A Conceptual Model of Nursing: A Model of Personhood for Irish Nursing

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Abstract

A model of personhood for nursing in Ireland based on Celtic society, Irish language, Irish customs, and the Catholic religion is discussed. Concepts central to the model are presented bilingually as a means of capturing the essence of nursing care in an Irish context. The adequacy of the model is considered from the perspective of the following evaluative criteria: social utility, social congruence, and social significance.

Keywords

anam cara (soul friend), *aire* (caring), Irish nursing, spioraid (spirit)

The conviction that nurses care by virtue of their humanness provides the philosophical basis for the development of an Irish nursing model. Core concepts bilingually presented include *Anam Ċara* (soul friend), *Spioraid* (spirit), *Aire* (caring), *Gra* (love), and *Dochas* (hope). These concepts provide a basis for nursing practice in an Irish context.

Background

The earliest theoretical framework used in nursing and midwifery in Ireland was based primarily on the medical model. A popular textbook used by nurses in Ireland during the early part of the 20th century included an approach to nursing based on anatomy and physiology (Cassells, 1908). Nursing in Ireland prospered well into the 1980s from the medical model of disease (signs, symptoms, diagnosis, and treatment). Nurses were taught and came to understand medical terms and concepts as the core of what nursing was, basically the knowledge of the care of patients with various medical conditions. In the period from 1970 to 1980, nursing began to use the theoretical perspectives of Henderson (1969) and a model developed by Roper, Logan, and Tierney (1983). The latter model focused on the activities of daily living, which is a predominantly a prescriptive needs-based model. The perceived need for a model that reflects a nursing framework based on an Irish perspective of nursing practice led to the development of the model of personhood, which is presented here.

Celtic Influences

The influences of a predominantly Celtic society, Irish language and customs, spirituality, and the Roman Catholic religion have formed a national cultural identity (Cleary & Connolly, 2005). This has had a strong influence on the practice of nursing in Ireland. Together with the historical evolution of the profession and the influence of Florence Nightingale, these Celtic influences ensured that Irish nurses included spirituality and holism in their view of human beings and their practice of nursing. Myth and religion have always played an important role in Irish culture, which is reflected in language and literature. In Gaelic the common greeting or "hello" is "Dia Dhuit," which literally means "May God be with you," and the common response is "Dia agus Muire Dhuit" (God and Mary be with you). The greeting is framed in a blessing, which is repeated as one leaves and says, "Dia Leat" (May God keep you). Likewise, the Irish language has a special word for Mary (Muire) as the Mother of God.

Model of Personhood

Assumptions of the Model of Personhood

The following assumptions underpin the model of personhood:

1. Nursing is concerned with the whole person.
2. The nurse recognizes that the person is an existential being.
3. Nursing is a caring force and reflects the elements of a therapeutic relationship which include caring (Aire), love (Gra), and hope (Dochas).

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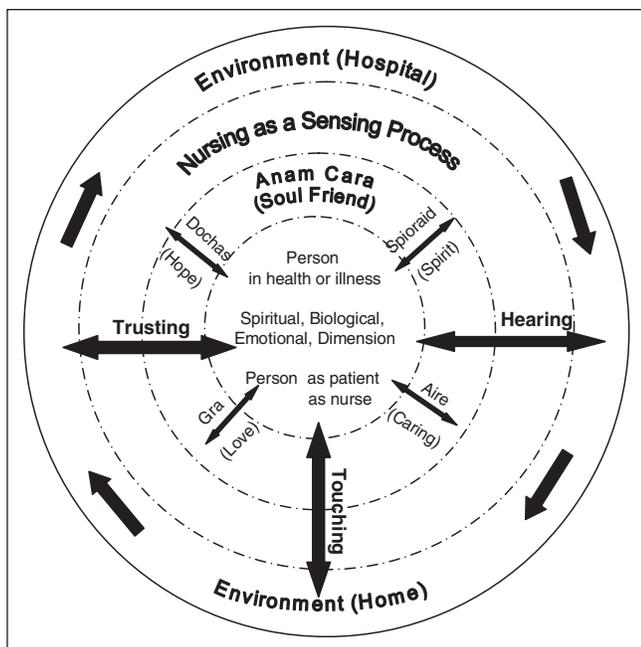[2]College Lecturer, National University of Ireland

Figure 1. Model of Personhood

4. Nursing is a sensing process that accounts for the concepts presencing, hearing, touching, and seeing.
5. The nurse is the "Anam Ċara" or soul friend to each patient.
6. Nurses recognize the influence that the internal and external environment have on health and illness of individuals.
7. The nurse takes responsibility for the restoration of a healing or therapeutic environment.

