Philosophy of Nursing

# Introduction

The paper aims at exploring the four Meta standards of nursing practice through the lens of author and how they have changed the author’s perception about nursing. In addition to this, the author has related these meta- paradigms with his own philosophy of nursing. Lastly, it guides about how the author’s philosophy of nursing has changed.

# The four Meta paradigms of nursing

 An individual is the first paradigm of nursing. A person’s experience is based on his or her interaction with the external world. There exist different perceptions about nursing, which influence public’s perception about nursing. Sitzman argues that a nurse make the world around her so personalized, as each new patient adds a different thing to their experiences. I believe, nursing is neither an art nor a science (Sitzman, 2017). My nursing experience was a little different from many. I took this profession as a responsibility which nature has bestowed upon me. Since an individual is the first Meta paradigm of nursing, therefore I believe each nurse must develop their ideas about nursing based on what they encounter while working with patients. This is how my personal nursing knowledge has unfolded, which I believe is a lot different from traditional nursing experiences of others.

It is the reason nursing has never challenged my personal values and assumptions. The reason for this is that my personal values and assumptions have always remained very positive about nursing. As environment is the second of Meta paradigms in nursing, therefore it has impacted over me very positively. Since I have joined this area of practice, I have analyzed my interaction with the environment. I have always remained a person who has valued the moral and ethics around, and my personal values and assumptions have remained very steady as I never stopped treating people as first to myself. Similarly, Adam and Natarajan offers a view that social influence should not disrupt one’s personal aim of caring for others (Adams & Natarajan, 2016), I feel, I have completely practiced this approach. My personal values and assumptions were more influential in the ways when I got the opportunity to interact with the patients at my disposal. I experienced that these Meta paradigms are of secondary nature. Nursing experience is more valued and significant when it comes to helping someone in a critical situation in life.

Conflicts are inevitable in this world, and so is the case with nursing profession. Nurses in hospitals face myriad conflicts of multiple dimensions. Nursing professionals have intrapersonal and intergroup differences. The personal conflict among nurses gets augmented when they are frequently interrupted by physician’s curative environment. The ideas of health care team often diverge from what nurses believe in and this becomes a point of clash between the two groups. The theoretical lenses offered by McEwen suggest that the situation even gets tensed when physicians emphasize their point of view and the working environment portrays a stressful outlook (McEwen & Wills, 2019). I had this experience multiple times when my personal ideas for treating critical patients clashed with those of physician’s. I wanted to be more empathetic towards critical and dying patients which, the physician did not approve of. Nevertheless, when I analyzed the situation and deconstructed the disposition, I understood that this could have been easily resolved if both viewpoints were amalgamated into whole for the effective treatment of patients.

Personal philosophy of a person greatly impacts his professional life. This holds true for nurses as well who are serving the patients (McEwen & Wills, 2019). In this view, my personal philosophy is based on mutual respect and empathy for others. I have been a moral and empathetic person in my life and this is the reason that I want to improve the conditions of my patients with much understanding and devotion. I want to make them comfortable and confident in their diagnosis and treatment. This underlying personal philosophy is the reason that I try to connect with patient on a personal level to understand their illness. I even focus on their mental well-being while looking after their physical health. I emphasize on more productivity which is an essential feature of my personal nursing philosophy. Hence, this is the reason that actions in health environment reflect the personal philosophy of nurses, and I follow the same principle.

The concept of meta-paradigm in nurses is not easy to comprehend with a cursory look. To understand the contrasting dynamics of health industry and the nursing profession, Power’s observation remains impactful. He suggests that dynamism is what takes over the life of any nurse (Power, 2016). All the ideas of effective nursing became clear when I entered this field. I gave due attention to patients in their treatment, but worsening conditions of my heath served as an eye-opener for me. I realized that without my sound health I would not be able to deliver much, so I had to care for my own well-being. I started giving attention to my own self and I also learned to refuse those requests that were somehow tricky for me. Nursing transformed me into a better person as I found happiness in other people and all those adversities led to my personal and professional growth and development. I realized the pain and affliction of several patients and even happiness after their recovery. I learned about miracles and this changed my perceptions for life and my surroundings.

My nursing philosophy has kept on changing many times. I have expressed these in the above paragraphs. The first written philosophy of nursing was a little different from what I am now. I have observed that nursing practitioners remain too close to people who are suffering and consider nurses the ultimate comfort source. I have majorly shaped my views about nursing, according to Zaccagnini’s insight, which he has offered in ‘the doctor of Nursing practice essentials’ (Zaccagnini & Pechacek, 2019). I believe this book is a complete guide for those who believe nursing is just spending your time with people in critical conditions. The authors have totally denied this perception and have offered a completely different approach when looking toward nursing as a profession. These natural attributes of love, passion and care have been bestowed upon us by nature which becomes more beautiful and mature when we come into the field. Although these four paradigms are crucial in making an understanding of nursing, my experience has better shaped my thoughts about nursing.

# References:

Adams, J. M., & Natarajan, S. (2016). Understanding Influence within the Context of Nursing. *Advances in Nursing Science*, *39*(3), E40–E56.

McEwen, M., & Wills, E. M. (2019). *The theoretical basis for nursing*. Lippincott Williams & Wilkins.

Power, L. (2016). Nursing theory and the delivery of compassionate care. *Nursing Standard (2014+)*, *30*(24), 41.

Sitzman, K. (2017). *Understanding the work of nurse theorists: A creative beginning*. Springer.

Zaccagnini, M., & Pechacek, J. M. (2019). *The doctor of nursing practice essentials: A new model for advanced practice nursing*. Jones & Bartlett Publishers.