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RESEARCH ARTICLE

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Caring Behavior of Nurses: A Concept Analysis

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ABSTRACT

The aim of this paper is to analyse the concept of caring behaviour of diabetic nurses in terms of its use and definition in the provision and or management of health care services to diabetic patients with COVID 19. This paper is limited to the context of its use within the hospital care setting. A literature review was conducted wherein out of 30 resources that were assessed, only nine literatures were included. The paper revealed that caring behaviour is a human action, intervention, and emotion as its defining attributes. Caring behaviour as a human action is the act of a nurse while performing its duties and responsibilities, while as an intervention, it is the action performed to meet the patient's needs while undergoing treatment. Moreover, as an emotion it conveys empathy, happiness, and concern towards patient's safety. It is further inferred that caring behavior is always present in a diabetic nurse whatever case he/she is handling; the acceptance or acknowledgement of the caring behavior of the nurse by a patient may hasten recovery and caring behavior is the core of nursing and cannot be separated from the nursing profession.

Keywords: caring behaviour; human action; intervention; emotion; dietic nurses

INTRODUCTION

Background

Caring behavior is an action made by a professional nurse that employs attention and concern towards patients in the provision of health care services as well as patient-safety and security. According to Oluma and Abadiga ⁽¹⁾ the behavior of caring contains two important components which can be seen as an interpersonal relationship between nurse and patient that results in the satisfaction of patients. Thus, caring is considered to be a holistic approach committed to one's self and the society ⁽²⁾. Being the focal value in the nursing practice, a DIABETIC NURSE must possess such attitude and behavior in their day to day dealings with diabetic patients especially those inflicted with COVID 19 virus. Diabetic patients would probably experience complications and would die from it. This is mainly because of poor circulation due to high content of sugar in the blood. This condition significantly decreases the immune system disabling the body to fight-off infections ⁽³⁾.

This paper presents an analysis on the concept of caring behavior of diabetic nurses - its use, definition and type in terms of the provision/management of health care services to diabetic patients with COVID 19.

This study seeks to illustrate how Rodgers' evolutionary concept analysis has been used in nursing research, with examples being provided by the eight articles chosen for inclusion. The presentation of Rodgers' evolutionary concept analysis in these articles is divided into three phases as follows: A: the initial phase, which includes choice of concept for analysis, the concept's context, collection of data for analysis of the concept and choice of texts; B: the core analysis phase, in which the concept's antecedents, attributes, and consequences are presented; and C: the further analysis phase, in which questions for further analysis is presented, revealing the method's ability to indicate the direction that further research should take.

Definitions and Uses of Concepts

Caring Behavior

The behavior of caring is an action, manner and trait performed by professional nurses which brings about concern towards the safety of the patients and attention to patients. Moreover, this is also the actions directly given by nurses to patients while being in the hospital for treatment. The idea of caring is very important in nursing which is also considered as unique. Caring is a unique and major idea in nursing. It is defined as an interrelated human action which is demonstrated and performed as an interpersonal interaction to satisfy human needs ⁽¹⁾.

Caring behaviors are specific actions that are caring behaviors that speak and are acted upon with the well-being of the client/patient. These actions include the following: sensitivity, comforting, attentive listening, honesty, and nonjudgmental acceptance.

There are six (6) elements of caring behavior namely: “care, compassion, courage, communication, competence and commitment” ⁽⁴⁾. Coupled with knowledge, attitude, and skills as well as experience makes it specific/unique. This concept and use of caring behavior pose a holistic approach to client care.

Caring behavior: Human Action, Intervention and Emotion

Caring behavior as a human action as described by Oluma and Abadiga ⁽¹⁾ is an action, ways, manner and attributes of professional nurses which conveys concern towards the safety and well-being of the patients. It also comprises the action/s of a professional nurse in rendering and the improvement of health care services as well as those action/s that would also protect the client in terms of safety, security and well-being.