Concepts of the Personhood Model

The following concepts make up the model of personhood (see Figure 1).

The Anam Ċara. In the Celtic world Anam Ċara was "soul friend"; Anam is the Gaelic for Soul and Ċara for friend. In the early Celtic church a person who acted as teacher, companion, and spiritual guide and to whom you revealed the hidden intimacies of your life and shared your innermost self was the Anam Ċara. The relationship that developed was an act of recognition and cut across convention—the friend of your Soul joined you and was a sister of the body. Body and soul are unified in a spiritual trusting relationship that transcends any one faith. In the model of personhood the nurse is the Anam Ċara of each patient. Similar views were reflected in the works of earlier nurse theorists. Peplau (1952/1998) first articulated the importance of establishing a helping trusting relationship with the person as a basis for the delivery of therapeutic care. Henderson (1991) believed that the

nurse should *get inside the skin* of each patient to develop an understanding of what was required to promote recovery and independence or to facilitate a peaceful death.

Person. The second core concept of the model of personhood is the person, which is conceptualized from a humanistic philosophical perspective; the underlying belief is that each person should be treated as a unique human being. In this model, both the person requiring or receiving nursing care (the patient) and the nurse, are considered unique persons composed of spiritual, biological, emotional, and sociological dimensions. Each part works in harmony with the whole. The biological dimension is your *house of belonging* in the world. The emotional dimension is an inherent dimension that, in health, acts in concert with the biological and spiritual dimensions. The spiritual is the soul, and it surrounds the body and is not just within it. That the human body as an expression of the soul is explicably illustrated in the mythical story of the Children of Lir (see http://en.wikipedia.org/wiki/Children_of_Lir), who were turned into swans (yet retaining their humanness) by their jealous stepmother. They remained as swans for 900 years until Christianity came to Ireland. The soul light may be brought into the body through prayer, meditation, or reflection. These human dimensions are in constant dynamic interaction.

When individuals encounter illness all elements are affected, but one may be the primary focus. Based on the Irish Celtic cultural perspective persons have the following characteristics: Aire (caring), Gra (love), Docas (hope), and Spioraid (spirit). These dimensions together combine to merge into a concept called personhood. The model includes interrelationships among concepts central to nursing (see Figure 1 for an illustration of the model of personhood). The circle is an old and powerful symbol, the world, sun, and moon are circles—day and night and the tides follow a circular motion, circles of stone, and forts and watchtowers were built in circular fashion in Ireland. The innermost circle contains the person as a unique individual in health or in ill health, surrounded by the Anam Ċara who provides care through a sensing process. The outside circle represents the environment, within which care is given and is seen as cyclical from home to hospital with halfway houses, community hospitals, nursing homes, or specific facilities also available.

Spioraid (Spirit). The concept of spirituality has been a major influence in Irish history and remains an important force in the day-to-day lives of most Irish people today. While the concepts of religion (belief in a God) and spirituality (the quest to find meaning) may have different meanings to people, there is a common belief that they are intertwined and that the terms are used interchangeably in the Irish context. In fact, when referring to the concept spioraid (spirit), Larkin (1998) wrote of the respondents' belief in an *existential being* and cherished religious convictions that exist in relation to

death and dying. Living their spirituality allows people to transcend the helplessness of the situation and provides some hope and meaning in life, despite life-threatening illnesses. Spirit also is used to describe zest for life, intangible presence, or that which leaves the body at death.

Aire (Caring). The significance of the concept caring for the discipline of nursing has been identified in Celtic and Irish nursing literature. Healthcare has historically been defined from a paternalistic perspective and the traditional biomedical science models. However, from an Irish perspective, it is defined as maternalistic and holistic. Caring is an integral component of nursing. The caring presence of the nurse is described by the term Anam Ċara. The central focus of the concept relates to the sensitivity required in accepting and understanding the other person's views of health, illness, dying, and living. It also involves being sincere and open in regard to the choices available to people. An unconditioned regard for the other is necessary to truly connect with the person. When people are made aware of the options available to them, they usually are in a better position to choose from alternatives without feeling alone.

