RESEARCH NOTE

"Hulas at Hiya": Reflections on Filipino Context of Human-Connectedness and the Nature of Nursing

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Abstract

This paper, through the lens of ethnography, explores and analyze the Filipino concept of *hulas* and *hiya* as the context of human-connectedness and its implication to the contemporary understanding of the nature of nursing and the process of knowing persons as persons. It is argued that the concepts of *hiya* and *hulas* are social constructs deeply ingrained in the Filipino psyche and society. Both markedly influence how Filipino persons present themselves and act in accordance with their unique and complex social dynamics. As such, this paper supports the idea that between the dichotomy of social and medical sciences, the discipline of Nursing shares the paradigmatic orientation and values of the former more than the latter. It is implied that education in nursing at the undergraduate and postgraduate levels must include scholarship, research, and studies on the prevailing local cultural knowledge to shed a deeper appreciation of unique practices and concepts affecting the understanding of nursing science and its expression as a discipline.

Keywords: Hiya, Hulas, Knowing, Knowledge, Nursing

Introduction

n this paper, the cultural concept of *hiya* and *hulas* are viewed through the ethnographic lens and prevailing philosophy (Laughame, 1995). The perspective and facets of culture, naturalism, and holism is utilized to gain a deeper understanding of these two concepts and situate the implications of this analysis to the contemporary understanding of the nature of nursing and the process of knowing persons as persons.

The following propositions provide the grounds for this paper analysis, that: (1) Human-connectedness in nursing is caring, (2) the Intent of the process of knowing persons is human-connectedness (3) the context of human-connectedness is socially constructed. Human-connectedness occurs when persons are actively engaged resulting in a sense of well-being, comfort and meaning (Hagerty, Lynch-Sauer, Patusky, & Bouwsema,1993; Latimer, 2013; Martinez, 2019). Once it occurs within a nursing situation, human-connectedness becomes an expression of caring in Nursing.

One of the fundamental roles of a nurse within these nursing situations is the promotion and maintenance of human-connectedness as person transition along the human-health continuum. Creating moments of human-connectedness and facilitating its expressions as person is transitioning, is one of the unique disciplinary hallmarks of Nursing.

The process how people expressed human-connectedness is heavily influenced by their personal experience, professional training, and cultural milieu. Since human-connectedness is essentially dependent on the continuous, deliberate and mutual engagement of persons in the process of knowing, the manner how persons relate, communicate and connect with one another grounds the content how human-connectedness is created. These patterns of human-connectedness and the context where they occur therefore are socially-constructed, largely determined by the people's communal cultural context.

Discussion

The Filipino culture, often described as being person-centered (Pe-Pua & Protacio-Marcelino, 2000) provides a unique perspective of the context and nature how human-connectedness is created within the nursing situation. Distinct Filipino concepts such as *hulas*, *hiya* and *hiyang* provide a glimpse on the meaning-making of Filipinos on human-connectedness. These three concepts and their relationship on the contemporary understanding of the nature of nursing are explored in this paper.

Hulas

Hulas is a unique concept among Filipinos, which may connote two things: defervescence of a fever (paghupa ng sakit) or melting of a candle (pagkalusaw). Both meanings point out to the notion of withering of things, the former meaning attributed mostly to persons being nursed and the latter towards the nurse. The notion that a "hulas" nurse is akin to a melting candle is closely related to the Filipino concept of compassion fatigue. Compassion fatigue, described as a work-related stress among health care providers (Sinclair, 2017) is seen as progressively chronic and enduring in character. The nature and setting of the nurse's workprovides a ground for "toxic environment" to happen. This constant and repeated exposure to these "toxic environment" can bring about hulas and compassion fatigue to nurses. What set the

notion of hulas different from compassion fatigue is the element of impermanence. Although Hulas and compassion fatigue will both have physical manifestations, compassion fatigue tend to be more lingering than the transitory hulas. A nurse that looks tired on a given duty day may be labelled as hulas by others but if this becomes perennial, that nurse maybe seen as having compassion fatigue.