Caring behavior as an intervention is the caring of being with the patient and doing for the patient and is one of the caring categories identified as a human trait in which it is directly connected to supporting people's needs as described ⁽⁵⁾. This encompasses nursing activities that meet the needs of patients while undergoing treatment. The interventions given are founded on the information and understanding of different fields of Science (natural and behavioral), nursing profession, research and experiences in the nursing field.

Caring behavior as emotion is described as the feeling of compassion, or empathy for the patient that encourages the nurse to provide nursing care for the client / patient. Therefore, these feelings must be present in every nurse in order for patients to feel stress-free, satisfied and safe despite their present condition or illness ⁽⁶⁾.

Diabetic Nurses

Diabetes Nurse or also known as Endocrinology Nurse is a nurse who works with individuals who have diabetes. Specializing in the endocrine system that focuses and deals with the complications that are brought about by the disease. They concentrate on prevention, patient care, and disease management and must have comprehensive knowledge in different therapies. They are the key connection between the patient and other healthcare teams, who deliver a client-centered care considering the aspect of psychological, social, spiritual, and physical requirements of the patient and their families ⁽⁷⁾.

According to Nikitara et al. ⁽¹¹⁾, the qualifications of a diabetes nurse are compassionate, knowledgeable, competent, and most importantly interested and concerned in assisting the patients help themselves, rather than critically seeing the patients who are experiencing difficulty to learn and understand new and changed behaviors, sustain the costly treatments and medications, and get through with comorbidities. The target of a diabetic nurse is to educate rather than to lecture as this will empower the patients to manage and be in charge of their condition, prevent illness and hospital admissions.

Moreover, Boulton ⁽¹²⁾ stated that the role of a diabetic nurse is disparate and should continually develop to acknowledge the need of the community and available resources. It is in this that nursing care extends outside the home and employs numerous ways to render health-care services. They can teach and educate the patient and family members. Topics with regards to the administration of medications and injection techniques, diet and lifestyle, discussing any concerns, beliefs, and misconceptions the diabetic patient may have and the family as well.

METHODS

The conceptual analysis used was formulated adopting the Walker and Avant (2019)¹³. This enabled the researchers to discover new concepts and how it is being used in the field of nursing by means of extracting meaning definitions from a variety of sources.

Conceptual Framework

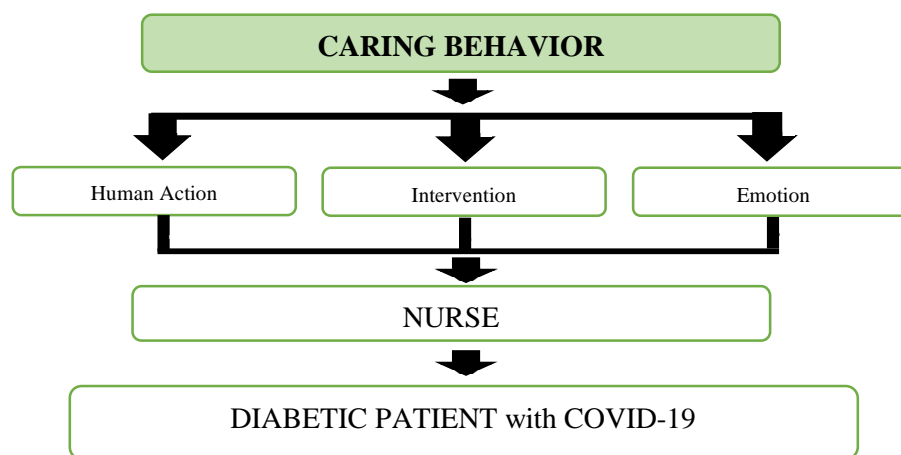


Figure 1. The conceptual frameworks shows the different caring behavior being exercised by the nurses in handling diabetic patients with COVID 19

Search Strategy

The proponents of this paper used Pubmed, National Center for Biotechnology Information, ResearchGate and Google Scholar for references. A total of 714 were generated as deemed appropriate however there were only 20 free full text related literature published from 2010 to present that were utilized.

