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The Self- Caring Tree: A Model of Nursing Self-Care

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Thesis or Graduate Project Approval Form

This is to certify that **Cynthia M. Severson** has successfully defended her Graduate Project entitled **"Develop a Self Care Model for Nurses"** and fulfilled the requirements for the Master of Arts in Nursing degree.

Date of Oral defense **June 16, 2011**.

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Abstract

The Self- Caring Tree: A Model for Nursing Self-Care

Cynthia M. Severson

June 21, 2011

_____X___ Field Project

Being a nurse can be physically, emotionally, and spiritually exhausting. Nurses are exposed to sickness, sadness, trauma, suffering, terminal illnesses, and potentially harmful contagions in their daily work. Nurses tend to care for others more than they care for themselves and can become overwhelmed, lose their resilience, and burnout. Nurses who practice daily self-care benefit by experiencing greater self-esteem, resilience, and ultimately wisdom and compassion. This project focuses on the development of a self-care model for nurses to help nurses learn how to care for themselves. The model is grounded in the work of Dr. Jean Watson and her theory of human caring.

Acknowledgements

To my awesome family! I can not thank you all enough. Randy, thank you for " holding

down the fort" all these years. Liz, Jen and Kate, you all three inspire me to do my best

and to be better. I love you all!

Kristin, I am so proud of you, maybe I will follow in your footsteps. Thanks for all of the

support and fun!

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am awed by your wisdom.

" Remember, wherever you go, there you are."

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Chapter One

Being a nurse can be physically, emotionally, and spiritually exhausting. Nurses are exposed to sickness, sadness, trauma, suffering, terminal illnesses, and potentially harmful contagions in their daily work. They work long hours, with minimal assistance, and many lack leadership support. Nurses can be so empathetic that they begin to drain themselves of any reserves to help themselves. Nurses tend to give of themselves until their emotional and/or physical energy is depleted (Bickley, 1998; Turkel & Ray, 2004). Nurses will easily agree to stay an extra shift if needed. They do not doubt when they are assigned more patients than is safe. They rarely take the time to sit down, eat, and catch their breath while on duty. How can nurses care for others when their own reserves are depleted? In this state of fatigue, nurses can lose the meaningfulness of their personal and professional accomplishments and do not have the reserves to be a role model for their patients and co-workers. Nurses need to look more closely at their own self-care practices that could assist them in dealing with the realities of modern day nursing. A nurse not practicing self-care is like a non-swimmer trying to swim the English Channel; they should not be doing it. Nurses need to remember to care for themselves as well as they care for others.

Purpose of Project

The purpose of this project is to develop a model of self-care to guide nurses in the practice of self-caring. This model of self-care will serve as a visual reminder and guide to individual nurses about the importance of their own self-care practices.

This author believes that nurses find it easier to care for their patients than they do for themselves. Dossey, Keegan, Guzzetta and Kolkmeier (1995) stated nurses should

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focus on self-care, self-awareness and self-healing to be a role model for patients in their care. Dossey devoted chapter two in the book Holistic Nursing: A Handbook for Practice to the Holistic Self Care of Nurses (1995) for nursing self-care. This chapter helps nurses understand that they can be a healing presence when they practice self-care. In nursing school, nurses learn how to care for others holistically, but when, if at all, do nurses learn what it means to care for themselves or eve n how to care for themselves?

Definition of Self- Caring

According to Merriam-Webster's online dictionary (2011) caring is described as "to feel trouble or anxiety: to feel interest or concern: to give care: to have a liking, fondness, or taste: to have an inclination: to be concerned about or to the extent of" and self is defined as "the entire person of an individual: the realization or embodiment of an abstraction: an individual's typical character or behavior: an individual's temporary behavior or character: the union of elements (as body, emotions, thoughts, and sensations) that constitute the individuality and identity of a person". Bickley (1998), one of the few authors to write anything on nurse self-care, described self-care as those activities that one does to maintain and sustain life, health and well-being that are deliberate and purposeful. Orem, defines.self-care as those "activities that a person starts independently, for their own good, which promotes and maintains their health, life and well being" (Lachman, 1996, p. 2).

Hill (2011), who wrote an entire book on self-care, described self-care in a deeper way. She stated, "self- care ranges from honoring the choices one makes that impact oneself personally, to the food one eats and the thoughts one thinks" (p. xv). She also wrote that the "true essence of self-care is love" (p. xvi). Loving and caring for one's self,

mind, body and soul on a daily basis can help one to become more aware of one's self worth. Paddison, (as cited in Hill, 2011) stated "as you sincerely go for deeper levels of love, the results you will have in well-being and increased quality of life will motivate you, leading you to a wider dimensional awareness" (p. xvi). This deep self-love and insight can take nurses to their highest level of consciousness where transformation can occur. Watson (2008), a well-known and respected nurse theorist, stated that "cultivating the practice of loving-kindness and equanimity toward self and others as foundational to a caritas consciousness and self-care" (p. 47). Watson believes, like Hill, that practicing self-care brings one to a deeper self-love and insight that helps one to open up from the individual's heart center to allow a greater awareness and transformation.

