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A framework for holistic nursing care in paediatric nursing

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Table 6: 1 Conclusions drawn from concept analysis and from emic views of the paediatric nurses and concept classification and concept identification.

Conclusions drawn from concept analysis	**Conclusions drawn from emic views of the paediatric nurses**	**Concept classification**	**Concept identification.**
1. Spirituality Spirituality is a quest for a **transcendent relationship** with a **God, supernatural being or Life force.** It involves an individual's **search for meaning in life, wholeness, peace, individuality and harmony.** The inclusion of **spirituality** in care is identified as a **hope fostering strategy** giving the child/family **pleasure and hope.** **2. Whole-person** A whole person is a spirit being defined as physical, mental, emotional, and spiritual being. **3. Body-mind-spirit dimension** The whole person is **tripartite** with **body-mind-spirit** dimension **embodied** in an **organic whole**. There is a **harmonious balance** between the three dimensions and the **spirit** is the **immaterial entity**. **4. Person centred care** The person-centred care is linked to the **whole-person** and mind-**body-spiritual** attributes. It includes recognition of the	**7. Wholeness of The child** The child is considered a **spiritual being** with **body-mind-spirit mind-dimensions** embodied in an **organic whole**. The child is a whole person with unique **physical, mental, emotional, social, and cultural** attributes. Wholeness of child refers to the **inseparability** of the child from family**, inextricably joined** and **interwoven with family** and finding **identity contextually and culturally**. When the family unit is **broken, or dispersed**, the child remains **whole.** **8. Nurse as person** The nurse is **whole person** embodies **personal** and **professional knowledge** with **mind-body-spirit-social-cultural dimension**. As a person the nurse is **humane** and **sensitive** acting in a **loving** manner. The nurse as a person possesses three types of **knowledge and technical skills that** enable the nurse to make **sound clinical judgement**. The nurse possesses **general knowledge** of the **diseases** which is th**e "know what and know how",** the **personal intuitive knowledge** of the patient as a person with a strong **cultural identification** and **communal**	1. Whole person (2, 3.4, 7, 9.1) 2. Body-mind-spirit dimensions (3, 7, 8, 9) 3. Person-centred care (4) 4. Nurse As Person (4, 8, 10.2) Humane Sensitive Loving Knowledge of disease Personal knowledge Inner knowledge 5. Spiritual being (2, 6, 7) 6. Spirituality (1, 8, 9.3,11.3) Caring presence Being there 7. Cultural sensitive care (5, 8, 4) Recognition Cultural being Cultural Congruent Belief Values Good & bad practices 8. Whole care -physical, emotional, mental, spiritual, social, and cultural	1. Whole person - child (R*ecipient 1, 3, 5)* 2. Paediatric nurse (*Agent, 1,4,5)* *3.* Public Service hospitals *(Context)* 4. Whole care (*Goals, 2, 3, 4, 5, 7,8)* 5. Nurse patient relationship (*Process*, 4, 9) Enabling Facilitative Purposeful communication Nurturing environment. Trust Respect Homely Motherly 6. Impact of HIV/AIDS (*Dynamics* 7, 10) Increasing patient acuity Non-compliance End of life issues Absence of cure Continuous suffering Feelings of helplessness Powerlessness Emotional burnout

patient as a whole-person emphasising the **spiritual dimension** while recognising that the family is an integrated of the **whole.** **5. Cultural sensitive care** Cultural sensitive care includes **understanding and appreciation** of **family traditions, values,** and **beliefs** and the impact these have on the child and family. Cultural sensitive care is facilitated by good verbal and non-verbal communication skills, an **attitude of warmth, respect**, **openness and non-judgemental attitude** **6. Spiritual well-being** Spiritual well-being is linked to **spirituality** and **divine connectedness** that brings a sense of **peace, comfort, consoling** and **protection** in the midst of challenges related with **coping** with **life-threatening illness,** terminal illness, chronic illness, **permanent disability,** and **death and dying**.	**sharing** consistent with **shared humanity of Ubuntu** and the **inner knowledge** that is related to **spirituality.** **9. Whole care** is **family centred**, **culturally sensitive,** and **congruent** with family beliefs and values, planned to meet the **physical, emotional, mental, spiritual, social, and cultural dimensions** of care. **9.1 Physical dimension of care** It is **age-appropriate care** that is **exclusively designed** to meet the individual's child needs based on the **presenting health problem and prevention of potential complications** and involves the inclusion of **multi-disciplinary team.** **9.2 Emotional and psychological dimension of care** It is care that is focused on the **healing the mind of the person** alleviating **fears** and addressing **concerns**. Fears and concerns are addressed by giving **sufficient knowledge** about the diseases and care that is planned to respond to the individual's health needs. **9.3 Spiritual dimension of care** Spirituality and religion is used interchangeably and it involves **connecting** to a **God or higher Being** through **prayer** or other **rituals** to source out **comfort**, **support** and **healing**. The expression of spirituality included **prayer, baptismal, communion,**	dimensions of care (3, 4, 9) 9. Nurse patient relationship (1, 5, 8) 10. Impact of HIV/AIDS (11, 11.1, 11.2, 11.3)	

	pastoral care, being there and **caring presence**. **9.4 <u>Cultural dimension of care</u>** Firstly it includes the **recognition** of the individual **nurse as a cultural being** with beliefs and values based on specific culture. Holistic nursing care is **culturally sensitive care** that is **congruent** to the **person's** and or family **beliefs** and **values.** **Conflict** between **biomedicine** and **cultural values** in practice is experienced and termed either **good or bad.** **<u>9.5 Social dimension of care</u>** It is care that is congruent with Ubuntu ways of **communal living**. The child belongs to a **family** and has **friends** (depending on age). **Social bonds** are forged and encouraged as part of **shared humanity in uBuntu**. **<u>10. The nurse-patient relationship</u>** The nurse-patient relationship in holistic nursing care is **enabling** and **facilitative** with **purposeful communication** and **nurturing environment**. **<u>10. 1 Purposeful communication</u>** Purposeful communication is a **precursor** for **effective nurse-family relationship**. It is communication that is preceded by **trust** and **respect** and is **goal directed** keeping the **family informed**. **10.2. <u>Nurturing environment</u>** The nurturing environment is **homely** and **loving** and the paediatric nurse acts		

	motherly. **<u>11. HIV/AIDS impact</u>** HIV/AIDS impact within this context relates to **increasing patient acuity, non-compliance** for some clients and **end of life** issues. **Absence of cure** and the **continuous suffering** of children living with HIV/AIDS brought out **feelings of helplessness** and **powerlessness** in the paediatric nurses associated with **emotional burnout**. **<u>11.1 Emotional burnout</u>** Providing extensive physical care and emotional support for children and families living with HIV/AIDS evoked **feelings of weariness** described as **emotionally draining, taxing,** and **de-motivating**. **<u>11. 2 Helplessness</u>** The inability to **cure** HIV/AIDS coupled with **non-compliance** of some mothers diagnosed with HIV/AIDS left the nurses with feelings of helplessness and **frustration** especially that at the moment there is no known "cure". **<u>11. 3 End of life issues</u>** End of life issues in holistic nursing care incorporates **family values.** Spirituality/religion and/or culture are one of the aspects used to manage family emotions when faced with **decision-making** based on uncertainty and or being confronted with the inevitability of end of life. Death rituals relate to **culture, religion** and **spirituality**.		