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Editorial: Carol L. Cox

Caring – A Patient’s Perspective

I look back on my nurse training with many fond memories. Memories of my course tutors; times that we laughed (and cried) together and times that I anxiously waited for my exam results and worried about whether I would become a registered professional nurse. I remember my nursing theory modules and their varied perspectives on ‘caring’ that were considered important in relation to how I would develop into a ‘caring nurse’. I loved my nursing theories modules and was convinced that when I qualified I would be a truly ‘caring’ nurse. However when qualified I forgot about theories on caring. I thought about getting the job done. My mind focused on getting through the drug round on time, getting the dressings changed, drips hung, making sure my documentation was as accurate as possible and that I followed doctors’ orders. My focus was on getting the tasks done as efficiently and quickly as possible. I thought that was being a ‘caring’ nurse.

Views on ‘caring’ vary according to one’s perspective. This past summer I had surgery for a bowel obstruction, peritonitis and sepsis. Experiencing several weeks in hospital with abdominal drains, NG tube, numerous IV and dressing changes definitely altered my perspective of what ‘caring’ really means. Whilst in hospital, there seemed to be endless hours of waiting: waiting for my pain medication to be given, waiting for my empty IV bag to be changed and waiting for my call bell to be answered. These ‘tasks’ were important and I wanted the nurse to take care of them. However waiting for the tasks to be done was not what produced my anxiety. I felt helpless and wanted a nurse to be with me.

Experiencing a sense of helplessness and waiting made it seem like time was standing still. The traditional view of time is linear. It is an endless succession of ‘nows’ (Leonard, 1994). Heidegger (1975:263) indicated that a human being thinks of “nows” as “intrinsically patched on to one another and intrinsically successive”. ‘Nows’ gives a perspective of things existing as static (at a standstill). They become an accrual of events in time (Leonard, 1994). As a patient, what broke the perception of things being static - a succession of ‘nows’ (Now the IV; Now the dressing) was the presence of the nurse. By ‘presence’ I don’t mean the nurse changing my dressings, my IVs or irrigating my NG tube. It was the nurse that came to my bedside to double check that I was OK after the dressing change and then staying a few minutes and holding my hand. It was the nurse that came in to my room for a chat whilst waiting for my IV antibiotic to finish and the nurse that came back to check whether the pain medication she had given me was reducing my discomfort and then taking time to reposition me so that I could sleep more comfortably. You might say it was the ‘little things’ that reduced my anxiety whilst waiting for the ‘nows’ to happen.

Nursing theories about 'caring' focus on 'being with' patients. When I was a student my course tutors spent time with me. The time they spent with me conveyed a sense of 'caring about me'. When a patient in hospital, I found that it was not the 'tasks' being done that conveyed a sense of 'caring'. It was the nurse being with me. This presence conveyed a sense of caring about me.

References:

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