For the purposes of this project, self-care is described as those actions that affect mind, body, and spirit to bring one closer to self-love, which invokes self-worthiness and self-awareness to lead one to a higher consciousness and ultimately transformation.

Significance of the Project

The lack of self-care has many implications for a nurse. Nurses can experience burnout when they give and care for others more than their internal emotional resources can tolerate (Halbesleben, Wakefield, Wakefield & Cooper, 2008). Nurses leave their profession when they experience continued burnout (Leiter & Maslach, 2009). The profession is already facing a potential nursing shortage that will peak to over 500,000 nurses by the year 2025 (Hill, 2011). According to Irving, Dobkin, and Park (2009), 40% of nurses nationwide are suffering from burnout, but nurses are less likely to develop burnout when they are satisfied with their work environment and personal caring abilities. Self-care promotes self-confidence and self-esteem. A descriptive, correlation

study of 136 registered nurses showed a positive correlation between self-nurturance and life/career satisfaction (Nemeck, 2007). Self-caring leads to a greater connection with self. A nurse's capacity to care for others increases when a nurse effectively cares for self. When nurses practice self–caring, they have an increase in self-esteem, empathy and intuition (Swanson & Wojnar, 2004). It is when nurses are able to care for themselves that they are truly capable of providing compassionate care to others. Henry and Henry (2004) asserted, "Self-caring begets caring" (p. 26). According to Hill (2011), self-care helps one to bring balance and harmony into one's life, and therefore may reduce the potential complications of the daily stressors one faces in their professional and personal life.

Nurses who practice self-care will become more resilient nurses (Uno & Ruthman, 2006). "Resilience is the ability of people to 'spring back' in the face of adversity" (Jacelon, 1997, p. 123). Resilience allows one to live in the present and not worry about the past and the future. Resilience brings together past intrapersonal and interpersonal ways of coping (Tusaie & Dyer, 2004). Resilience is remaining in the moment. Nurses who have resilience have the ability to bring forth all of their past coping methods and experiences in dealing with adversity (Gillispie, Chaboyer, & Wallis, 2007). The ability to be resilient helps nurses to look at difficult times and consider what they can learn from the situation.

According to Bickley (1998), nurses who engage in self-care activities are able to provide compassionate and effective care indefinitely. Nurses are more satisfied with life in general, have a greater sense of well being, and exude an air of confidence and competence when practicing self-care. Wells-Federman (1996) talked about how

beneficial self-care is for nurses to be able to continue to provide compassionate care of others. Vaugh, as cited in Wells-Federman (1996) summed up self-care:

> It is up to us, each one of us, to take responsibility for making the changes in our lives that will enable us to contribute to the well-being of the whole. If we aspire to optimum health either individually or collectively, we must learn to pay attention to all aspects of physical, emotional, mental, existential, and spiritual well-being. Effective self-healing depends on taking all these into account. (p. 15)

Theoretical Perspective

Watson's nursing theory of human caring speaks to the self-caring that nurses need to give themselves. Watson believes nurses need to find a holistic balance within themselves before they can holistically care for their patients. Nurses need to practice equanimity before caring for others (Brown, 2009; Turkel & Ray, 2004). Watson (2008) supports the development of a self-care model, advocating that, "when one finds their own self-care practice, it prepares them for the work of a nurse and can make all the difference in their life" (p. 60). Watson believes that each human being strives toward a sense of harmony within the mind, body, and soul and that this process further integrates, enhances, and actualizes the true self. According to Watson, the more one is able to experience one's true self, the more harmony in the mind, body and soul one has. Watson developed 10 carative processes that are meant to guide nurses in practicing self-care as well as guide their care of patients (See Table One).

Table One   Caritas Processes (Watson, 2008, p. 31).

1. Practicing loving kindness and equanimity for self and others.

2. Being authentically present; enabling/sustaining/honoring deep belief system and subjective world of self/other.

3. Cultivating one's own spiritual practices.

4. Developing and sustaining a helping- trusting, authentic caring relationship.

5. Being present to, and supportive of, the expression of positive and negative feelings as a connection with deeper spirit self and the one being cared for.