The different keywords used are the following: caring behavior, nurses, diabetic nurses, diabetes, diabetic patient with COVID 19 and COVID-19. There were no related searches specific to the title however, with the use of the keywords presented above, which were deemed important and necessary, the paper came to materialize. Related literatures were reviewed and selected which targeted the aim of this study.

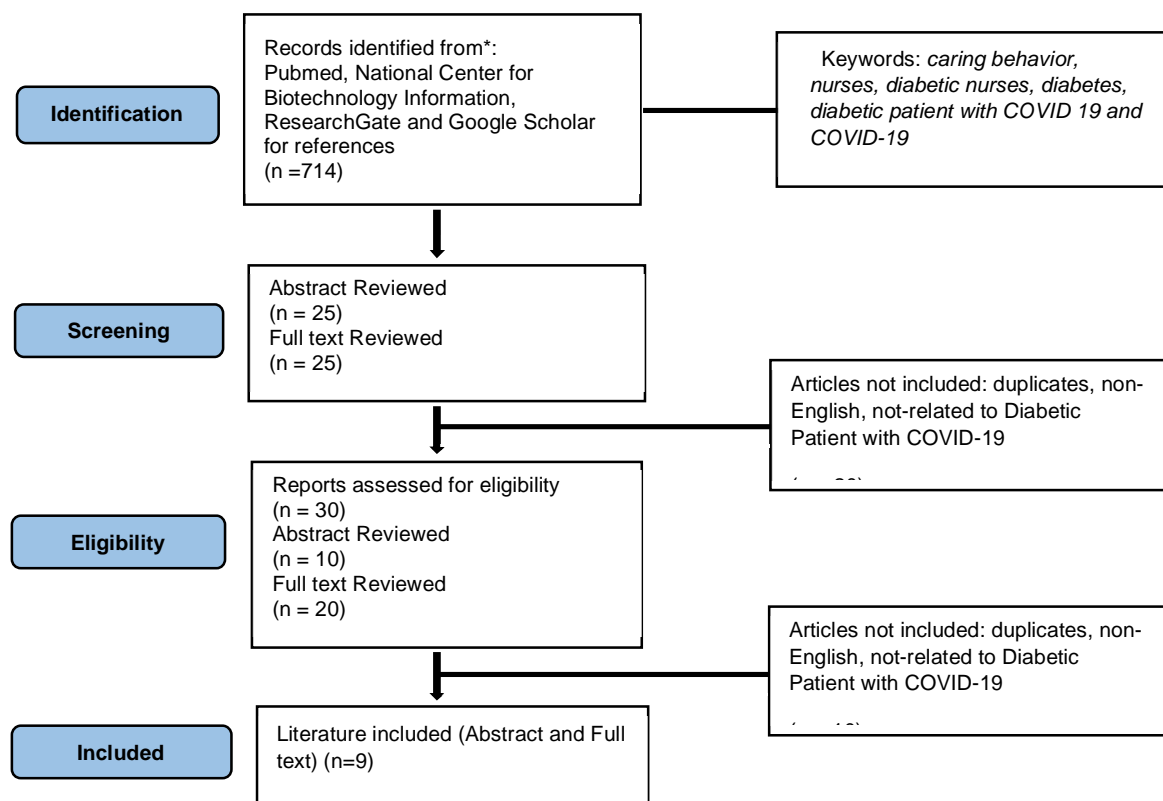


Figure 2. Research strategy for caring behaviors of nurses

Defining Attributes

Defining attributes is very important in concept analysis. These are critical features of a that distinguishes one idea from another related idea and elucidates its definition, (Walker and Avant, 2019)¹³.

The defining attributes were conceptualized based on the literature review. It will help define caring behavior and how it is used in the nursing practice or in the delivery of care to diabetic patients inflicted with COVID 19. These defining attributes are caring behavior as human action, as intervention and as emotion.

1. Human action. Caring behavior is defined as an act, as a nurse performs its duties and responsibilities in the delivery of health-care services.
2. Intervention. Caring behavior is an intervention, since these are actions performed by nurses towards clients/patients to meet their needs while undergoing treatment.
3. Emotion. Caring behavior as an emotion as nurses convey empathy, happiness and concern towards patient safety.

