

Department of Nursing

Curriculum Conceptual Framework: Caring

The conceptual framework emanates from the philosophy and serves as the organizing structure for the curriculum. The central theme for this conceptual framework is the concept of caring. Caring is a universal phenomenon and is critical to growth, development, and a sense of wellness as described by nursing theorist Dr. Jean Watson. Caring is used to promote health and dignity across the life span. The expression, process, and patterns of caring may vary among cultures. However, it remains a driving force for self-actualization. Caring gives comprehensive meaning and order to persons' lives and helps to overcome separateness, achieve union, and transcends the routine. Caring implies viewing persons as unique, holistic, self-determining beings endowed with complementary stabilizing and actualizing tendencies. Stabilizing tendencies are responsible for maintaining the fluctuating internal and external environments within a range that is compatible with continuing existence. Stabilizing tendencies enable persons to strive for increasingly higher levels of well-being through the process of growth and development. Self-determination, expressed through individual choice, enables persons to maintain health and achieve increasingly higher levels of wellness. Human caring acknowledges the right to self-determination and choice inherent in the enduring values of human freedom and dignity that is both universal and individual. It is through their uniqueness that each individual, family, and community responds to changes in the internal and external environments in an attempt to maintain health and achieve higher levels of wellness.

The major elements of caring are knowing, patience, honesty, trust, humility, hope, and courage. Caring, as an interactional process requires that all persons in the caring relationship must know their own powers and limitations, as well as know the powers and limitations of others involved in the relationship. With knowing comes patience, the ability to demonstrate a nonjudgmental acceptance of the other person, and allowing others to grow at their own pace. Honesty among all persons in the caring relationship facilitates openness within the relationship and the ability to accept constructive criticism.

Trust, another crucial ingredient of a caring encompasses elements of knowing, patience, and honesty in that there must be the belief that all persons will grow in time, and that mistakes will be growth producing. Humility implies that caring is reciprocal and that both parties involved in the caring relationship will learn from each other. Through hope, both parties will support each other even through difficult times. Courage allows the caring parties to enter into the unknown of human behavior. Caring entails environmental, biological, psychological, social, spiritual, and cultural influences within which the nurse operates.

DEFINITIONS

Environmental – persons are confronted with complex environmental problems such as continued pollution of the environment with toxic substances and the depletion of the natural resources both of which will ultimately result in the extinction of environmental elements vital to health.

Biological – Throughout the life cycle, persons evolve through a pattern of designated stages of maturation, signaled by specific behavioral and changing stimuli. Individuals experience stressors in their internal and external environment. This interaction contributes to tension that can be interpreted as negative or positive. A stressor may be broadly classified within parameters corresponding with the dimensions of persons.

Psychological – Throughout the lifecycle, the person has the capacity for psychological growth and development. Thoughts and feelings are communicated through behavior and are influenced by the persons' beliefs and values. Through socialization and identity formation, persons become unique and autonomous. The persons' unique repertoire of behaviors assists in responding to the tension inherent in interacting with a dynamic environment. Tension may be related to socio-cultural-spiritual influences. Real or imagined threat to values, self-image, or self-concept increases anxiety and requires a behavioral response or results in a behavioral change.

Social – Persons negotiate their social roles within societal structures. These roles are defined by societal norms and form the expressions of the caring relationship. Roles are actively individualized by each person within the more rigidly defined boundaries of the life cycle. The social role, therefore, provides each person with an ability to carry on interactions within more complex human relationships and provides them the opportunity to change, grow, and participate in structuring their society.

Spiritual – The spiritual aspect of persons is the unifying force that pervades and integrates the biological, psychological, sociological, and cultural aspects and makes each person unique. Spirituality is concerned with bringing meaning and purpose to life. It is expressed in the desire for inner harmony and growth of the self through caring relationships with other persons and a transcendent God or higher power.

Cultural – Culture embraces all facets of living and beliefs that are held by a social group concerned about how life should be lived. It is within the cultural focus that persons develop patterns of learned behavior and values, which are shared among members of designated group, and are transmitted to future members of that group over time. These shared values, customs and mores, are a predominant factor influencing the way in which persons negotiate with their environment. Culture maintains predominant position in influencing persons' perceptions and definitions of health.

CURRICULUM STRANDS

Rationale for content organization and sequencing is based on the convergence of the horizontal and vertical strands which emanate from a caring framework. The horizontal strands are taught consistently through all courses and vary only according to factors in a

given situation. The vertical strands flow through nursing courses and develop in complexity as the curriculum progresses from level to level.

Horizontal Strands

Caring – Caring and the boundaries for change in a caring environment serve as the major concept which undergirds the curriculum. As such, the faculty believes that caring and the boundaries for change serve as a major horizontal strand which is addressed in all nursing courses.

Nursing Process – Nursing process is an interactive, deliberate, systematic, problem-solving process, which encompasses five steps. These steps include assessment, analysis (nursing diagnosis), planning intervention, and evaluation. The nursing process identifies the practice of nursing and provides a methodology for providing nursing services to clients in a caring environment.