6. Creative use of self.

7. Engaging in genuine teaching and learning experiences.

8. Creating a healing environment in all ways.

9.   Reverently and respectfully assisting with basic needs, honoring unity of being, spirit-filled connection.

10. Open and attend to spiritual and unknown dimensions. Allowing for miracles.

Nurses go to school to "learn" how to care for others. Now it is the time to apply what they have learned through the caring of others and apply the same honor to themselves. It is imperative to the future of nursing. Watson's caritas processes are an excellent format to use when developing a personal self-care practice model. The literature discussed in the next chapter will strengthen nurses' resolve to begin self-care.

Chapter Two

Review of Relevant Literature

This chapter will review the relevant literature that supports self-care for nurses and the theoretical foundation of Jean Watson's theory of human caring. Self-care for nurses proved to be a difficult concept to locate in the literature. A literature search using the terms self-care and nursing, either individually or together in CINAHL, Academic Premier, and Psycharticles revealed over 5,000 articles on nursing self-care. However, these articles were about nurses helping or teaching patients how to care for themselves, not about nurses caring for themselves. This author was able to find fewer than 50 articles and three books about nurses caring for themselves.

Self-Care

Nurses who practice self-care are better able to continue to practice nursing in a caring manner and can minimize the impact of the stressors they encounter in their personal and professional lives (Bickley, 1998; Brown, 2009; Hill, 2011; Mantesso, 2005; Turkel & Ray, 2004). Learning to care for one's self does not happen quickly; rather, it is a cyclic, daily process of the evaluation of one's responses to stressors and how the individual deals with those stressors. It is a process of self-reflection, understanding, and the possible changing of one's reaction to a given experience (Cumbie, 2001; Lauterbach & Becker, 1996). It is by practicing self-care that one can learn to minimize stress, balance life and learn to overcome the negative effects of one's work and personal life.

Brown's (2009) hermeneutic phenomenological study, in which she studied the meaning of nurses holistically caring for themselves, showed how practicing self-care is

beneficial to nurses. The study participants were 10 nursing leaders with 18 to 32 years of nursing experience, who were practicing in a 185-bed community hospital. This study used the lived experience to understand what the nurse leaders felt the term "self-care" meant to them and their daily lives. Each nurse completed a 10-week course on caring for oneself as part of the study. The participants of the program met for one hour a week to participate in caring for oneself practices such as journaling, complementary healing practices, artwork, and group discussion. After the 10-week course, the group members continued to meet weekly to reflect on how well they were able to use the information learned. One year later each participant agreed to a taped, one- on- one interview in which the participant shared stories about the lived experience of practicing self-care.

The themes revealed from this study described how life and self-care are a journey composed of steps. The themes discovered were a reflection of the journey with self-care in the forefront: (a) why to care for self on the journey, (b) how to care for self on the journey, and (c) the wisdom learned on the journey. The experience of participating in this study helped the nurse leaders understand why they need to practice self-care to be able to truly be present and care for others. They found caring for themselves promoted personal well-being, as well as professional and personal growth. The nurse leaders verbalized that by caring for themselves, they experienced less stress and were better role models of self-care for those they were leading (Brown, 2009).

How do various experts on the topic of self-care describe self-care? For the purposes of this paper, holistic refers to the mind, body and soul of a person. Burkhardt and Nagai-Jacobson (2001) view self-care as a holistic practice. They described caring for one self as nurturing one's soul. In this thesis paper soul and spirit are used

interchangeably. The soul is the inner heart center, which has three dimensions, being, knowing and doing (Burkhardt & Nagai-Jacobson, 2001). The being of the soul is the way one stops, listens, and experiences the moment as it is, not as we wish it to be. It is a sit, be still and see what unfolds moment. At this point one can become in tune with the needs of the body and mind. From this being space, the soul flows into knowing. To know at the soul level is to understand intuitively from our inner source, the needs of our physical, energetic, mental and spirit selves. From this soul space, one becomes attuned to the needs of the mind and body. From the being state, the soul flows into the doing state, responding to the knowledge gained in the being and knowing soul states. When the soul is in a doing state the soul becomes nurtured. To nurture the soul (spirit) one is encouraged to listen to the small voice within one's self as a guide as to how one is doing in caring for (nurturing) the soul and the physical self (body). .Attending to the body of oneself, the physical self, is an extension of nurturing the soul self. Again, one is encouraged to listen to what the body is telling them in previous soul states about feeling fatigue, hunger, muscle tightness, and so forth. Staying in tune with one's body signals can help one to remain healthy both physically and spiritually. Lastly, is nurturing the emotional (mind) self. Burkhardt and Nagai-Jacobson (2001) believe that recognizing one's emotions helps people to be able to reflect on their responses to what is happening in their lives, both positive and negative. Attending to negative emotions can bring growth and insight. The mind, body and soul are not separate entities in the body. They are always intertwined and one cannot be useful without the other. Knowledge is shared among each, energetically with the soul self being the gatekeeper of all. What affects

one, affects the other. For example, if a person were clinically depressed, treatment would be focused holistically, on the mind, body and spirit (soul).

