

Nursing Theorist turn in.docx

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Assessing Theorist Dr. Jean Watson

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Dr. Jean Watson

Among the various nursing theorists, the likes of Simone Roach, Madeleine Leininger, and Anne Boykin, and many others who have contributed to a grounded basis of nursing practice, Jean Watson appeals to me the most. Dr. Jean Watson is renowned for developing the theory of Philosophy and Theory of Transpersonal Caring” or “Caring Science.”

Watson’s nursing views are parallel to the way I think of nursing. She shows greater concern about the quality of nursing. In her study about the quality of nursing, she concludes that the caring behavior of nurses and patient satisfaction are crucial for improving the quality of nursing (Watson, 2001).

Watson’s focus on improving the quality of health care delivery augments with the way I think of nursing. Provision of high-quality care and ensuring patient satisfaction should be the priority of nursing fraternity globally. Some of nursing care initiatives that nurses should ascribe to improve the quality of nursing include ensuring patient safety, improving clinical effectiveness, and promotion of public accountability. In the pursuit of improving nursing care, nursing community should urge nurses to practice loving; to show kindness and equanimity; advocates for realistic manifestation; enable profound belief of the significant other; cultivate individual spiritual practice that surpasses ego; and lastly “be” the caring-healing setting.

Consequently, Watson’s caring theory is significant in addressing challenging nursing responsibilities; some of us face in our everyday practice. The main challenge is dealing with patients' increased acumen and complexity regarding their state of health care. However, I believe that by integrating Watson’s caring theory in our everyday practice we can find solutions to our challenges and workloads while achieving the quality of care. Moreover, I believe that nurses can be a truly stellar nurse if they take their time in advocating for his/her patients and anticipate their needs. These sentiments are augmented by Watson’s human caring theory,

which principally epitomizes the standard attributes of an ideal nurse (Watson, 1994). Simply, with the theory, nurses we are accorded with the opportunity of learning how to implement the art of caring; how to comfort and care for patients, how to reinforce patient recovery and dignity and most importantly, how we can use our nursing profession to expand self-actualization, ultimately bringing excelling in nursing care.

Upholding humanistic/caring values in nursing practice is certainly something that can be borrowed from Watson's theory. The theory helps us in transcending from the perception of considering nursing care as "just work," to that of a gratifying profession that is defined by caring. In theory, Watson argues that caring rejuvenates life energies and potentiates nursing capabilities. In this sense, we as nurses we should take good care of ourselves for us to be able to replicate the same care for others; patients. This advocacy of self-healing brings about self-actualization on both an individual and nursing professional level (Watson, 1996). Also, I believe Watson's theory brings about the true definition of caring; caring refers to safeguarding and affirming of our civilization. Caring divulges our feelings, attitudes, and thoughts, and enables us to live dependably in our affairs. This means that we can optimize our patient's aptitude to heal from inside if we actively engage in caring through realistic manifestation and purposeful as advocated in Watson's caring theory.

Watson's Human Caring Theory

Watson's human caring theory asserts that human beings cannot be healed as objects. Inherently, this assumption brings about the role of nursing. According to Watson (1997), "Nursing is concerned with promoting health, preventing illness, caring for the sick and restoring health." This theory was developed during the late 1970s, particularly when Watson was teaching at the University of Colorado. A compilation of personal/professional experiences

including results from empirically-oriented and clinically-inducted studies accomplished by Watson alongside her Doctorate in Clinic and Human Psychology led to the development of this caring theory. The theory can be said to be focused ⁷ on the significance of human caring and on the caring-to-caring transpersonal relationship in relation to achieving an improved quality of care. Accordingly, Watson argues that human caring theory takes root in both science and art. This is because it explores through the conceptions of inter-relation, in an attempt to unravel the significance of human science that belongs to nursing, which is exhibited through nurse-patient relationships aimed towards reaching satisfactory caring.

The human caring theory is takes precedence on the concept of caring and on observational philosophical hypotheses which go beyond the extents of the physical body. Thus, the theory can be conceptualized to include openness, authenticity and intentionality to the divine anonymities and existential extents of life and death (Watson, 1997). The theory encompasses the entirety of the field of nursing. It emphasizes the interactive practice between the nurses and the patients; ⁵ how nurses care for their patients, and how that caring evolves into enhanced strategies to improve quality of care.

⁵ According to Watson (1996), caring is a pillar to nursing practice, given that it enhances better health care than a basic therapeutic treatment. With this philosophical perspective, the major conceptual elements that are intrinsic in the ⁸ theory are the carative factors; those evolving toward "Clinical Caritas processes." Accordingly, the theory is inherent in other more explicit aspects. These components include expanded perceptions of self; caring-healing cognizance including the intent ¹¹ to care and promotion of healing; caring cognizance as human energy inherent in the caring moment and the last component is the phenomenal field/unitary consciousness.