RESULTS

Case Studies

Model Case

A model case is a real-life event which contains all the attributes specified, (Walker and Avant, 2019)¹³. Sanya, a diabetic nurse is stationed in the COVID WARD handling patients with comorbidities. She is assigned to a sixty (60) year-old female patient who is diagnosed with DM2 and is inflicted with COVID-19, not yet vaccinated and resides in the highlands. While attending to her, the client suddenly voiced out her concerns about the medications being given to her in the management of COVID-19 as well as her maintenance medications including her scheduled vaccination. The nurse, explained her comprehensively explained to the patient how the medications work taking into consideration her beliefs and traditions and appeased the patient's anxiety by staying with her for sometime despite the supposed limited nurse-patient interaction.

Analysis: In this case, Sanya exhibited all three attributes in rendering health-care service to the patient. She exhibited these attributes when she stayed with the patient despite the supposed limited nurse-patient interaction (emotion) and when she explained about the medication and vaccination taking into consideration the patient's beliefs and traditions, she showed caring behavior as human action and intervention.

Borderline Case

Cases that contain most but not all of the defining attributes are termed as borderline cases (Walker and Avant, 2019)¹³. Nurse Juya is scheduled to administer the patient's medication. While she was administering her IVF meds, the patient voiced out her fears about the medication and her upcoming vaccination. She responded by only telling her that it is what's best for her with her condition. There was no elaboration on the explanation or even a simple follow up on what exactly her fears are.

Analysis: In this situation, the nurse employed two of the attributes which is human action (the act of giving the medication) and intervention (providing the medication so that the patient can be treated with her condition). The attribute of emotion is not present in which there was no sense of empathy and concern towards the patient, by not elaborating on the explanation and exploring the fears. Therefore, not being able to explore the fears of the patient is tantamount to not being able to address the present situation.

Related Case

These are case scenarios that are related to the study but do not contain any of the attributes, Walker and Avant (2019)¹³. Nurse Jen is having her morning round prior to endorsement. She was approached by a relative of the patient and was asked about how to assess severe complications of asthma. Nurse Jen answered the query of the patient and afterwards she went ahead of her daily routine.

Analysis: This situation does not pertain to caring behavior of nurses to patients with diabetes inflicted with COVID-19. However, it is still related, since it speaks about caring behavior focused towards the relatives and other conditions. It also speaks about the concept of giving care in terms of educating relatives or family members which is a scope of nursing practice.

Contrary Case

Patient Tiano is a 45-year-old man who was recently diagnosed with COVID-19 and is a diabetic patient. He refuses the help of the nurse and claims that he survived this long without having to worry too much about his condition. With his temper he lashes out on Nurse Jane and refuses to be assisted in any way. Nurse Jane acts indifferent towards the patient, and is now asking her Supervisor to be transferred to another patient.

Analysis: This is a contrary case since the nurse is not showing caring behavior towards the patient. It is devoid of the three attributes. Though being indifferent towards a person is an action, it is not performed to deliver any kind of health care services rather it does not render any form of health care service. The action did not also

address emotion since it did not bring empathy, joy, happiness or concern to the patient. Most importantly, it did not serve as an intervention.

Antecedents

According to Walker and Avant (2019)¹³, Antecedents are events or situations that must happen prior to the occurrence of the concept. This paper focuses on caring behavior of diabetic nurses towards its patients inflicted with COVID-19. This points out that the presence of COVID-19 must be a consideration.

The pandemic has a great impact in the delivery of care and the capacity of patients to access health-care services. However, those who are able to access it still experience limitations because of restrictions in face to face interaction. Gone were the days when a nurse is able to really interact with the patients and experience a “personalized” approach. In the study of Sy and Munshi (2020)¹⁴, she presented the challenges of caring for patients with diabetes during the pandemic, in which the problem of self-care and psychological stress is present as well as issues on medications/equipment.