Hill (2011), an author of a book about nursing self-care, states the way humans care for themselves reflects how they care for others on the planet. Hill described self-care as "the conscious act of replenishing your body, mind, and spirit through various activities and rituals" (p. xvi). Caring for oneself requires an understanding of one's self; it is this ability that allows people to reach their highest potential where change and transformation can take place (Hill p. xvi). Hill stated that for people to truly care for themselves, they need to value, honor, and love themselves.

Becoming a self-caring nurse may require a nurse to change the way he/she have cared for themselves in the past. In her book about self-caring, Hill (2011) discusses how the changes fall into two categories: first-order changes and second-order changes. First-order changes are those changes people have always been told they need to do, such as eating a well balanced diet or taking daily vitamins. Hill viewed these changes as easy to learn and short-term as most people do not continue these behaviors in a lasting manner. Second-order changes are those changes that affect individuals on a deeper level and require a change in their value system. An example of this change would be changing their diet based on a threat to their health. Regardless of how a nurse begins to develop a practice of self-care, if it is lasting and improves one's life, it is of value.

Watson's Theory of Human Caring

Dr. Jean Watson developed a nursing theory called the theory of human caring/caring science. It is this theory that the model of self-caring for nurses is based upon. Watson used the word caritas throughout her theory. The word caritas means to

cherish and give special loving attention (Cara, 2003). Her theory has evolved over time from 1979 to its present day form in 2011. Watson (2008) began her theory on the premise of five core concepts:

- Relational caring as ethical-moral-philosophical values guided foundation

- Caring core: ten carative factors/caritas processes. (See Table One)

- Transpersonal caring moment-caring field

- Caring as consciousness- energy-intentionality-human presence

- Caring-healing modalities. (pp. 29-30)

As time passed, Watson realized that nurses needed a framework to be able to identify with the "caring" of nursing rather then the "curing" of the medical profession. She transformed her core principles/practices from carative factors to caritas processes. The key concepts to identify the movement from carative to caritas are:

- Practice of loving-kindness and equanimity

- Authentic presence: enabling deep belief of other (patient, colleague, family)

- Cultivation of one's own spiritual practice toward wholeness of mind/body/spirit- beyond ego

- "Being" the caring-healing .

- Allowing miracle (openness to the unexpected and inexplicable life events. (p. 34)

To help guide the nurse in the practice and understanding of Watson's theory of human caring Watson developed the following principles:

- Caring is relational and based on moral/ethical/philosophical foundation.

- The transpersonal caring relationship goes beyond the ego to the higher spirit filled place (authentic presence, heart filled centric, good intention).

- There is a caring moment/occasion.

- Watson's 10 Carative Processes.

- Multiple ways of knowing, intuition, dreams, cultural.

- Caring comes from a reflective/ meditative place. Learn to understand self through journaling, painting, and reading.

- Caring changes self, others and the culture of groups around us.

- Caring is inclusive, circular and expansive. (Cara, 2003)

It is through the caring of others that nurses learn the importance of self-care (Watson, 2008). Caring for others with an open heart allows the transpersonal caring space to open, thus allowing the true healing to take place for the one being cared for and the one caring. Watson talked about the intentionality and consciousness that is required of a nurse during the presence of a transpersonal caring moment. It is here that nurses "see" themselves.

The importance of nurses caring for themselves is robust, even though the volume of the literature is sparse. The practice of nurses caring for themselves has the support of the AHNA, scholars such as Jean Watson, Rachel Hill and many others. What is lacking is an actual model or guide for nurses to follow when developing their own holistic self-care plan. Nurses and those they care for will benefit from nurses holistically caring for themselves. The development of a self-care model can be molded into an individualized self-care guide and will strengthen the possibility of nurses caring for themselves on a daily basis.

