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## PART I

### *Background*

*Nursing: The Philosophy and Science of Caring* (1979) was my first book and my entrance into scholarly work. This book was published before formal attention was being given to nursing theory as the foundation for the discipline of nursing and before much focus had been directed to a meaningful philosophical foundation for nursing science, education, and practice.

The work “emerged from my quest to bring new meaning and dignity to the work and the world of nursing and patient care” (Watson 1997:49). The theoretical concepts were derived and emerged from my personal and professional experiences; they were clinically inducted, empirically grounded, and combined with my philosophical, ethical, intellectual, and experiential background (Watson 1997). My quest and my work have always been about deepening my own and everyone’s understanding of humanity and life itself and bringing those dimen-



sions into nursing. Thus, the early work emerged from my own values, beliefs, perceptions, and experience with rhetorical and ineffable questions. For example, what does it mean to be human? What does it mean to care? What does it mean to heal? Questions and views of personhood, life, the birth-death cycle, change, health, healing, relationships, caring, wholeness, pain, suffering, humanity itself, and other unknowns guided my quest to identify a framework for nursing as a distinct entity, profession, discipline, and science in its own right—separate from, but complementary to, the curative orientation of medicine (Watson 1979). My views were heightened by my commitment to (1) the professional role and mission of nursing; (2) its ethical covenant with society as sustaining human caring and preserving human dignity, even when threatened; and (3) attending to and helping to sustain human dignity, humanity, and wholeness in the midst of threats and crises of life and death. All these activities, experiences, questions, and processes transcend illness, diagnosis, condition, setting, and so on; they were, and remain, enduring and timeless across time and space and changes in systems, society, civilization, and science.

The original (1979) work has expanded and evolved through a generation of publications, other books, videos, and CDs, along with clinical-educational and administrative initiatives for transforming professional nursing. A series of other books on caring theory followed and have been translated into at least nine languages. The other major theory-based books on caring that followed the original work include:

- *Nursing: Human Science and Human Care. A Theory of Nursing* (1985). East Norwick, CT: Appleton-Century-Crofts. Reprinted/republished (1988). New York: National League for Nursing. Reprinted/republished (1999). Sudbury, MA: Jones & Bartlett.
- *Postmodern Nursing and Beyond* (1999). Edinburgh, Scotland: Churchill-Livingstone. Reprinted/republished New York: Elsevier.
- *Assessing and Measuring Caring in Nursing and Health Science* (ed.) (2002). New York: Springer (AJN Book of Year award).
- *Caring Science as Sacred Science* (2005). Philadelphia: F. A. Davis (AJN Book of Year award).

Other caring-based books I coedited or coauthored are extensions of these works but are not discussed here (see, for example, Bevis and Watson [1989], *Toward a Caring Curriculum*, New York: National League for Nursing [reprinted 1999, Sudbury, MA: Jones & Bartlett]; Watson and Ray [1998] [eds.], *The Ethics of Care and the Ethics of Care*, New York: National League for Nursing; Chinn and Watson [1994], *Art and Aesthetics in Nursing*, New York: National League for Nursing). See also Web site (Watson 2004a) for complete citations of books and publications.

*Nursing: The Philosophy and Science of Caring* (1979) provided the original core and structure for the Theory of Human Caring: Ten Carative Factors. These factors were identified as the essential aspects of caring in nursing, without which nurses may not have been practicing professional nursing but instead were functioning as technicians or skilled workers within the dominant framework of medical technoscience. This work has stood as a timeless classic of sorts on its own. It has not been revised since its original publication; only reprints have kept it alive, thanks to the University Press of Colorado.

This (2008) edition is an expanded and updated supplement of the original text, with completely new sections replacing previous sections while other sections that remain relevant are included with only minor revisions. I have been advised to retain the original text in this revision so essential parts of it remain alive, since the original 1979 version may eventually go out of print. Thus, this work retains core essentials of the original text while updating that text with new content, bringing the original book full circle with my own evolution and changes in the work across an almost thirty-year span.

To provide the context for this evolution (before I address revisions of the original text), I provide a brief overview of the focus and content of the other books that serve as a background for my evolving work, all of which emerged from the original text of *Nursing: The Philosophy and Science of Caring*.

My second book, *Nursing: Human Science and Human Care, A Theory of Nursing*, was first published in 1985 and has been republished by the National League for Nursing (1988) and Jones and Bartlett (1999). It expands on the philosophical, transpersonal aspects of a caring moment as the core framework. This focus places the theoretical ideas

more explicitly within a broader context of ethics, art, and even metaphysics as phenomena within which nursing dwells but often does not name, articulate, or act upon.

