

FEATURE ARTICLE

The Why Behind the Care: A Reflective Journey in Nursing Research

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Abstract

This essay laid out the development of a nurse's identity from clinical practitioner to developing researcher, with a focus on the importance of patient-centered and nurse-centered care as the cornerstone pillars of nursing research. Through narrative and application of qualitative and participatory research approaches, the author showed the intersection of everyday experience, philosophical inquiry, and scholarly pursuit along the path toward becoming a nurse researcher. The article examined how emotional experiences within the perioperative environment have instigated research questions aimed at improving patient and nurse well-being. Through the incorporation of academic models and theoretical perspectives, the author presented an emerging investment in health equity, social determinants of health, and collective inquiry, framing this individual path within the greater nursing science mission.

Keywords: *Reflective practice, nursing research, patient-centered care, nurse well-being, interpretive phenomenology, social determinants of health*

Introduction

Becoming a nurse researcher is never a straightforward journey. It is typically a process of unfolding, an intertwining of experiences, questions, hopes, and a desire to apply knowledge in ways that benefit individuals and communities. My own started not in a classroom but in the operating room, where I first saw the vast psychological vulnerability of patients waiting for surgery. These humane moments, where fear, uncertainty, and trust converge, becoming the launching point for my exploration of the "why" behind the "what" of nursing care.

This essay reflects on my evolution from a bedside practitioner to a novice nurse researcher, documenting how lived experience, values, and academic exploration are shaping my scholarly identity. It also highlights my growing interest in the intersections between patient care and the well-being of nurses, recognizing how these are often two sides of the same coin in the pursuit of quality healthcare.

From Clinical Encounters to Research Question

My work as an operating room nurse gave me numerous chances to see patient anxiety up close. Despite standardized procedures and preoperative checklists, numerous patients showed clear signs of psychological distress - twitching movements, tight fists, and the unmistakable tension in their eyes. I found myself wondering about the effectiveness of current interventions. Were we tending to patients as a whole? Was there something more profound that our checklists and preoperative protocols were neglecting?

These findings inspired an interest in exploring more comprehensive, evidence-based approaches to psychosocial support. Concurrently, I was more aware than ever of another plane of anxiety, one frequently neglected, the unspoken emotional toll borne by nurses themselves. As I progressed in my clinical practice, it became apparent that elevated stress, compassion fatigue, and systemic issues were equally valid concerns that required exploration.

My own identity as a nurse researcher evolved, grounded in empathy, fortified by observation, and driven by a desire to bridge the gap between theory and practice.

Philosophical Commitments and Methodological Approaches

My research philosophy is centered upon a commitment to patient-centeredness. I am not a subjectivist who merely views patients as objects of investigation, but rather as colleagues in the construction of knowledge. This assumption aligns logically with qualitative approaches, particularly Interpretative Phenomenological Analysis (IPA), which enables a rich examination of lived experiences and meaning-making (Smith & Fieldsend, 2021). IPA permits me to respect the subjective realities of the people we serve, giving them a voice to inform our understanding of health and healing.

In addition, I find Participatory Action Research (PAR) appealing, a methodology grounded in collaboration, empowerment, and social

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justice (Israel et al., 1998). PAR appeals to my idea of research as a means of transformation, not merely at the personal level, but also in communities and healthcare systems. With PAR, I aim to engage patients and nurses in identifying problems and collaboratively creating solutions, thereby rendering research both actionable and participatory.

Broadening the Lens: From Patient-Centered to Nurse-Centered Research

Although my initial research questions centered primarily on mitigating patient anxiety in perioperative environments, my clinical and academic experiences eventually broadened my horizon of understanding healthcare dynamics. I came to realize that the best possible patient outcomes cannot be disentangled from the health of healthcare workers, especially nurses. Nursing stress, emotional exhaustion, and moral distress compromise not only the health of the caregiver but also the quality of the care provided.

This awareness altered my research focus from being exclusively patient-focused to also embracing nurse-focused viewpoints. The consideration of the emotional labor and structural burdens faced by nurses has become a core component of my changing research agenda. My dissertation proposal, which examined the impact of social determinants of health on perioperative anxiety, also explored how institutional and societal structures affect patients and healthcare providers. It is a foray into locating individual health experiences in broader sociopolitical and economic contexts.

Embracing the Challenges of Research

The research process is inherently multifaceted, characterized by ethical dilemmas, methodological precision, institutional hurdles, and the emotional wear of encountering ambiguity. Nevertheless, I am grounded in the belief that research is an effective vehicle for constructive change. I am consistently inspired by experienced nurse scholars whose scholarship has shaped nursing theory, enhanced patient outcomes, and supported evidence-based policy formulation.

My research mentorship experience has been crucial to my academic advancement. Professors have coached me not merely in designing study questions and testing methodology, but also in nurturing scholarly confidence. With their assurance, I came to view myself as more than just a student researcher, but rather as a potential contributor to the field.

Commitment to Scholarship and Mentorship

Although I am still in the early stages of my research career, I am dedicated to creating meaningful and disciplined work. I am currently completing the first three chapters of my dissertation proposal and actively seeking opportunities to present and publish my findings. I consider publication not a badge of achievement, but rather an obligation to contribute information that can be used to guide practice, shape policy, and lead to further investigation.

In the future, I am also committed to mentoring junior nurse researchers. By developing research interests in undergraduate students and junior nurses, I aim to contribute to a growing population of nurse researchers who will be able to address the evolving issues in healthcare.

Conclusion: Research as Identity

My experience as a nursing researcher has, in some sense, been a quest for self-discovery. The questions that I pursue, the methodologies that I use, and the principles that I hold dear are all reflections of who I am—a scholar and more importantly, a human being devoted to compassion, justice, and transformation. Research is not something I do; it is something I am continually becoming.

Despite setbacks and emotional strife throughout my PhD coursework, I remain unwavering in my intent to contribute positively to the nursing knowledge base. I envision a future where nurses are empowered to excel not only in their clinical practice but also in research. As I continue to "weave" my identity as a nurse researcher, I embrace both the faults and possibilities of my scholarly tapestry, recognizing that every thread, every challenge, and every insight brings me closer to the nurse researcher I hope to become.

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