Figure One

The Self-Caring Tree
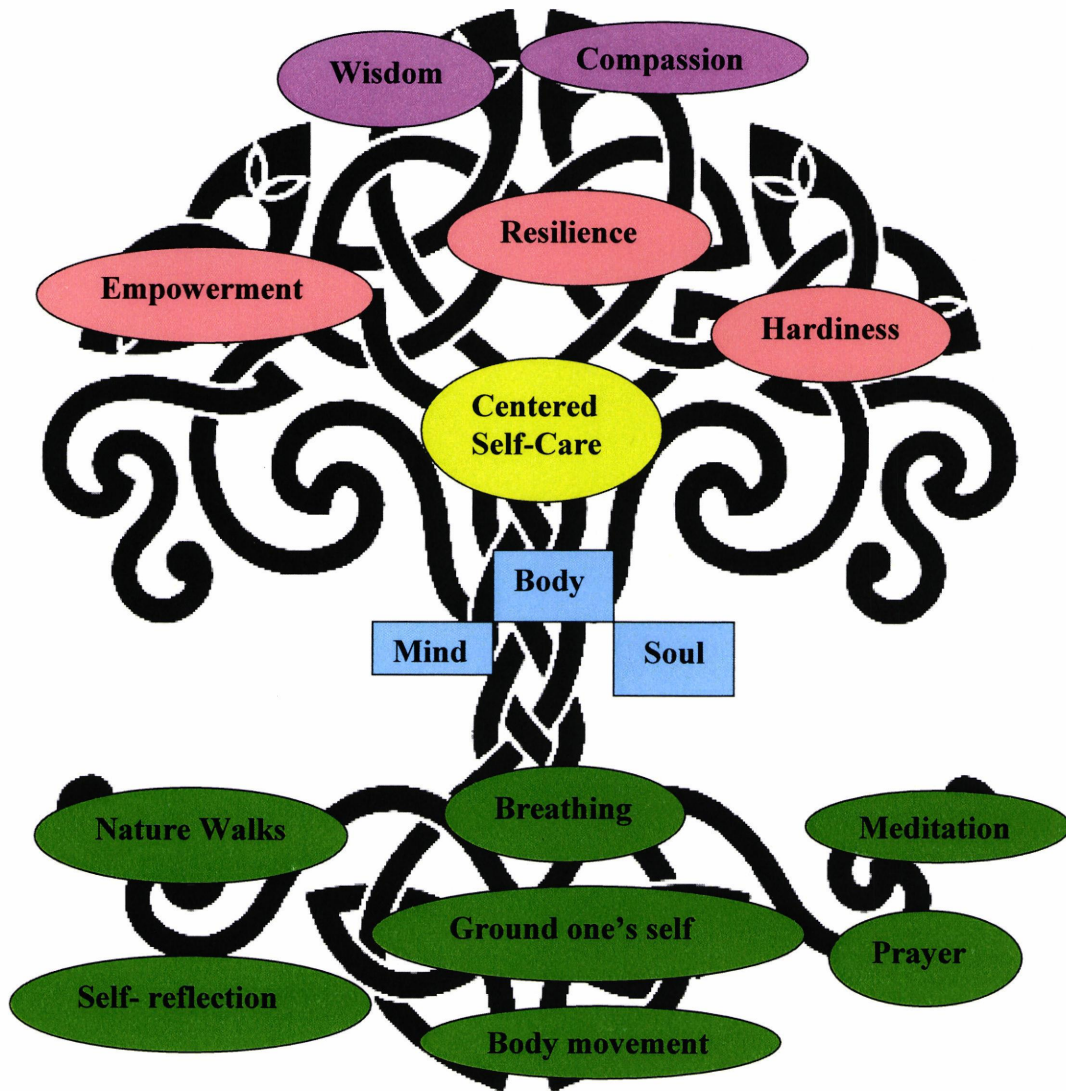
Chapter Three

Development of the Nursing Self-Care Model

This chapter will describe a visual model of nursing self-care. It is the intent that this self-care model will be personalized by nurses to meet their individual self-care needs.

Just as a hardy, resilient and self-empowered tree can defend itself against disease and adverse environment issues, so can nurses who become resilient, hardy, and self-empowered through self-care defend themselves against difficult and stressful professional and personal times. Nurses need to have a toolbox of self-care practices to help them mitigate any stressful experiences. This "tree" of self-care can be that toolbox.

Holistic self-care encompasses the mind, body, and soul. As this chapter will show, all of the self-care techniques in the self-care model can help with harmonizing the concepts of body, mind, and soul. Meditation, journaling, exercising, and eating a healthy diet are just a few of the self-care practices available.

Description of the Self-Care Practice Model

A model is the grouping of terms, concepts, and symbols used to explain in a pictorial method the interconnections and use of a theory (Chinn & Kramer, 2008). This model of nursing self-care allows the nurse to visualize the connections and interrelationships between the elements of nursing self-care. This model is based on various self-caring techniques attached to the caritas processes of Jean Watson's theory of human caring.