As has been pointed out in contemporary postmodern thinking, if a profession does not have its own language, it does not exist; thus, it is important to name, claim, articulate, and act upon the phenomena of nursing and caring if nursing is to fulfill its mandate and *raison d'être* for society. This second theory text seeks to make more explicit the reality that if nursing is to survive in this millennium, it has to sustain and make explicit its covenant with the public. This covenant includes taking mature professional responsibility for giving voice to, standing up for, and acting on its knowledge, values, ethics, and skilled practices of caring, healing, and health.

What was/is prominent in the second “theory” book is the explicit acknowledgment of the spiritual dimensions of caring and healing. There is further development of concepts such as the transpersonal, the caring occasion, the caring moment, and the “art of transpersonal caring” (Watson 1985:67). Further, in this work, as reflected in the title, distinctions are made with respect to the context of human science in which nursing resides: for example,

- A philosophy of human freedom, choice, responsibility
- A biology and psychology of holism
- An epistemology that allows not only for empirics but also for the advancement of aesthetics, ethical values, intuition, personal knowing, spiritual insights, along with a process of discovery, creative imagination, evolving forms of inquiry
- An ontology of time *and* space
- A context of inter-human events, processes, and relationships that connect/are one with the environment and the wider universe
- A scientific worldview that is open. (Watson 1985:16)

Thus, a human science and human caring orientation differs from conventional science and invites qualitatively different aspects to be honored as legitimate and necessary when working with human experiences and human caring-healing, health, and life phenomena.

In this work one finds the first mention of “caring occasion,” “phenomenal field,” “transpersonal,” and the “art of transpersonal caring,” inviting the full use of self within a “caring moment” (Watson 1985: 58–72). The caring occasion/caring moment becomes transpersonal when “two persons (nurse and other) together with their unique life histories and phenomenal field (of perception) become a focal point in space and time, from which the moment has a field of its own that is greater than the occasion itself. As such, the process can (and does) go beyond itself, yet arise from aspects of itself that become part of the life history of each person, as well as part of some larger, deeper, complex pattern of life” (Watson 1985:59).

The caring moment can be an existential turning point for the nurse, in that it involves pausing, choosing to “see”; it is informed action guided by an intentionality and consciousness of how to *be* in the moment—fully present, open to the other person, open to compassion and connection, beyond the ego-control focus that is so common. In a caring moment, the nurse grasps the gestalt of the presenting moment and is able to “read” the field, beyond the outer appearance of the patient and the patient’s behavior. The moment is “transpersonal” when the nurse is able to see and connect with the spirit of others, open to expanding possibilities of what can occur. The foundation for this perspective is the wisdom in knowing and understanding that “[w]e learn from one another how to be more human by identifying ourselves with others and finding their dilemmas in ourselves. What we all learn from it is self-knowledge. The self we learn about or discover is every self: it is universal. We learn to recognize ourselves in others” (Watson 1985:59).

This human-to-human connection expands our compassion and caring and keeps alive our common humanity. All of this process deepens and sustains our shared humanity and helps to avoid reducing another human being to the moral status of object (Watson 1985:60).

This second work concludes with a sample of human science methodology as a form of caring inquiry. Transcendental phenomenology is discussed as one exemplar of a human science—Caring Science experience of loss and grief experienced and researched among an Aboriginal tribe in Western Australia. Poetry and artistic, metaphoric expressions

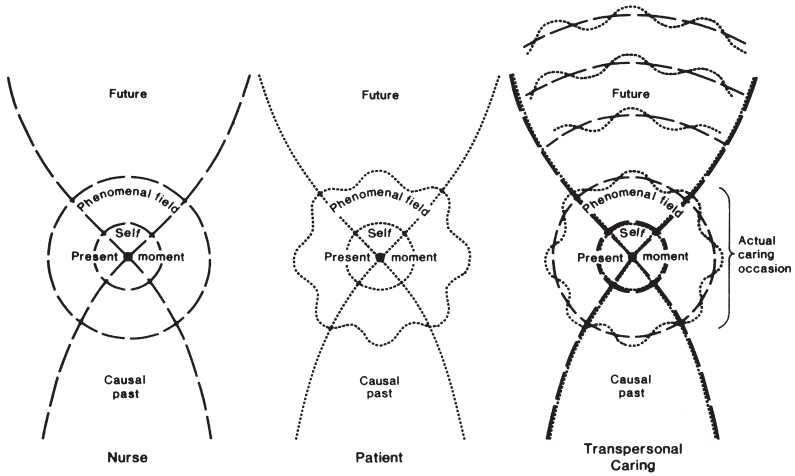


Figure 4. Dynamics of Human Caring Process, Including Nurse-Patient Transpersonal Dimension. Illustration by Mel Gabel, University of Colorado, Biomedical Communications Department. Reprinted, with permission, from Watson (1985/1999).

emerge within the “outback” research experience, using this extended methodology. Such an approach was consistent with the findings and experiences in this unique setting, in that this methodology allowed for a “poetic” effect in articulating experiences as felt and lived, transcending their facts and pure descriptions (descriptive phenomenology).

