

## FEATURE ARTICLE

# THEORY OF COMMITMENT AND CARE

Frances Gay L. Pia, RN, MAN, PhD<sup>1</sup>

## Abstract

Commitment has been associated with quality nursing care because it contributes to the understanding of finding meaning and value of work. This article describes the Theory on Commitment and Care in Nursing that focus on how the nurses' commitment in an organization affects the nursing care they are providing to the patients. The factors that affect a person's commitment are job satisfaction, work autonomy, trainings, working environment conditions, pay and benefits, investments, retirement plans, obligations, return service. These factors play a vital role in the commitment of nurses and thus, reflect on the delivery of the nursing practice to the patients. The model shows the framework and the relationship of the internal factors inside the workplace that influence the quality of patient care. It presents how these internal factors could strengthen or weaken the nurses' commitment to patient care. This commitment propels the nurse to achieve his/her goals in the nursing process.

**Keywords:** Theory of commitment and care in nursing, commitment and care in nursing model

## The Theory of Commitment and Care in Nursing

### Description

The Theory on Commitment and Care in Nursing is focused on how the nurses' commitment in an organization affects the nursing care they are providing to the patients. The factors that affect a person's commitment are job satisfaction, work autonomy, trainings, working environment conditions, pay and benefits, investments, retirement plans, obligations, return service. These factors play a vital role in the commitment of nurses and thus, reflect on the delivery of the nursing practice to the patients.

### Classification by Abstraction

The theory of Commitment and Care in Nursing is a middle range theory that is comprised of relatively concrete concepts that are operationally defined and relatively concrete propositions that may be empirically tested (Whall, 2005). In explaining this middle range theory, Fawcett (2000) said that it may be (1) a description of a particular phenomenon, (2) an explanation of the relationship between phenomena, or (3) a prediction of the effects of one phenomenon or another. Moreover, many investigators favored working with propositions and theories characterized as middle range rather than with conceptual frameworks because they provide the basis for generating testable hypotheses related to particular nursing phenomena and to particular client populations (Chinn & Kramer, 2008).

### Theoretical Underpinning

The Theory of Commitment and Caring in Nursing is grounded mainly on Nursing as Caring (Boykin & Schoenhofer, 2001). Nursing as Caring is anchored on the fundamental assumptions that (1) to be human is to be caring and (2) the activities of the discipline and profession of nursing in coming to know persons as caring and nurturing them as persons living and growing in caring (Tomey & Allingood, 2006).

Furthermore, nursing as caring gives emphasis on the fundamental idea that all persons are caring; that to be a human means to be caring; and that being a person is living in caring. This means to say that caring is innate to an individual and that a person lives their lives growing into the capacity of caring. It also suggests that a person should have an environment that radiates a sense of nurturing atmosphere, which helps an individual grow in caring while revealing the richness of nursing (Boykin & Schoenhofer, 2001).

### Philosophical Basis

The theory of commitment and care in nursing is anchored on historicism's point of view that is derived from collective lived experiences, interrelatedness, human interpretation, and learned reality, as opposed to artificially invented reality (Rutty, 1998). It is

<sup>1</sup> Correspondence: Capitol University Medical Center at Cagayan de Oro City; Email: fgjpla@yahoo.com

the pursuit of knowledge and truth that is naturally historical, contextual, and value-laden. In this theory, actual experiences of the nurses in giving care to the patients and how their commitment affects these interventions in the healthcare setting are considered.

In addition, the theory on commitment and care in nursing views nursing in a human science perspective (Cody & Mitchell, 2002). In human science, knowledge takes the form of descriptive theories regarding the structures, processes, relationship and tradition that underlie psychological, social and cultural aspects of reality (Gortner, 1993). This theory gives value to the lived experiences of the nurses who provide nursing care to the patients. It also seeks to understand the relationship of the nursing care given to the patients and the commitment of the nurses in the healthcare setting.

### Assumptions of the Theory

The theory of Commitment and Care in Nursing is grounded in several key assumptions. These assumptions are:

1. Human beings by nature are caring and nurturing;
2. Persons are caring by virtue of their humanness (Boykin & Schoenhofer, 2001);
3. Nurses who feel that they are cared for by their organization provide better care;
4. The humanitarian perspective of a person being respected and treated fairly reflects on the nursing care;
5. Commitment influences quality nursing care.