Gra (Love). Gra is the Irish word for love and has not always been explicitly expressed in Irish life but it is often understood implicitly, as in the following quote, "I enjoyed the happiest of childhoods in a home where love did not have to be spoken—it was there all of the time, unspoken at times, but apart of the air we breathe" (Kearney 1997, p. 48). Love begins by exhibiting warmth and paying attention to another. It is also expressed by Saint Paul's famous poem on love (Jones, 1966), "love is always patient and kind; it is never boastful or conceited; it is never rude or selfish; it does not take offence. . . . Love is always ready to excuse, to trust, to hope and to endure whatever comes" (p. 304). Larkin's (1998) study referred to respondents' use of the word *gramhar* (loving) to describe the shared knowledge that exists between nurses and patients in relation to death and dying. The term signifies the sense of togetherness and community spirit that exits between Irish people at a time of loss. This is seen in particular at times of death when *wakes* are held (often in the person's home); neighbours and friends comfort mourners, and even businesses are closed as a sign of mourning and respect for family members grief.

True Presence is a concept in Parse's (1999) humanbecoming school of thought. Her use of the notion of true presence is taken in part from existential philosophy, and she uses it to guide nurses to be in true presence with persons in order to come to know what is important to them in regard to their health and quality of life. Through the process of Socratic dialogue, Fitzgerald and van Hooft (2000) concluded that a distinct difference exists between the concepts Aire (caring) and gramhar (loving), when discussed in the context of nursing practice. Gramhar (loving) is demonstrated in

practice when the nurse provides unselfish care that goes beyond caring for the self, without reciprocity. This description of *loving* can be compared to the concept of *disinterested love* illustrated in *the careful nursing system*. The term *disinterested love*, identified by McAuley (as cited in Meehan, 2007, pp. 40-49), also implied that the nurse operates from an altruistic position and provides care to each person without seeking personal gain (Meehan, 2003).

Dochas (Hope). Hope is a multifactorial complex feeling exhibited at different times during life. It is described as springing eternally in human beings, held in the heart, and is often the imperceptible dimension that keeps the spirit alive when a person encounters illness and other challenges. Faith in God is characteristic of traditional Irish culture and is seen as the primary source of hope. Faith and hope are practiced in reflections, prayers, and pilgrimage to holy places in search of healing or a miracle. Hope is shared and supported by loving interpersonal relationships and shared values and beliefs. Hope is linked to the senses and may be observed in the eyes and articulated in voice. The individual beliefs of persons and the meaningfulness of these beliefs are manifest in the hope that they express.

Health. In the model of personhood being described here, health is conceptualized as the ability to function as an independent individual in society. In this regard, the goal of nursing is to enable each person to achieve an optimum level of health and well-being. The achievement of this goal requires commitment from persons, but also requires the skills and knowledge of nurses to effectively promote health and prevent illness. This goal also takes into account the values and health beliefs of persons and their families. Healing is promoted through individually focused nursing care that focuses on immediate healthcare needs, but in the context of a philosophy that gives value to the concept *personhood*. While health is conceptualized in the model, as a continuum from ill health to health; it also takes into account the person's own sense of wellness. The model also acknowledges that individuals live out their lives in accordance with their own beliefs and values about health and well-being. Health education initiatives focus on providing information to individuals and their families on issues related to health and illness.

Environment. The person receives nursing care in a number of healthcare settings, but for the majority of patients, this care is given primarily in the home or in the hospital. In the model, the environment takes into account the context in which the nursing care is administered. In an environment of trust and sincerity, the model considers the role of the nurse in the promotion of a participatory interaction between human beings and their situations. In current healthcare settings, nurses encounter many perspectives, which provide wider understandings for viewing persons within their

environments. These perspectives include cultural changes, family dynamics, socioeconomic forces, and the lack of support structures for patients discharged from the hospital or living in the community. The nurse takes responsibility for the restoration of a healing or therapeutic environment. The model proposes that each nurse recognizes the therapeutic effect of a professional caring (Aire) environment for people who are ill. Trust and respect for persons within their environments of care form the basis of a personhood approach to practice.

