

Watson's Theory of Caring

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Nursing is one of the most rewarding and challenging careers that one can have. Health care professionals are responsible to care for patient as a whole person- body, mind and spirit. A nurse fulfills patient's physiological, psychological and social needs by providing compassion and care. Despite these adversities, nurses have to find a solution to maintain their caring practices and Jean Watson's theory of caring can serve as an excellent guide. For the most people, caring can be an ambiguous concept in which it can be capable of being understood in two or more possible senses. Jean Watson describes caring as "a value and an attitude that has to become a will, an intention, or a commitment, which manifests itself in concrete acts" (McCance, McKenna, & Boore, 1999). This research will take a closer look at Watson's caring theory and how it can be utilize in a clinical settings.

Major building blocks of Watson's theory are the creative factors, caring relationship and the caring moments. The creative factors were developed in 1979 and Watson views them as a guide for the core of nursing. Creative factors include:" altruistic system of value, faith, sensitivity to others, helping humans, expressing feelings, caring process, transpersonal teaching, supportive environment, human needs assistance and existential-spiritual forces"(Chantal, 2003, p. 52). Another essential component of caring theory is transpersonal caring relationship. These relationships represent how the nurse shows compassion and concerns toward the patient and cares for the patient beyond the scope of the assessment. The third element of Watson's theory is caring moments. Caring moments can be described when the nurse and a patient come together to create human-to-human relationship. Although the theory seems complex to understand,

nurses must be able to incorporate that theory in every day settings not only for the sake of the patient, but also to find deep meaning of nursing as a profession.

As has been mentioned, the word caring in nursing literature varies among different nurses. This is usually due to the level of experience, values and beliefs that one's have as well as the professional focus. Caring as a central concept of Watson's theory does not only pertain to the patient but also to the nurse and the way she/he cares for themselves. Throughout my clinical experience as a nurse I applied Watson's theory of caring to all of my patients, however one experience in particular provided me with life lesson. During my last semester in the nursing school my professor assigned me to care for a very special lady whom I will call Mrs. Johns. Mrs. Johns was diagnosed with stage four stomach cancer. The cancer spread so extensively, that Mrs. Johns already had nephrostomy tubes placed in both kidneys and a gastrostomy tube. I knew that the most important thing I would be doing for Mrs. Johns was to provide empathy, compassion and care to the best of my abilities.

When I met Mrs. Johns she looked very tired and did not want to engage in any conversation. She was in pain, had no appetite and was refusing help from everybody. After just couple of hours of being with Mrs. Johns, I began noticing, the reasons as to why she was being so rejectable. One of the main reasons was that other nurses were decreasing her autonomy by completing simple activities which she was capable of doing. Mrs. B the primary nurse was concerned about Mrs. Johns poor appetite, so she insisted to feed her. Just the smell of food and constant words to Mrs. Johns "You must eat" caused her to vomit extensively with fecal matter. I could tell, it was an embarrassment to her and rapidly I began cleaning her. She looked at me and said "I can not take this any longer I want to die already". At that moment I felt the weight of what Mrs. Johns was bearing. I spent my entire clinical day with Mrs. Johns and when I hugged

her goodbye, we both had tears in our eyes and with little strength she had left, she said to me “You will be an amazing nurse child”. Two days after when I came back for my second clinical day the nurse told me that Mrs. Johns passed away.

Watson’s theory of caring consists of ten enhanced Caritas Processes, that address the essence of caring. Medical roots are different from nursing roots therefore it is important to consider the history and tradition of nursing and the value of this profession. In the process of care for the patient the nurse must be engaged in professional knowledge as well as the readiness to be responsible for ones actions. The nurse should keep in mind to care for the patients holistically and treat them beyond their diagnosis. Referring to Mrs. Johns story, her primary nurse was only focusing on treating the symptoms, rather than being for her emotionally. With that being said, caring for patient as a whole person- body, mind and spirit could not only benefit the patient but also serve as a reminder to each nurse that this job is a gift.

In today’s fast paced environment nurses may not have enough time to truly incorporate caring theory to each patient. The journey to accommodate Jean Watson’s theory into nursing practice is not easy, but it opens up the doors for new possibilities. By applying and practicing ten clinical caritas processes not only patient can benefit from it but also nurses. This theory made a huge impact on nursing profession and it serves as an excellent guide to safe practice. Dr. Jean Watson argues, that applying her theory into daily living is rewarding and worth the efforts. This model highlights the importance of caring and supplies nurses with the knowledge of caring concept. The experience that I had while taking care of Mrs. Johns reminded me, that the greatest gift in nursing is witnessing over and over again that putting a smile on patient’s face and taking care of the patient beyond the diagnosis is the most important thing.

## References

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