical base and own body of knowledge. Nursing interventions impact the health status of the person, family and community and for that instance, as a moral obligation to profession and society the assurance and directions nurses' provide for optimal work environment and best resources utilization to create optimum conditions for the patients to heal. Nurses should vibe patterns and thoughts of “Eunoia to create Kairos” to facilitate the outer and inner universe of a human and the ability to alter dis-ease into ease. The final message to practising nurses would be a Nightingale quote which says, “I think one’s feelings waste themselves in words; they ought all to be distilled into actions which bring results.”

**REFERENCES**


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**AUTHOR’S CONTRIBUTION**

The following authors fulfill authorship criteria as per ICMJE guidelines:

**Suliman M:** Idea conception, drafting the work, final approval, agreed to be accountable for all the work.

**Sohail M:** Design of the work, data acquisition, critical revision, final approval, agreed to be accountable for all the work.

**Shaheen M:** Data analysis, drafting of the work, final approval, agreed to be accountable for all the work.

**Rehman UU:** Data interpretation, critical revision, final approval, agreed to be accountable for all the work.

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