According to Wicaksan et.al., (2020)¹⁵, assessment of comorbidities is very important in the delivery of care and management of diabetes. Close monitoring and diabetic management should be taken into consideration since some studies showed that diabetic patients with COVID-19 were related to poor health results.

Al Moteri et.al., (2022)¹⁶ in his study presents that diabetic patients, whether inflicted with COVID-19 or not, experience fear because of complications and the vaccination.

This shows that the antecedents of the concept of caring behavior are the presence of the pandemic (COVID-19) and fear of vaccinations. The caring behavior of diabetic nurses towards its patient differs at some point because of the presence of the above-mentioned antecedents.

Consequences

Consequences are those incidents/events that may happen as an outcome of the occurrence of a concept and that can rouse innovative ideas or avenues for research relating to certain concepts (Walker & Avant, 2019)¹³.

Caring behavior affects both nurses and the patients. As the nurse employs caring behavior, he/she is not only practicing her profession but manifesting the humanistic side of the nursing profession. As these caring behaviors are put into practice, the patient in turn receives a more “personalized” and humane care, resulting in a more profound nurse-patient relationship. Such relationships may improve cooperation from the patient, making it easier for the nurse to perform interventions and procedures needed for his/her treatment or care management. However, caring behavior must also be used with caution because when nurse-patient relationship flourishes, it may also affect provision of care in a negative way. The patient may become too dependent and clingy towards the patient and the nurse may at some point, give preferential attention towards a patient.

Empirical Referents

Empirical referents are “the means by which you can recognize or measure the defining characteristics or attributes” (Walker & Avant, 2019)¹³. Essentially, they are measurement tools or instruments that help to measure the concept.

Tools to measure caring behavior of patients and nurses alike may include the following:

1. Caring Assessment (CAT) – administrative and educational version which is founded on Watson’s (Duffy 2019)¹⁷. These tools allow for data to be compared, analyzed and correlated. It targets the occurrence of the different caring behaviors occurring in the workplace for both patient and nurse.
2. Caring Behaviors Inventory-24 (CBI-24) which is an empirical instrument for measuring caring, that is developed to determine perceptions of caring among patients and nurses (Klarare et.al., 2021)¹⁸. This is a very good tool since it contains at least four subscales being correlated such as knowledge, skills, competence and connectedness to patients.

DISCUSSION

Caring behavior of nurses has always been the foundation of nursing practice. Rendering services to meet the needs of the patients is not just merely doing the action itself. It is and always coupled with emotion. There is that certain feeling of acting upon what is needed. Based on the literature review and the above stated defining attributes, caring behavior enhances the nurse-patient relationship in the management and treatment of conditions.

The patient being the receiver, eventually feels the effect of such behavior that he/she will find being in the hospital to be comfortable rather than exhausting. He/she will feel that she is “cared” for and is important despite the circumstances that he/she is experiencing. Although the concept of caring behavior encompasses a multitude of factors, this study limits its analysis on the nurse’s caring behavior within the hospital setting directed towards the patient itself. It does not include the significant others or relatives that he/she is living with and the home environment. Also, it is limited within the context of caring behavior in terms of the stated antecedents (caring behavior as a human action, intervention and emotion).

Much is yet to be explored in terms of caring behavior of nurses towards patient care specifically on diabetic patients with COVID 19 since behavior in general is also dependent on the acceptability of the receiver and the limited knowledge about the virus. This presents a big challenge to nurses. How nurses will be able to manage their emotions at the same time render quality service without having their patients muster a negative acceptance of their actions which will in turn affect their recovery and disease management.

CONCLUSION

Through the exploration of nurses caring behavior with the use of concept analysis, the researchers were able to describe and relate different caring behaviors of diabetic nurses in terms of management and provision of healthcare services and inferred that: a) whatever condition a patient is having, at least one or a couple of caring behavior is present, b) the acceptance or acknowledgement of the caring behavior of the nurse by a patient may hasten recovery through cooperation by both parties and c) caring behavior is the core of nursing practice – in which a nurse's caring behavior cannot be separated from the nursing profession.

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