

Annotated Table of Contents for *Creative Nursing* 24 #1
Cornerstones of Healing: Finding Meaning

FROM THE EDITOR: Honoring the Nature of the Patient, by *Marty Lewis-Hunstiger, BSN, RN, MA, retired pediatric nurse and preceptor, editor of *Creative Nursing*, copy editor of the *Interdisciplinary Journal of Partnership Studies*, and affiliate faculty member at the University of Minnesota School of Nursing in Minneapolis, MN.*

Creative Nursing 2017 was a year of Questioning Authority – what it means (humanizing care, recognizing sources of authority, celebrating creativity); what it takes (courage, leadership, tolerance for disruption, authenticity, humility, a safe environment for questioning); what it looks like (it crosses boundaries, advocates courageously for patients and families, and uses science and art to humanize care); and what is the impact (changing prevailing views of what constitutes health and illness, challenging currently accepted treatment for patients with breast cancer, and raising awareness of workplace incivility, among other exemplars we presented). *Creative Nursing* 2018 begins a year-long study of the Cornerstones of Healing on which the art and science of nursing are based – in this issue, the meaning, for ourselves and for our patients and their families, of what we do.

FROM THE GUEST EDITOR: Finding Meaning through Kristen Swanson’s Caring Behaviors: A Cornerstone of Healing for Nursing Education, by *Michele M. McKelvey, PhD, RN, Assistant Professor of Nursing at Central Connecticut State University in New Britain, Connecticut.*

Nursing faculty can nurture healing relationships with their students to empower them to flourish as scholars and caring, competent future registered nurses. Kristen Swanson’s theory of caring outlines five caring processes: knowing, being with, doing for, enabling, and maintaining belief. Dr. McKelvey uses these caring processes to teach nursing students by cultivating meaningful, healing relationships. She says that as an educator, it is critical for her to know who her students are, personally and academically. Being with her students provides them with presence, authenticity, and vulnerability, and tells them that they matter to her as students and as people. It is essential for students to understand the role of the nurse as a sentry who assesses, monitors, and intervenes for the patient to prevent complications, promote healing, and optimize safe outcomes.

ARTICLES AND ESSAYS

Diversity, Inclusion, and Storytelling: Connecting across Cultures to Give Meaning to Patients’ Whole Health, by *Tammy Sinkfield-Morey, DNP, RN, PHN, CCRN, Nursing Supervisor at Gillette Children’s Specialty Healthcare in St. Paul, Minnesota.*

Sometimes in our patient care engagement, we come to each other across transcultural boundaries in interactions that are shadowed with implicit biases and histories of frustration at best. Stories provide guidance in understanding the patient and family experience of their condition, and the environmental influences that promote recovery. This article describes the intentional use of storying by six nurses in a project called *Story Care*. Storytelling creates understanding and mutuality within a culture and between cultures. Connecting across cultures through stories, the interaction changes from one of medicalization to an engagement of humanness; patients are no longer solely identified by their presentation of ill being, but are connected by the mutuality of humanity. Deeper understanding can lead to better patient outcomes across variances in health, wellness, and social standing. We have an opportunity to make a difference in how we see the world, how we see our patients, how we see ourselves, how we provide care to our patients, and how they see and trust us.

Teaching the Meaning of Culture in a Baccalaureate Nursing Curriculum, by *Sandy Sánchez, PhD, RN, Professor in the School of Nursing at the University of Texas Rio Grande Valley in Edinburg, Texas.*

Because culture is pervasive, it affects virtually every aspect of life, including health beliefs, customs, and practices, so it is imperative that nursing students recognize and value the critical importance of their own culture as well as the cultures of clients/patients and families they will care for as registered nurses. Hence, the notion of culture must be introduced early on in nursing programs and threaded throughout the entire curriculum. The author's University's BSN program highlights culture in its philosophy, curriculum, assignments, care plans, and evaluations. One of the first assignments is a cultural self-assessment that all students complete based on select demographics and Leininger's domains; this assignment facilitates the realization of culture's impact on each student's own life. Students are asked to ponder their own demographic information for its cultural relevance, in hopes that they will also consider the cultural meaning of their future clients'/patients' demographic information. Students must be aware of their future clients' rituals and rites of passage that may involve health approaches or that may be thwarted while in a health care facility or due to a specific treatment. Students who are culturally self-aware are better prepared to honor each future client's unique culture, ask how the client's cultural health needs can be facilitated, and address those needs.

