

## EDITORIAL

## Is caring the same as nursing?

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The various definitions associated with caring make it both an elusive, and interesting concept. Depending on what theoretical or philosophical perspective you take, it may be seen as a human trait, an effect, a moral imperative, a therapeutic intervention, or an interpersonal interaction (Morse et al., 1991). With this diversified take on caring, it seems that we have neither fully defined it as a fixed concept, nor had we exhausted our means to delimit its boundaries.

The prevailing question of who owns the expertise of caring is often asked among the various health care professions as caring appears to encompass every action of their practitioners. If caring is seen as a basic human trait (Morse et al., 1991), a human mode of being (Roach, 2002), or an expression of humanness (Boykin & Schoenhofer, 1993), does it mean that professional education is unnecessary to learn its concepts and expressions?

Although the human person is innately caring and can care, their expressions of caring differ from one another as these are deliberately learned and shaped by the individual's life experiences and the meanings they attached to these experiences. The varied expressions of caring together with the individual's narratives are what students bring with them when they choose to be a disciple of any helping and healing professions grounded on caring. It is the responsibility of their discipline to inculcate in them the unique expressions of caring as a reflection of their imitable disciplinary knowledge. The amalgamation of the students' experiential understanding of caring and their unique disciplinary perspective makes their expression of caring a reflection of their shared humanity and professional identity.

Caring expressions of varied practice-based helping and healing professionals when seen from an outsiders' perspective may appear identical but each professional's intent is markedly different. A psychologist's use of psychotherapy, a counselor's employment of counseling techniques, and a nurse's process of pattern recognition may all look like an interview session, but they are not. The intent of the practitioner stemming from their distinct disciplinary knowledge and their unique way of expressing the inherent wisdom within their discipline makes their caring action uniquely their own.

Among the diverse professions, caring is most often associated with nursing, but it is not unique to nursing. Nurses do not own exclusivity to the knowledge of caring but how

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it is actualized and expressed is unique in every discipline. Caring is not unique to nursing but unique in nursing (Roach, 2002). Other helping and healing professions have different ways of actualizing caring, both as an expression of the practitioner's humanness and their disciplinary knowledge and values.

Not all actions of the nurse are expressions of caring in nursing, some that seem reflexive and automatic is more of an expression of their humanness than their discipline. A mother who gives medication to her sick child is caring but she is not doing professional nursing. A nurse who helps an old person cross the street is being a caring person but is not doing nursing. A PhD-prepared psychologist tending to their febrile colleague is caring but is not doing professional nursing.

Nursing actions, as one manifestation of caring, when done outside of nursing situations are not reflective of nursing's unique disciplinary knowledge. Not all caring moments, may it be a short encounter or prolonged interaction, occurs within a nursing situation. Those that occur outside of a nursing situation are mere caring moments, an actualization of the person's good intention. Being mindful, eating properly, maintaining proper hygiene are examples of caring for the self but it is not nursing. Self-care actions are essential and necessary for the survival of the individual and are reflective of the nature of caring as a human trait, and not as a definitive nursing action. If self-care is nursing, then all persons are professional nurses since all persons take care of themselves one way or another.

For caring to be considered as nursing actions, it must be deliberately done as an expression of nursing's unique body of knowledge framed within its disciplinary perspective and must occur within a nursing situation; a space of sacred, momentary, transactional engagement with another person aimed towards their betterment.

Caring and nursing were never synonymous. The confusion may stem from our narrow comprehension of both concepts as mere verbs rather than gerunds, which is further compounded by the repeated claim that nursing is caring without presenting a clear philosophical, theoretical, or logical proposition to support such misinformed assertion. Such a declaration is counter-intuitive and discipline-centric.

All practitioners of the helping and healing profession, with their humanness and disciplinary training, are experts in human and professional caring. Their distinctive disciplinary perspective on caring reflects the notion that our understanding of caring is always imperfect, and its concept is continuously co-evolving with humanity. No discipline or profession owns the restrictive privilege of caring knowledge or the sole expertise in caring expression, not even nursing.

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