

## EDITORIAL

# TRAVAILS AND REALITIES OF NURSING AND NURSING RESEARCH



Nurse researchers recognize that nursing research is directed to improving and making care safer and more equitable. Nursing researchers seek knowledge about individual support needs and how to maintain health throughout life, from birth to old age and end of life. The research results highlight individuals' and their significant others' experiences when faced with disease and ill health, in addition to providing deeper and important knowledge about how to develop professional approach and nursing interventions. Furthermore, nursing research employs, develops and evaluates new methods and nursing interventions. The new knowledge improves nursing care for the benefit of patients, their significant others, the nursing profession, and the society.

Nursing research has come a long way. Recent years have seen a growing awareness on research, and today, research involvement has gone beyond thesis and dissertation requirements. It has become a vital part of a nurse's practice.

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Like all research, nursing research should be innovative and of a high quality. The environment in which it is conducted should preferably be characterized by strong cooperation among different nursing and healthcare disciplines, as well as other relevant areas. It is essential that the research questions are based on problems related to the clinical activities close to the patient.

The foundation of nursing values asserts that both nursing and nursing research are based on a humanistic view. Often, nursing theories remain abstract at the conceptual level and are not operationalized, thus the need for research to test and/or validate their applicability. Krirkgulthorn et al.'s *Wholistic humanized nursing care: A model for cultivating a humanistic caring mind in nursing students* humanized care concepts proposed by theorists, and was an eye opener to the true meaning of the concept the students need to have, which they can only acquire from practicum and interaction with patients, and their nursing instructors. In the care situation, respect for a person's rights, dignity, integrity, autonomy and vulnerability is important to enable her/him to experience trust, hope and meaning as well as alleviation of suffering despite disease and ill health. Central to nursing is the concept of caring. And I assert that caring is what nurses do best. This concept has been explored countless times. Estacio's *Altruistic Care Theory of Nursing (ACTON): Towards Health Equity through Nursing Practice* provides another travail and reality. He described the Altruistic Care Theory of Nursing (ACTON), addressing the intricacy of nursing practice in health equity and health inequity matters in addressing health inequity issues through human to human interactions with clients, co-workers, and other members of the health care team, and participating in collaborative and informed engagements.

Mamayson's voice in *The Culture of Oppression in Nursing* highlights the long history of oppression in nursing, thus, challenging nurses to incessantly struggle to challenge power and privilege in their practice. Nursing, after all, is a potent force in empowering their clients. The travails and realities of migration has also been captured in many ways by researchers from many disciplines. Cruz's paper *Trends and Issues in International Nurse Migration: A Canadian Perspective* provides an interesting lens in exploring the issue of gendered and racialized labor, and the current state and pathways of IEN migration to, and the plight of IENs in Canada.

Living with a long-term disease or multimorbidity conditions are a common foci of nursing research due to their need for a complex and sophisticated nursing care. Flores, et al.'s *Prevalence and correlates of depression, anxiety, and distress among Filipinos from low-income communities in the Philippines* concluded that mental health disorders are prevalent in Filipinos from low-income communities. Findings provide empirical support for the provision of mental health services consistent with the World Health Organization's action plan in this understudied population. The high association between psychological morbidity and perceived physical and mental quality of life signifies the need to screen for depression in older adults and anxiety and distress in younger adults and women. Maquez' *Hope and health-related quality of life in patients with cancer undergoing adjuvant therapy* meanwhile describes a reality among cancer patients. The study revealed that a "diagnosis of cancer does not equate to one's loss of hope. Hope may be anchored in Health-Related Quality of Life which involves different domains rather than in the form of treatments for cure."

Despite the existing campaigns on obesity prevention, there's still high incidence, which can lead to complications. Eligio's *Effectiveness of obesity prevention campaign among adolescents* utilization of either the brochure alone or brochure with health teaching is enough to create a successful change.

A key role for nursing research concerns quality as well as safety, a concern that may have had the longest focus. In the use of various safekeeping practices, nurses respond to the realities on the ground, often innovating to adjust and complement

adequacy, completeness and appropriateness of available resources. Bondoc's *Comparing safekeeping practices in preventing microbial contamination of opened single-use ampules* advocates the adherence to the "single-use" despite circumstance of having a drug left over.

The role of reflexivity in enhancing rigor and trustworthiness in nursing research is now recognized and encouraged. Rio's *Experiencing Leininger's Stranger to Trusted Friend Enabler as a Novice Ethnonursing Researcher* highlights her travails and realities of fieldwork as an ethnonurse. She uncovered from her experiences four hallmarks of a trusting relationship namely (1) participants voluntarily share information about their culture and their personal experiences; (2) participants express concern for my own welfare through their words and actions; (3) participants give the researcher a sense of community identity, such as a native name; and (4) participants suggest steps to further improve the trustworthiness of the study.

Nurse researchers are confronted with many challenges in today's research context. The need for structures to facilitate and enhance the collaboration between research, education and clinical practice is highly encouraged and developed. The travails and realities of nursing research will continue to guarantee safe, high quality, person-centred healthcare for both today's and tomorrow's partners in health such as their parients, families and communities.



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“CARING is the essence of NURSING”