Gifts in Health Crisis: The Use of Health Coaching to Create Opportunity for a More Meaningful Life, by *Theresa Nutt, MA, BSN, HNB-BC, faculty member in the Integrative Health and Wellbeing Coaching program in the Earl E. Bakken Center for Spirituality and Healing at the University of Minnesota in Minneapolis, with a private coaching and consulting practice in Minneapolis/St. Paul.*

This article explores health coaching as an effective intervention in times of health crisis for patients, families, and health care staff. People in normal health often haven't looked closely at the choices they make about how they care for their minds, bodies, and spirits. The pause that a health crisis creates in the activities of normal life allows for deeper questions about a person's life to emerge. Health coaching provides a safe space for clients to engage with these life questions, facilitating connection with their sense of personal empowerment and innate inner wisdom. The result is a more meaningful and resilient life despite the outcome of the health crisis. Learning and applying the coaching tools that create a container for deeper life questions and perspectives requires unlearning some of our traditional nursing habits that are based on having solutions, thinking quickly on our feet, and making it better for our patients and their families. Many nurses are so tuned into the needs of others that they are unable to develop and maintain good self-care practices that nurture their highest well-being. A key understanding in coaching is that we cannot take our clients further than we have gone; we must practice self-awareness and be willing to question our own beliefs, habits, and choices on a daily basis.

Preferment: A New Meaning in Retirement, by *Joanne Disch, PhD, RN, FAAN, Professor ad Honorem at the University of Minnesota School of Nursing in Minneapolis, Minnesota.*

This article reviews key trends affecting societal views on aging, examines data on RN retirement, and explores the many opportunities that are open to nurses who are approaching retirement. It describes a new way to think about this phase – *preferment* - along with strategies for preparing for preferment. Words like 'retirement' and 'seniors' are giving way to new concepts such as 'the fourth quarter' and 'a new lease on life.' Preferment reflects a frame of mind in which individuals choose their path and how they spend their time, rather than following outdated assumptions and limited options.

The Essence of Spiritual Care, by Charlotte S. Connerton, EdD, RN, CNE-BC, assistant professor of nursing at the University of Southern Indiana in Evansville, Indiana, and Catherine S. Moe, EdD, RN, CNE-BC, Dean and Associate Professor at Lakeview College of Nursing in Danville, Illinois.

Spiritual care is an important component of holistic nursing care. Meeting the spiritual care needs of the patient can lead to physical healing, reduction of pain, and personal growth. To implement spiritual care, the nurse must assess, diagnose, and respond to the needs of each patient and her or his significant others. Nursing skills essential for effective spiritual care include commitment to the therapeutic relationship, good communication skills, trust, empathy, self-awareness, and acknowledgement of broad beliefs. Spiritual care can be easy to omit or ignore for fear of intruding into the patient's personal beliefs. Many nursing diagnoses reflect spiritual distress without explicitly identifying a spiritual need; examples include anxiety, fear, social isolation, dysfunctional grief, hopelessness, and ineffective coping. While hospice and palliative medicine naturally lends itself to including a spiritual component in the available care, spiritual care is necessary in all areas of practice.

OUTCOMES

Enhancing Spiritually-Based Care through Gratitude Practices: A Health Care Improvement Project, by Rebecca J. Beese, DNP, APRN, PMHNP-BC, an Integrative Psychiatric Nurse Practitioner at Praestan Health in Minneapolis, Minnesota, and Deborah Ringdahl, DNP, RN, CNM, Clinical Associate Professor at the University of Minnesota School of Nursing.

Addressing spirituality in health care is important as it improves health outcomes; however, several provider barriers exist to providing spiritually-based care. A multidisciplinary wellness center serving a population with chronic mental health problems identified a need to improve the number of spiritually-based interventions provided to clients. Providers participated in educational sessions on providing spiritually-based care, emphasizing the use of gratitude practices. Spiritual interventions are therapeutic strategies that incorporate a spiritual dimension as a central component of the intervention; gratitude practices offer evidence-based opportunities to promote spirituality. Gratitude, a universal attribute, has a deep, fundamental spiritual component; people either consciously or unconsciously recognize their interconnectedness to all of life when experiencing gratitude. Chronic illnesses such as severe and persistent mental illness represent a complex set of variables that must be addressed to help patients move from illness to recovery. The recovery model of mental illness is a useful framework that identifies the importance of addressing the unique challenges that arise with mental illness, and offers the opportunity for hope and healing through the process of changing one's attitude, values, feelings, goals, and skills.