Another interesting characteristic of the concept of *hulas* is that it is always viewed from the others' perspective. A Filipino nurse will often describe themselves as *pagod* (tired) rather than say that they are *hulas*. It is the other person, a fellow health care provider, the patient or their family, that will see that same nurse as *hulas*. Since the process of knowing persons is built upon trust and intimacy developed through rapport, the manner how persons present themselves and how their comportment is appreciated by the other becomes critical.

The concept of *hulas* takes into account the almost extreme sensitivity of Filipinos to appreciate minuscule sensory-based aspects of persons and attribute it to that person's wellness or lack of it. Filipinos high affinity to see fine details and feel context clues such as the other person's tone of voice, choice of words, posture, distance, body movement, and non-verbal actions, are taken into account to appreciate the other persons atthe-moment being. The notion of the personal "gut-feel" is sometimes given more emphasis than what the other person claims themselves to be.

These bring one of central principles hulas. deep understanding of the impermanence of things. May it be the transitory nature of stress and fatigue or the moment to moment reality of knowing persons, hulas emphasize that knowing persons is an unending journey and never an absolute process. The nurse perceived to be hulas today may not be seen as hulas tomorrow. The momentarily appreciation of persons only hold its truth within that situation. Reality is context sensitive. What we think we know as real and truth at the moment, is only true at that instance. Hulas emphasize that it is the sense of unknowingness that opens possibilities of knowing persons fully as persons. The deliberate establishment of the nursing situations between the nurse and the nursed always begin with knowing persons fully as persons. The intent of knowing persons, humanconnectedness, can only be appreciated moment to moment as it is always perpetually never complete.

Hiya

Hiya is a concept often translated as a sense of propriety (Pe-Pua, & Protacio-Marcelino, 2000). It is defined as a "painful emotion arising from a relationship with an authority figure or with society, inhibiting self-assertion in a situation which is perceived as dangerous to one's ego" (Bulatao, 1964 p. 428). More than a value, it is a Filipino virtue which emphasizes an active, conscious and sacrificial effort of self-control for the sake and welfare of the other person. Hiya prevents the other persons from suffering from being hurt, slighted, or embarrassed (Lasquety-

Reyes, 2016) and thrives in a culture where social approval and control is highly operative (Ligo-Ralph, 1990). It is a potent social control of Filipino's actions (Watkins & Gutierrez 1989).

The essence of Filipino relationality is centered on this concept of hiya. The concern for the welfare of the other person is an essential element of the Filipino interpersonal relationship. Hiya exists to protect the fragile ego that is the individual self. Since this sense of self among Filipino is always projected toward the other person (the kapwa), these persons are indirectly seen as having a fragile ego as well. Hiya is a mechanism by which Filipinos actively control and refine their actions and words to protect the perceived fragile self of the other person and in the process prevent their embarrassment. With hiya, information from the person is purposefully filtered depending on how the other person's authority and position is compared to themselves. A Filipino patient may complain of pain more to a nurse than to a consultant physician for the latter is seen as more of an authoritative figure than the former. With hiya, respect for persons in authority is instinctively magnified to the point that the person's choice of words, voice tone, and expressive gestures are filtered to avoid offending the authoritative figure's feeling and appear to assume a non-threatening stance to avoid challenging their other person's expertise and authority. Even with the nurse, some Filipino patients suffering from pain may not readily divulge their concern unless directly asked of it because of hiya. The sense of being an added burden to the nurse because of the patient's personal concern seems to be more potent than their actual pain that for some, they would rather endure than disclose it and add to the difficulty of the nurses responsibilities.