### Paradigmatic Perspective

To represent a worldview and to provide a frame of reference for the construct of the nursing theory, the theory of Commitment and Care in Nursing is clustered within the perspective of interactive-integrative paradigm that is, humans are viewed as systems with interrelated dimensions interacting with the environment (Newman et al., 1991). The interactive-integrative paradigm by Newman, Sime & Corcoran Perry (1996), includes experiences and subjective data, multiple interrelationships that are contextual and reciprocal exists between phenomena. It considers context and experiences from subjective perspective as a means of understanding the interrelated nature of the properties of phenomena.

Increasingly, nurses are practicing in diverse settings and often develop organized nursing practices through which accessible healthcare to communities can be provided (Parker & Smith, 2010). Through this, nurses develop a lens which is essential for a complete picture of the person's health and the goals of caring and healing (Parker & Smith, 2010). The development of the theory of Commitment and Care in Nursing will provide this lens and will guide nursing through its unique contribution to the interdisciplinary team. In this theory, internal factors in the work environment such as job satisfaction, training and development, work autonomy, pay and benefits, investments, obligation and

return service, influence the level of commitment of the nurse practitioners in the healthcare setting. These elements contribute profoundly to the delivery of care to the patients.

### Metaparadigm of Nursing

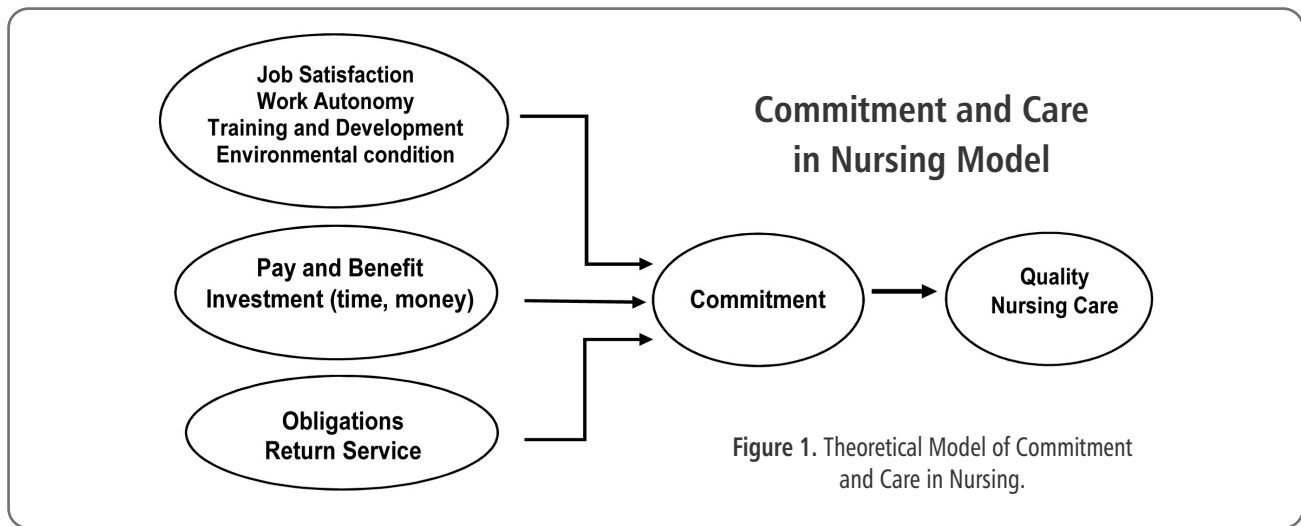
The central concepts of the discipline of nursing are person, environment, health and nursing. These four concepts of the metaparadigm of nursing are more specifically "the person receiving the nursing", the environment within which the person exists, the health-illness continue within which the person falls at the time of the interaction with the nurse and finally, "nursing actions themselves" (Fawcett, 1994). The following are the metaparadigm concepts as defined by the theory of Commitment and Care in Nursing:

1. Person: The individual needing the nursing care for the improvement of his/her condition. The person is reliant and dependent on the individual giving the nursing care.
2. Nursing: A career and a professional discipline. Nursing focuses on caring for patients in a holistic approach. The theory also gives importance to caring as the vital part in the process of giving the care needed by the patient based on the commitment of the nurse.
3. Health: An overall condition of a person that is influenced by biological, psychological, sociological and external stimuli. Health is affected by predisposing and precipitating factors of a person.
4. Environment: The external factor that greatly affects the holistic wellbeing of the patient. It is considered as the physical condition of a place or setting.