THE VOICE OF PATIENTS AND FAMILIES

Gray Reflections: Poetry as a Pathway to Nursing Student Empathy and the Creation of Meaning in a Long-term Care Clinical Practicum, by Sara B. Adams, PhD, RN, Assistant Professor of Nursing in the College of Health and Human Services at Indiana University Northwest in Gary, Indiana, and Linda D. Scott PhD, RN, NEA-BC FAAN, Dean of the School of Nursing at the University of Wisconsin – Madison in Madison, Wisconsin.

The unique needs of the aging adult require caregivers who can completely comprehend the experience of this population. Multiple chronic diagnoses, social isolation, prevalence of dementia, end-of-life care issues, and complex treatment regimens make the long-term care (LTC) facility one of the most challenging contexts encountered by pre-licensure nursing students. Integration of the arts

and humanities into health care education has been used to improve empathy, draw awareness to the experience of health disparities, enhance cultural knowing, improve communication and assessment skills, and advance understanding of the patient experience. This article describes a clinical rotation in an LTC facility in which poetry was used as a stimulus for reflection and as an opportunity for nursing students to gather and create meaning. Students were given poems from various anthologies and collections of poetry that demonstrated themes of LTC living and the experience of the older adult. Students were asked to read the poems prior to entering the unit, reflect on the poems throughout the next two days, then create an interpretative reflection of the clinical days in the form of a letter to their resident, a poem, or other original creative work. The article contains several moving poems and narrative passages by the students, expressing their responses to caring for these individuals.

The Impact of Caring: Teaching Students Empathy through the Patient Voice, by *Christina Leonard, MSN, FNP-bc, CNL, RN, Clinical Assistant Professor in The University of North Carolina at Chapel Hill School of Nursing in Chapel Hill, North Carolina.; Meg Zomorodi, PhD, CNL, RN, Clinical Associate Professor, Coordinator for Graduate Programs in Health Care Systems, Macy Faculty Scholar, and Well Care Home Health Faculty Scholar in The University of North Carolina at Chapel Hill School of Nursing in Chapel Hill, North Carolina.; and Beverly B. Foster, PhD, MN, MPH, RN, Clinical Professor and former Director of the Undergraduate Program in The University of North Carolina at Chapel Hill School of Nursing in Chapel Hill, North Carolina.*

Helping students gain an appreciation for the client experience, especially as it relates to chronic illness, is an important role for the nurse educator. Current evidence suggests that empathy is not a single phenomenon but a complex socio-emotional competency that includes multifaceted and interacting concepts. This article describes an innovative experience teaching students empathy for chronic illness, using the voices of panels of individuals who had experienced acute and chronic illness from either the perspective of the patient or caregiver, highlighting the importance of empathy and conveying the impact that nurses have on patients and families.

MEDIA REVIEW

Dying: A Natural Passage, by **Denys Cope**, Reviewed by *Sara B. Adams, PhD, RN, Assistant Professor of Nursing in the College of Health and Human Services at Indiana University Northwest in Gary, Indiana.* In this book, hospice nurse and end-of-life coach Denys Cope draws a rich parallel between the act of birthing and the process of dying. The metaphor challenges traditional views of death as a fearful and lonely endeavor, and encourages readers to embrace the process as a natural occurrence during the course of human life. Written in lay language, avoiding jargon, the book includes a description of dying on a physical level, offering insight into the physiology of the dying process. Relationships and the concepts of guilt, fear, and responsibility as death draws nearer are explored as Cope delves into human emotion and response. Cope challenges our societal views about death in an exploration of various cultural approaches to dying, including the Aboriginal culture of Australia; Eastern traditions including Buddhist, Zen, and Tibetan cultures; and Western hospice culture. Cultures in which death is treated as a peaceful, eventual rite of passage rather than a fear-based failure of life move toward the process with a greater sense of normalcy. This book is an important work for all who will experience the end of life, but specifically for those who are currently living the process: the dying, and those caring for them.