Watson (2008) described a caring literacy to help a nurse learn to care for others (p. 25). This author believes that some of these literacy's can also be applied to nurses

concerning their own self-care practices. These literacy's can be a stepping-stone for nurses to use to authentically personalize Watson's caritas processes when developing a self-care plan. The literacy's, adjusted for self-care are:

1. Develop a self-caring consciousness and intentionality as a starting point.

2. Be able to "center" one self and develop meaningful rituals.

3 Be present with oneself, be comfortable with silence.

4. Ground one's self.

5. Get in tune with one's thoughts and feelings.

6. Honor oneself with unconditional love, kindness, equanimity, and regard.

The concepts in the model are each built upon the other beginning with the tree roots and moving up. At the base of the self-caring "tree" are the self-care practices, in the trunk are the overriding holistic concepts of body, mind, and soul. In the lush and healthy branches are the gifts nurses give to themselves by practicing self-care; resiliency, self-empowerment, hardiness, wisdom, and compassion. The desired core personal characteristics are at the top of the tree as they represent the movement of the nurse into a self-transcended higher being, one who can overcome adversity and be a role model to all others. It is through examining the situation causing one stress from a holistic, mind, body, and soul perspective that will allow the nurse to transcend and transform (Teixeira, 2008). This self-examination of life's stresses can help nurses to have empathy for the patients they care for who are struggling with illness.

Major Self - Care Concepts

The development of a self-care model can be molded into an individualized self-care guide. The nursing self-care model uses the analogy of a tree, just as a tree needs

continued care and nourishment, so too does a nurse. At the base of the living tree model is a strong foundation of self-care actions that allows one to build a foundation to "grow" a healthy strong being, which then blossoms into a holistic caring, wise, and compassionate being.

A nurse can practice self-care in many ways. Below are the self-caring literacy's with a few suggestions of methods to practice self- care.:

1. Develop a self-caring consciousness and intentionality as a starting point.

2. Be able to "center" oneself by learning body movement techniques and developing meaningful rituals such meditation, deep breathing, and yoga dance.

3. Be present with one's self; be comfortable with silence. Examples to accomplish this could be activities such as walking in nature, praying, or daydreaming.

4. Ground one's self, and spend time with personally valued people.

5. Get in tune with one's thoughts and feelings with self-reflective techniques such as journaling or daydreaming.

6. Honor oneself with unconditional love, kindness, equanimity, and regard. Use vacation time, get a massage, eat healthy, dance, and take a nap.

Nurses who practice self-care are more resilient. As stated earlier, "resilience is the ability of people to 'spring back' in the face of adversity" (Jacelon, 1997, p. 123). This author believes it is resilience that allows a nurse to stay focused on why they became a nurse. Resiliency allows a nurse to bounce back after a difficult workday or work situation.

According to Judkins, Massey, and Huff (2006), stress can decrease a nurse's health and level of efficiency. Hardiness is a personal trait that allows a person under undue stress to overcome any untoward effects of long-term stress, such as burnout (Garrosa, Moreno-Jimenez, Liang and Gonzalez, 2006). Someone who is in a situation that another person may see as difficult but sees it as a learning opportunity is said to have a hardy personality. Having a hardy personality can help to mitigate some of the harsh effects of burnout. A hardy personality gives one a perception of control, commitment, challenge, a resistance resource against stress, satisfaction with life in general, and a greater sense of wellbeing, thus exuding an air of confidence and competence (Bickley, 1998).

Nurses have the power to change how they perceive their work environment. Nurses also have the ability to influence the way they react to the issues within their work environment. Martin (as cited in Espeland, 2006) defined personal power as the ability to control one's actions in their personal and professional life. This empowerment can lead to personal and work satisfaction. Nurses are less likely to feel powerless if they have been involved in the day-to-day decisions that affect their workday. Having a sense of empowerment has positive impact in reducing burnout (Laschinger, Grau, Finegan, & Wilk 2010). Self empowerment has also had a positive impact on nurse retention (Laschinger, Leiter, Day, & Gilin 2009). Caring for oneself is self empowering. In caring for oneself one learns they are a valuable human being and they recognize their own self worth, this then leads to one being self empowered.

At the top of the self-care model are the ultimate benefits a nurse will experience from a daily practice of self-care. They are wisdom and compassion. Koerner (2007)

states that "wisdom is a return to a state of wonder." However, this time we have a knowledge of that we have experienced in the past to guide us. It is through the daily practice of a nurse reflecting on and understanding the self and their experiences that leads one to gain the wisdom to be truly present and accepting of themselves and others in a holistic manner. Once this wisdom is gained a compassion for self and others as we/they experience difficulties in life will be seen. This wisdom comes from our inner soul and will be there to ever guide us through life experiences When nurses holistically care for themselves, they began to role model this self caring which then can have an energetic and positive affect on others, patients and coworkers, both personally and professionally (Brown, 2009).