The nurse referred to in this theory is someone who is a professional, licensed individual, who shows, provides and gives nursing care to the patient depending on their commitment, which in turn is affected by internal factors, such as pay and benefits, work autonomy, working conditions, return service, and obligation. The theory refers to nursing as the care of the physically, mentally ill, emotionally disturbed and disabled individuals of all ages in the healthcare realm. The delivery of the nursing care may vary based on the commitment of the individual who provides care to the patient as influenced by the internal factors in the organization.

In this theory, nursing is practiced based on the nursing process namely assessment, planning, implementation and evaluation. These processes utilize a systematic, holistic and organized approach in partnership with the patient and their family. Nursing occurs when patients are admitted in the healthcare facility. Nurses provide the complete care for a group of patients throughout their stay in a hospital unit or department. For the duration of a patient's episode of care, the primary nurse accepts responsibility for the nursing process and coordinates all aspects of the patient's nursing care.

Nursing occurs in the healthcare facility. It is in general, any location where healthcare is provided including hospitals, publicly



or privately owned and operated by the government or corporations. It could be in the different units of the healthcare facility namely: Emergency Room, General Wards, Medical-surgical Ward, Pediatric Ward, Obstetrics and Gynecology ward, Intensive Care Units, Operating Room, Hemodialysis Unit, Chemotherapy Unit.

Lastly, it plays a vital role in providing care and addressing the needs of the patients. Nursing encompasses nursing processes, which includes: physical assessments, health histories, drug administrations, wound care, health teachings and education, coordination of different health teams and being advocates to the patient. These processes enhance and improve the underlying condition of the patient and eventually promote healing to the patient.

### Theoretical Model

Below is an illustration of the theoretical model of Commitment and Care in Nursing. A description of the model and its variables is given and explained.

### Description

The model shows the framework and the relationship of the internal factors inside the workplace that influence the quality of patient care. It presents how these internal factors could strengthen or weaken the nurses' commitment to patient care. These factors identified in the workplace significantly affect the commitment of the nurse in his/her job. This commitment propels the nurse to achieve his/her goals in the nursing process.

The first group of internal factors consist of job satisfaction, work autonomy, training and development, working environment condition have significant effects on the nurses' sense of commitment. Job Satisfaction refers to the extent to which a person's hopes, desires, and expectations about the employment he is engaged with are fulfilled. Work Autonomy means the ability of the nurse to control his/her work situations and to allow a great

deal of freedom to make choices in the workplace. Training and Development refers to the activities that aims at improving the competency and performance of the nurses in the hospital. Working Environment Condition describes the surrounding conditions in which the nurse operates and works. It could be composed of the physical conditions such as temperature, equipment, materials and resources.

These factors play a significant role in predicting the patient care of nurses. An organization with a greater number of satisfied nurses with adequate freedom and considerable liberty and choices, adequate training and continuing education has the tendency to be more effective and efficient in the delivery of nursing care. Moreover, working environment conditions such as working area lighting and temperature, availability of resources needed for patient care is also considered as a vital variable in establishing nurses' commitment on the workplace.

The second group, pay and benefits and investments are also integral in shaping commitment to the job. Pay and Benefit refers to wages, salary, gifts, privileges, perks that the nurse receives in the healthcare setting. It is believed that providing high pay and benefits could lead to higher commitment, while investment refers to the money, time, effort that the nurse established in the hospital for a certain length or period of time.

For instance, nurses who are compensated well are greatly encouraged to do more. High pay and good benefits will provide and help meet the daily needs of the nurses. This is also an indication of how much the hospital values their nurses. In addition, if nurses have invested a lot of their effort and time to the hospital, this will propel nurses to stay longer in the hospital.

The third group contains obligations and return service. Obligation is described as something that the nurse must do because of a law, rule or promise that he/she is legally bound to do; on the other hand, return service is defined as the act of a nurse to repay or recompense through additional years of service in the hospital due to the company's investment on the nurse.

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