Thus, the transcendent views were consistent with transpersonal dimensions and provided space for paradox, ambiguity, sensuous resonance, and creative expressions, going beyond the surface phenomenology (Watson 1985:90–91). For example: “In other words, how could cold, unfeeling, totally detached dogmatic words and tone possibly teach the truth or deep meaning of a human phenomenon associated with human caring, transpersonal caring and grief, and convey experiences of great sorrow, great beauty, passion and joy. We cannot convey the need for compassion, complexity, or for cultivating feeling and sensibility in words that are bereft of warmth, kindness and good feeling” (Watson 1985:91). The result is poetizing; “it cannot be other than poetic” (Heidegger quoted in Watson 1985:98).

Such an exemplar of methodology invites a union between the humanities and art with science, one of the perennial themes of my work. Finally, this second book launched my ideas and set the foundation for the next evolution of my work on Caring Science that followed.

The third book, *Postmodern Nursing and Beyond* (1999), brought focus to the professional paradigm that is grounded in the ontology of relations and an ethical-ontological foundation before jumping to the epistemology of science and technology. The focus of this work was the need to clarify the ontological foundation of Being-in-Relation within a caring paradigm, the unity of mind-body-spirit/field, going beyond the outdated separatist ontology of modern Era I medical-industrial thinking. In this book the spiritual and evolved energetic aspects of caring consciousness, intentionality, and human presence and the personal evolution of the practitioner became more developed. This evolution was placed within the emerging postmodern cosmology of healing, wholeness, and oneness that is an honoring of the unity of all.

This postmodern perspective, as developed in the third book, attempts to project nursing and health care into the mid-twenty-first century, when there will be radically different requirements for all health practitioners and entirely different roles and expectations between and among the public and health care systems (Watson 1999: xiii). Prominent in this text is an emphasis on the feminine yin energy needed for caring and healing, which nursing, other practitioners, and society alike are rediscovering because the dominant system is imbalanced with the archetypal energy of yang, which is not the source for healing. Nursing itself serves as an archetype for healing and represents a metaphor for the deep yin healing energy that is emerging within an entirely different paradigm. What is proposed is a fundamental ontological shift in consciousness, acknowledging a symbiotic relationship between humankind-technology-nature and the larger, expanding universe. This evolutionary turn evokes a return to the sacred core of humankind, inviting mystery and wonder back into our lives, work, and world. Such views reintroduce a sense of reverence for and openness to infinite possibilities. Emphasis is placed on the

importance of ontological caring-healing practices, grounded in an expanded consciousness and intentionality that intersect with technological treatments of advanced medicine. In this work, Nightingale's original blueprint for nursing is evident and embodies all the caring-healing nursing arts and rituals, rediscovered and honored for new reasons. Metaphors of *ontological archetype*, *ontological artist*, and *ontological architect* are used to capture the roles and visions for nursing into this millennium/Era III medicine and nursing (Watson 1999:xiv–xv).

My most recent theoretical book, *Caring Science as Sacred Science* (2005) (which received an *American Journal of Nursing* [AJN] Book of the Year award in 2006 in the category of research), expands further upon the earlier works on caring. This work places *Caring Science* within an ethical–moral–philosophically evolved, scientific context, guided by the works of Emmanuel Levinas (1969, French) and Knud Logstrup (1997, Danish).

This latest work on *Caring Science* seeks a science model that reintegrates metaphysics within the material physical domain and reinvites Ethics-of-Belonging (to the infinite field of Universal Cosmic Love) (Levinas 1969) as before and underneath *Being-by-Itself* alone—no longer separate from the broader universal field of infinity to which we all belong and to which we return from the earth plane.

Levinas's "Ethics of face"—as in facing our own and others' humanity—is explored as a metaphor for how we deepen and sustain our humanity for survival of the human, in contrast to "totalizing" the human condition and cutting us off from the infinite source of life and the great Cosmic field that unites us all. Logstrup's "ethical demand" brings forth the notion of "Ethics of Hand," in that he reminds us of the sovereign, unarticulated, and often anonymous ethical demand that "we take care of the life which trust has placed in our hands" (Logstrup 1997:18).