Compassion for ones self helps one to feel compassion for others. As we experience the dimensions in the self care model one begins to learn the interdependence of each dimension of self-care. Koerner (2007) states that as we develop compassion for our own wounds we develop compassion for others. She also goes on to state that compassion is an awareness you become, not something you do, it is the ability to not judge yourself or others, to understand that others problems are not yours to own.

At this level of the self-care model one has grown into a wise, compassionate nurse. One who can physically and energetically be present with the one being cared for, yet also have a sense of self that they are able to transcend any negative experiences.

Implementation of the Self-Care Model

The self-care model was developed to be basic and easy to use for new graduate nurses as well as nurses with many years of experience. This author hopes that this model will be a standard self-care tool offered to every nursing student and experienced nurse,

so that nurses will practice self-care on a daily basis. In turn, this would build a healthy, resilient work force.

In order to achieve the benefits of this self – care model a nurse needs to perform a daily self-assessment to see what areas of their mind, body and soul need attention. As said earlier, all three dimension are intertwined and if one dimension of their self needs attention, their other dimensions may need attention as well. Completing the self assessment daily for two weeks can help the practice to become a habit.

The implementation of this model can be accomplished in a class if an academic setting or a healthcare institution. It can also be done on a personal level without any others involved. It is important for nurses to learn the practices of self-care to reduce stress and ultimately burnout. Using the self-care model as a guide, nursing students and practicing nurses can be taught the importance of self-care and the techniques to accomplish self-care. There is so much to learn about the practice of self-care that the earlier it is taught to nurses the more likely nurses will make self-care part of their routine. Nursing students can be taught about self-care as a mini course in their curriculum. Nurses in practice can be taught self-care as a continuing education class, a self-learning module, or during their unit's team days.

Chapter Four

Discussion/Evaluation

The evaluation of the effectiveness of a nursing self-care model takes both subjective and objective methods. Success or the lack of success can be measured in each area. Success may be seen in a short time, or it may take longer. It is dependent upon the different variables for each nurse and on the nurse's unit dynamics. This is especially true if only a few nurses choose to learn the self-care model and begin to use the principles within it.

Criteria to Evaluate Model's Effectiveness

To know if a model is effective, it needs to be experienced and evaluated. This can only be done by implementing and using the model with various nursing groups. The self-care model for nurses is meant to be intuitive and simple in order that it may be easily implemented. This implies that measuring its effectiveness would be simple. The key criteria to measure the self-care models effectiveness would be nurses reporting an increase in the practice of self-care. Next, nurses would verbally report their stress level has decreased and they feel better because of practicing self-care. Lastly, one would hope to see a nursing unit that reports a reduction in nursing absenteeism and a reduced nurse turnover rate.

Projected Evaluation Process

First, a questionnaire would be given to nurses before they learn the self-care model asking about their self-caring practices. Then 2 months after they participated in learning the self-care model, another questionnaire would ask nurses to report specific self-care practices in which they have participated because of learning the self-care

model. Another key evaluation tool would be to have the nurses reflect on and share how their lives may have been changed by beginning a daily self-caring practice. The evaluation would be centered on the self-care model's key concepts that would evaluate the user's progression to the higher levels of the self-caring model. Next, a comparison of the pre and post model implementation rates of nurse absenteeism and nurse turnover would be reviewed. Lastly, the department's patient satisfaction surveys would be evaluated looking for possible improvements in patient satisfaction pre and post the implementation of the nursing self-care model.

Analysis and Critical Reflection

The ability to use a resource is at times dependent upon how easy it is to understand, what it means, how it is used, and it's purpose. In the case of a nursing practice model, the easier it is to understand and apply, the more likely a person is to use it. This nursing self-care model was developed with this thought in mind. A nurse who is stressed, burned out, and overwhelmed, is not likely to begin a self- care practice that cannot be personalized to his or her lifestyle, time, and schedule with ease. This self-care model is intuitive to nurses. It is a model of care that nurses give to the ones they care for on a daily basis. To analyze the effectiveness of this nursing self-care model requires subjective and objective knowledge of the nursing unit and the nurses themselves. An evaluation of the unit and the nurses would need to occur before learning of the self-care model and again after learning the model. The change in the unit and the nurses may happen quickly, or it may take time; change is dependent upon the willingness of the nurses to embrace the self-care model.