Client – Client is defined as person or persons receiving nursing care. This includes individuals, families, groups, and/or communities. Students care for clients throughout the curriculum.

Culture – Professional nursing is practiced trans-culturally in response to health needs as defined within diverse cultural and ethnic groups. Recognizing each person within his/her cultural/ethnic settings as an individual that is unique represents a holistic nursing approach. Being sensitive, nonjudgmental, and caring to their values, beliefs, practices and lifestyles are care components which facilitate a person's movement toward his/her identified state of health and wellness.

Legal/Ethical/Political Dimension – The legal, ethical, and political dimensions of society contribute to the structure and function of the health care system. The legal dimension of professional nursing practice deals with the analysis of situations in relationship to their conformity with laws. The ethical dimension analyzes conformity with accepted professional standards of behavior. The political dimension of professional nursing practice deals with the analysis of situations in relation to their impact upon the nursing profession and determination of means in which nurses can impact political situations. Critical analysis of these issues provide the nurse with the information needed to serve as an advocate in the preservation of individual, family, group, and community integrity.

Vertical Strands

Vertical strands that have been identified by the faculty include critical thinking, communication, therapeutic nursing intervention, and health and professionalism/professional roles.

Critical Thinking – is a process of reasoning which analyzes available knowledge for the purpose of making rational and valid judgments. It encompasses the characteristics of active inquiry, disciplined reflection, concept formation, creativity, and intuitive insight. It facilitates one's self-sufficiency and autonomy. Critical thinking is an essential part of problem-solving and decision-making in the nursing process.

Communication – This includes all methods for transmitting and receiving messages. The keystone of the process of communication is perception – the individual's or the group's interpretation of received stimuli. The success or failure of communication

determines the health of the client, the productivity of the client, and the ability of the client to survive. This is true whether the sender and receiver of messages is an individual or a group of individuals. The faculty believes clear and understandable written, verbal, and non-verbal communication is essential to the effective application of the nursing process. Therefore, communication is interwoven throughout the levels, increasing progressively in complexity and depth.

Evidence-Based Nursing Interventions – are defined by the faculty as theory based interventions in providing care to clients. These interventions are directed toward the attainment of the highest possible state of wellness for all persons. Interventions may be health promotion/maintenance, restorative, or conservative in nature. Evidence based nursing interventions may be performed dependently, independently, or inter-dependently in collaboration with the person and other members of the health care team.

Health Promotion/Maintenance – Nursing strategies are precautionary in nature and undertaken to maintain and/or improve levels of wellness. These actions may be performed at any point along the health-illness continuum. Nursing actions designed to implement the therapeutic regimen will restore the client's condition of health and /or ability for constructive activity. Restorative actions are usually directed to clients in impaired or depleted health states experiencing alterations in biological, psychological, social, cultural, and/ or spiritual focal areas. Restorative actions are aimed toward assisting persons to their optimal level of functioning within the limits of an altered health state.

Health – We believe health to be a dynamic state occurring on a continuum from high level wellness to death. Situations of health and illness can occur at any point during the life cycle therefore, varying degrees of health are focused on at each level of the curriculum. The curriculum prepares students to first assess maximum health in individuals, families, groups, and communities. Moving from the simple to complex, students care for clients experiencing increasingly more complex illnesses.

Professionalism/Professional Roles – The faculty believes that to become a professional nurse, one must be socialized into the role. From the first course in the curriculum, students are introduced to nursing as a profession and the nurse as a professional. As they advance in clinical courses, becoming familiar with increasingly more complex material, the students grow into a deeper understanding of nursing as a profession and of the nurse as a professional. The professional nurse serves in many roles including those of client advocate, health educator, care provider, researcher and leader. Nurses demonstrate professionalism in implementing these roles. Values, accountability and responsibility are interwoven in all roles. These roles are;

Client Advocate – As client advocate, the nurse becomes involved in social action and takes risks when necessary to alter health care and health care practices.

Health Educator –As a health educator, teaches persons, families, and communities – disease prevention and promotion and maintenance of health, to facilitate growth toward maximum health potential, using principles of teaching-learning and communication.

Care Provider – As care provider, the nurse renders health promotion, maintenance, restorative, and conservative nursing interventions. These actions may be performed dependently, independently, or interdependently in collaboration with other members of the health team.

Researcher – The nurse utilizes research in identifying health related needs and problems. Through critical thinking, nurses evaluate research findings for their applicability to nursing practice and integrate these findings into the care they provide. Nurses, using the tools of research and the nursing process assume active roles in effecting environmental changes which influence human health and existence.

Leader – As leaders, nurses function as change agents, managers, decision makers, collaborators, and coordinators. As advocates, nurses also enter into the macro level of society as active change agents and participate in defining and structuring social reality for the continual improvement of the quality of life. Nurses strive to create a caring environment conducive to effective interaction between individuals and groups. They are capable of working with and through others to assist persons in achieving wellness.

Department of Nursing Conceptual Framework