The Watson theory, compliments the modern nursing and conventional medical-nursing frameworks, primarily because it is intrinsic to the ten carative factors. It is in these ten carative factors that the framework for the art of caring is based on. The first five include formation of a humanistic-altruistic system of values; instillation of faith-hope; cultivation of sensitivity to one's self and to others; development of a helping-trusting, human caring relationship; the other five include promotion and acceptance of the expression of positive and negative feelings; systematic use of a creative problem-solving caring process; promotion of transpersonal teaching-learning; provision for a supportive, protective, and/or corrective mental, physical, societal, and spiritual environment; assistance with gratification of human needs; and allowance for existential-phenomenological-spiritual forces (Watson, 1988).

Critical Thinking and Decision-Making in Nursing Practice; Watson's Theory

I believe professional knowledge and acumen, experience and skills, critical thinking and decision-making processes are fundamental in the nursing realm. These fundamental components are amplified by Watson's theory. The theory is not only essential for improving knowledge regarding caring, but it is instrumental for critical thinking and decision-making in nursing practice. I believe that Watson's theory can help me organize my thoughts for critical thinking and decision-making in my nursing practice. This is because the theory advocates for nurses to critically evaluate the problems of the patient and make right decisions on the right care to administer to achieve patient satisfaction, ultimately improving quality of care (Cader, Campbell & Watson, 2005). In most cases, while managing care, nurses are obligated to assess various alternatives simultaneously and make rapid decisions regarding the right care. Coupled with other factors, it is certain that the right decision made by nurses during their nursing practice plays a crucial role in the healing processes of patient's life. I believe that if I integrate

Watson's theory in my nursing practice is not only fundamental for improving my knowledge regarding caring, but also it is essential for shaping my critical thinking in ensuring the efficacy of providing care.

Furthermore, Watson's human care theory is essential for guiding me and keeping me within the confinements of maintaining the ideals of human care. In this sense, Watson's theory helps me in making the right care decisions that are significantly distinctive from the proliferated radical healing techniques that normally neglect the intrinsic human idiosyncrasies of authentic care.

Accordingly, Watson's theory is essential in shaping my critical thinking skills considering the theory's holistic thinking element of interdependent and interconnectedness of human beings. The holistic thinking helps me in contextualizing patients with the framework that is purely associated a particular patient's disease, as a result understanding the actual state of the condition including the factors that contributed to his/her ailment. Moreover, Watson's theoretical perspective is essential in assisting me to develop vital mind skills and practices inherent to a holistic critical thinker. Such skills and habits may include trust, understanding, intuition, creativity, contextual outlook, and reflection, which are necessary for enabling me to holistically consider patients as human beings under their care (Watson, 1988).

Subsequently, Watson's theoretical perspective is essential for helping me to employ creative approaches in my nursing practice. The theory acknowledges that nurses should be allowed to use all ways of knowing, being and doing in practising nursing caring. Other than, facilitating knowledge in caring nursing practice, the theory encourages me to invite creative imagination to consider the patient's life trajectory and experiences, including the aesthetic, ethical and personal context to make effective care decisions.

Watson's Contribution to the Development of the Profession of Nursing

Dr. Watson remains to be a prominent nursing theorist given his significant contribution to the field of nursing. Watson's theory of human care has greatly influenced the nursing profession; through this theory, Watson has been able to further nursing practice by advocating for holistic caring (Watson & Smith, 2002). In the current health care setting, many institutions are integrating with the theory of human care intending to build on fundamental for providing better care to patients as well as improving care in general. Every healthcare institution is ensuring each nurse is in good self-care before they are allowed to manage the care of their patients. By embracing this theory in their nursing profession, nurses are encouraged to provide holistic care to their patients, placing them in the best position to be able to self-heal.

Accordingly, Dr. Watson has been at the forefront in bringing the meaning to the nursing caring profession. Watson's theory of Human Caring coupled with the concept of caring engrained in her theoretical text of Philosophy and Science of Caring has helped nurses to nurture an authentic connection to their roles as caregivers in promoting better healing for patients (Caring, 1996). The integration of Watson's theoretical perspectives with caring processes has helped in shaping the claim that caring is a central element to nursing. The strongest drive that Dr. Watson brought to the nursing profession is that during managing care both concern for the patients and the caregiver's ability to self-care should be advocated (Johns & Freshwater, 2009). This allows for nurses to interact genuinely with patients, which in turn boosts self-actualization in both the nurse and patient during the integration process. All-in-all Watson's contribution to the nursing profession is inclined towards an effort of developing best practices in managing care aimed at improving the quality of care in the nursing profession.

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