Chapter Five

Conclusions, Recommendations, and Reflections

This chapter will briefly highlight the implications for future nursing practice, research, model development and health inequities. Insights and learning's the author experienced while developing this model will be shared.

Implications for Nursing Practice and Nursing Leadership

Nursing is and has been a caring science since its inception. It is now time to embrace the "caring science" as Watson developed and place it at the forefront of all that nursing is and can be. Watson's caritas have put the theory into the hands of nursing leadership, and it is up to leadership to help guide caring science into nursing practice. .. Using the caring theory as their guide for the care of the patients as well as the nurses can help solidify the importance of a self-caring practice. The development of this nursing self-care model has now given nursing a tool to begin this implementation.

Implications for Reducing Health Inequities

The nursing profession is overlooked when the discussion of health inequities is brought to the table. There is an unwritten thought in society that nurses do not get ill, do not suffer, and do not need to be taken care of by anyone. Just the opposite is true. Health workers are often called the walking wounded. This implies that nurses suffer from caring for seriously ill and dying patients. Literature and research regarding nursing burnout support the need for nurses to be healed and taught how to take care of themselves. The embracing of Watson's theory of caring science and the self-caring model can help to heal nurses and the nursing profession.

Recommendations and Next Steps

To completely understand the self-caring model, a nurse would need to have an understanding of the underlying theory - Watson's theory of human caring. Once this background knowledge was acquired, one would be able to apply the self-caring model to one's self. It is the plan of this author to develop a teaching module to be used to educate nursing students and practicing nurses how to implement the self-care model in their lives. Along with the development of the education module, a pre and post education tool to measure the effectiveness of the self-care model would be developed. See Figure Two

Reflections

This author learned so much over the last 3 years. A new appreciation for authors and researchers has been gained. A review and the further development of the author's own self-caring practices and her ability to complete such an important model is what kept her moving forward to complete this project. The author learned how important it is to have a nursing theory as the basis for a practice model. Whether it is a model for patient care or for nurses to use to care for themselves, the theory to support a model is imperative. The author developed a new appreciation for the importance of the ability to be a self-directed learner. This was probably the most difficult piece of the journey.

Summary of Project

The purpose of this project was to develop a model of self-care to guide nurses in the practice of self-caring. This model of self-care will serve as a visual reminder and guide to individual nurses about the importance of their own self-care practices. The development of a nursing self-care model was supported in the literature as cited in this paper, by the AHNA, and by two scholars who have done extensive work with the

concept of self- care, Dr. Jean Watson and Rachel Hill. Watson (2008) supports the development of a self-care model, advocating that, "when one finds their own self-care practice, it prepares them for the work of a nurse and can make all the difference in their life" (p. 60). Watson believes, like Hill (2011), that practicing self-care brings one to a deeper self-love and insight that helps one to open and expand from the heart center to allow a greater awareness and transformation.

When nurses practice self–care, they have an increase in self-esteem, empathy and intuition (Swanson & Wojnar, 2004). According to Hill (2011), self-care helps one to bring balance and harmony into one's life and may reduce the potential complications of the daily stressors one faces in one's professional and personal life. It is by practicing self-care that one can learn to minimize stress, balance life, and learn to overcome the negative effects of one's work and personal life.

Watson's (2008) caring literacy's (adjusted for self-care) for nurses was used to develop the key concepts in the model: They are:

1. Develop a self-caring consciousness and intentionality as a starting point.

2. Be able to "center" oneself by learning body movement techniques and developing meaningful rituals such meditation, deep breathing, and yoga dance.

3 Be present with one's self, be comfortable with silence. Examples to accomplish this could be activities such as walking in nature, praying or daydreaming.

4. Ground oneself; spend time with personally valued people.

5. Get in tune with one's thoughts and feelings by journaling or spending time

daydreaming.

6. Honor oneself with unconditional love, kindness, equanimity, and regard. Use vacation time, get a massage, eat healthy, dance, and take a nap.

This author hopes that this self-caring model serves as an easy to use and understandable model, so that a nurse can easily develop his or her own self-caring practice. This model can be used to teach nursing students and practicing nurses the importance of self- care.

Figure Two

Self-Care Questionnaire

1. Do you practice self-care? If so, please list your practices here.

    a. _____

    b. _____

    c. _____

    d. _____

2. If you practice self-care, how often do you practice self-care? Please circle your answer.

    a. Daily

    b. Weekly

    c. Monthly

    d. Occasionally

3. Do you feel stressed? Please circle your answer, may pick more then one.

    a. at home

    b. at work

4. What causes you to be stressed?_____

_____

5. What have you tried in the past to relieve your stress? _____

_____

6. Are you interested in learning how to practice self-care?

    a. Yes   b. No

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