Nursing as a Sensing Process

When the focus of nursing care is persons and their situations, and not just the disease processes, nursing takes into account the physical, psychological, emotional, sociological, and spiritual dimensions requiring care, in a way that supports personhood. This concept gives credence to persons' abilities to consider the moral, psychological, and cognitive dimensions of life and acknowledges significant others as being important to the individuals. This perspective requires the person to be self-aware and to be able to watch over *the self* through changing life situations (aging, disease) or along the continuum from illness to health. In this way individuals are cared for from an individual perspective and are accorded the professional nursing care required to meet individual needs. The involvement of the person and family is also significant to the process of nursing care. A nurse uses all of the senses in the process of nursing, and in unfamiliar situations all of the senses are alerted: the eye (to see), the ear (to hear), touch (to feel and communicate), and self (as presence). In a traditionally Irish view, eyes are considered *windows of the soul* as the "soul writes the story of its life in the contours of the face" (O'Donohue 1997, p. 44). Irish nurses generally understand that *the eye is selective in what it sees*. The nurse in observing selects what to see through her own personal experience and self-knowledge. Criteria may be professional but are also deeply personal with attributes developed through nature and nurture. The eye of the nurse can see pain, hurt, renewal, truth, avoidance, and love. The eye of the nurse is rarely judgmental while assessing and communicating in nature.

Likewise in the Irish context, the tongue is the organ of speech. Words are an expression of physical, emotional, and spiritual dimensions of persons. Some Gaelic words such as Gra are Irish, which express for many people words that are not easily translated into English. Nurses communicate on a daily basis with multiple patients and the manner and tone of their words are of tremendous importance. Soft words spoken to the dying can convey harmonious relating, being in sympathy, being with and for. The achievement of confidence in silence is a tenet of most ancient cultures and the development of such an attribute in the nurse is vital. Contemporary literature applauds silence and reflection and most religions today promote its use. Linked to speech is the sense of hearing. One of the tasks of nursing is compassionate listening that can bring the nurse in touch with both what is said and unsaid and unsayable. Touch connects in a very intimate manner. Nurses use their hands constantly and continually touch, explore, and feel the world of other people. Touch can confirm the presence of the other, can comfort, sooth the child and express feelings such as belongingness and tenderness. Touch fosters warmth and reassurance. Touch is the sense through which people experience pain and it can be used to heal.

When Irish nurses think or speak of individuals they speak of charisma, charm, personality, appeal, all characteristics defining personhood in terms of presence. Presence is the manner in which nurses meet a person. O'Donohue (1997) said that "presence is the soul texture of the person" (p. 136). Presence creates atmosphere and can be positive and therapeutic. Nurses by their presence can enhance a relationship and create an atmosphere conducive to health and healing.

Adequacy of the Model

The adequacy of the personhood model outlined above is considered here. In regards to *social utility*, the model is nursing-practice focused. It gives value to the individual beliefs of the person in an Irish context and to the professional beliefs and activities of nurses who provide care. The social congruence of the model is its potential to be compatible with the expectations of nursing within an Irish culture. The model utilizes language in a way that reflects the culture, norms, and beliefs of both Irish nurses and their patients. *Social significance* of the model can be seen in the making of judgements regarding the social value of it as a nursing model. The *social value* of the model of personhood is enhanced by its use of Irish language and the fact that it takes into account the historical, religious, and social backgrounds of Irish people. Its focus has significant meaning for nursing in Ireland as it gives voice to the values, beliefs, and norms of Irish people.

Conclusion

An Irish conceptual model of nursing titled the model of personhood was presented here. The key concepts of the model are Anam Ċara (soul friend), Spioraid (spirit), Aire (caring), Gra (love), and Dochas (hope), as well as health, environment, and nursing. Nursing is presented as a sensing process with emphasis on seeing, hearing, touching, and presencing. The key issues concerning the adequacy of the model are that it is well suited to the Irish context.

Declaration of Conflicting Interests

The author declared no potential conflicts of interest with respect to the authorship and/or publication of this article.

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