A Filipino nurse on the other hand, may find it difficult to ask questions deemed as inappropriate (such as sexual history) especially if the patient is person of authority or someone that they have had intimate relationship with. The sense of awkwardness brought about by *hiya* for the person being asked of the question maybe so compelling that the nurse may wilfully skip those even if it maybe essential to the patient's current health concern. Indirect inquiry via the use of euphemisms instead of direct questioning may be utilized by the Filipino nurse to circumvent this feeling of *hiya* but in the process vital information maybe loss in translation. This situation may become more problematic if the person being nursed is not accustomed to the Filipino's indirect pattern communication. These indirect patterns of communication because of *hiya* may hinder open and truthful communication which is a core element of rapport building within the nursing situation.

An essential element of the concept of *hiya* is the existence of a perceived imbalance relationship of power and authority between the nurse and the nursed on the onset of the process of knowing persons. Since the process of knowing persons is dialogical, evolving, changing and perpetually incomplete, this sense of power imbalance may be altered as the nurse assumes varied role within nursing situations as it continuously unfolds. For the intent of the process of knowing persons, human-connectedness, to be momentarily realized, this perceived disproportional power and authority among the nurse and the nursed must be transformed. As with the concept of *hulas*, the stance of unknowingness and openness facilitate the realignment of these imbalances. Certain information such as the personal account and human-health

experiences of the one being nursed are unknown to others. The nursing knowledge only accessible and privy to nurses is unknown to the one being nursed as well. Within nursing situations, therefore, the nurse and the nursed are both knowledgeable and unknowledgeable at the same time. There must exist a deliberate effort from the nurse to assume varied roles within the nursing situation as moments dictate, coupled with the attitude of unknowingness and the posture of openness to bring balance of authority and power at its optimum. These affirm that the nursing situation is a transactional space where identities of persons are fluid and the balance of power and authority is dynamic.

The concept of *hiya* emphasizes that communication between persons always occur thru a cultural sieve. *Hiya* is one example of a social filter. The dialogical nature of knowing persons within a nursing situation invariably happens within a cultural context. Being consciously aware of the cultural context where knowing persons occurs within the nursing situation is imperative if the goal is to know the other person fully as person moment to moment. The intent of knowing persons is the creation and maintenance of human-connectedness.

Synthesis and Implications

The concepts of *Hiya* and *Hulas* are social construct deeply ingrained in the Filipino psyche and society. Both markedly influence how Filipino persons present themselves and act in accordance with their unique and complex social dynamics. These allow Filipinos to navigate the intricacies of their social network and maintain a sense of personal peace and community equilibrium. *Hulas* and *hiya* provide the context of human-connectedness among Filipinos which is essential in the formation of rapport and the process of knowing persons fully as persons. These two processes among others allow nursing situation to occur where caring moments can be expressed.

Insights from this paper support the assertion that between the dichotomy of social and medical sciences, the discipline of nursing shares the paradigmatic orientation and values of the former more than the latter. The assumption that persons are unpredictable, holistic and intrinsically sentient on their sense of well-being and that persons are more knowledgeable of their personal experiences and meaning making processes, is essentially similarly shared with the prevailing paradigm of the social sciences. Cody (1995) termed this paradigm as simultaneity, whose core application to nursing is the assumption that the unpredictability of persons makes each nursing situation even with the same person, unique and continually evolving. Knowing the history of the person is not the same as knowing the person fully as person. Each nursing-nursed encounter is different making the process of knowing persons perpetually unfolding and never complete. There always exist a sense of awe and wonder in every nursing situations and encounters.

Studies exploring the unique social and cultural context of human-connectedness and its effect on the contemporary understanding of nursing as practiced within each locality and its changing nature is needed to provide a more holistic appreciation of Nursing as a universal

discipline. Education in nursing at the undergraduate and post-graduate level must includescholarship, research and studies on the prevailing local cultural knowledge to shed a deeper appreciation of unique practices and concepts affecting the understanding of nursing science and its expression as a discipline. Knowledge of the social science and humanities should not be over shadowed in the education of future nursing professionals.

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