*Caring Science as Sacred Science* text identifies these basic assumptions (Watson 2005:56):

- The Infinity of the Human Spirit and evolving universe
- The ancient and emerging cosmology of a unity consciousness of relatedness of All

- The ontological ethic of *Belonging before Our Separate Being* (Levinas 1969)
- The moral position of sustaining the infinity and mystery of the human condition and keeping alive the evolving human spirit across time, as in *facing and deepening our own and others' Humanity* (Levinas 1969)
- The ethical demand that acknowledges that we hold another person's life in our hands; this sovereign expression of life is given to us, before and beyond our control with expressions of trust, love, caring, honesty, forgiveness, gratitude, and so on, beyond ego fixations and obsessive feelings that are negative expressions of life (Logstrup 1997)
- The relationship between our consciousness, words, and thoughts and how they positively or negatively affect our energetic-transpersonal field of Being, Becoming, and Belonging; thus, our consciousness affects our ability to connect, to "be-in-right-relation" with Source: the infinite universal Cosmic field of LOVE.

In this evolved context of Caring Science, we can appreciate, honor, and face the reality that life is given to us as a gift; we are invited to sustain and deepen our own and others' humanity as our moral and ethical starting point for professional caring-healing. In Levinas's view, "Ethics of Belonging" (to this universal field of Cosmic Love) becomes the first principle and starting point for any science, allowing ethics and metaphysics to be reunited with conventional science.

These views are not unlike Nightingale's notion of natural healing processes, which draw upon spiritual dimensions that are the greatest source of healing (1969). Indeed, it has been acknowledged in perennial philosophies and Wisdom Traditions across time, cultures, and a diversity of belief systems that the greatest source of healing is love.

Thus, my book on Caring Science brings a decidedly sacred dimension to the work of caring, making more explicit that we dwell in mystery and the infinity of Cosmic Love as the source and depth of all of life.

We come from the spirit world and return to the spirit source when vulnerable, stressed, fearful, ill, and so forth. This is comparable to



Nightingale's notion of putting the patient in best condition for nature to heal, acknowledging that healing draws on nature and natural processes. In this framework it is acknowledged that we are working with the inner life forces, life energy, and the soul, if you will, of self and other and that we need to connect with the universal infinite field.

A human being is a part of the whole called the "universe," a part limited in time and space. He [sic] experiences [self], thoughts and feelings, as something separated from the rest, a kind of optical illusion . . . of consciousness. . . . Our task must be to free ourselves from this prison [of illusion] by widening our circle of compassion [love and caring] to embrace all living creatures and the whole of nature in all its beauty. Nobody is able to achieve this completely, but the striving for such achievement is in itself part of the liberation. (Albert Einstein quoted on title page of Williamson 2002)

When we are conscious of an expanded cosmology and an expanded, deeper moral-ethical foundation, we gain new insights and awakenings; we open to the sense of humanity-in-relation-to-the-larger-universe, inspiring a sense of wonder, wisdom, awe, and humility. We are invited to accept our need for wisdom, beyond information and knowledge alone, and to surrender to both that which is greater than our separate ego-self and the outer world we think we have control over and seek to manipulate.

In the present work I reassert the emerging, evolving wonder at and appreciation for viewing the human-universe as One. The holographic view of caring mirrors the holographic universe: that is, the whole is in each part, and each part affects the whole.

So, in developing concepts and practices, theories and philosophies of caring-healing that intersect with Love, we invoke Caring as part of our consciousness and intention to affect the whole with practical engagement from our own unique gifts and talents. In doing so, our part of personal and professional work is contributing to and making a difference in the moment but is also affecting the holographic universal field that surrounds us and to which we all belong.

In other words, through modern science as well as through ancient wisdom traditions, we realize that what we do for ourselves benefits

others and what we do for others benefits us. If one person is healed, it is helping to heal all. If others are healed, it helps us heal. The mutuality of Caring affects the universal field to which we all belong, and we energetically affect it with our consciousness and our concrete acts. We all are candidates for awakening a compassionate heart (Chödrön 2005), the deeper foundation for *Caritas Nursing*.

I now, thirty years later, after offering an overview and update of the previous texts of my evolved work in Caring Science and the Theory of Human Caring, turn back to the original text and offer revisions and current perspectives for the new edition. Ironically, and perhaps not surprisingly, the original text held the blueprint for the evolution of these ideas that have both sustained and expanded over these years.