

Report

Teaching nursing students about dignified care through enhancing the capability of elderly patients

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Key words : dignity, nursing student, elderly patient, practicum, fundamental part of nursing education

Abstract

In its preamble, the Japanese Nursing Association Code of Ethics for Nurses expresses that people hope to stay healthy and happy while maintaining human dignity (JNA, 2003). This report aims to stimulate debate and reflection regarding the meaning and implications of dignity of patients in everyday nursing practice within the social framework in Japan using the latest vital statistics and population estimates. In addition, it will examine a possible approach to maintain dignity as taught in fundamental part of nursing education. For this, the report explicates dignified care as performed by six second-year nursing students during two weeks of their first practicum in a local hospital in Japan. In the surgical ward, patients in their eighties were cared for by the students and assisted with their ambulation. The students were good walking companions. Also those students were ideally placed to provide timely continence assessment and individualized nursing interventions. During their first placement, the students continuously investigated how to attend to other aspects of dignity in the care of their patients that contributed to improving their well-being.

Introduction

Japan is, with an unprecedented speed, becoming an aging society and this social change has consequences for nursing education and practice. Increasingly-aging patients have received much attention in the Japanese healthcare arena in recent years. A decade ago surgery patients, age eighty or over, were uncommon; this is no longer the case. Given this new reality, the concept of nursing practice may need to shift from a list of tasks to do for patients to one which includes a focus on the health

and dignity of patients. In doing so, nursing will gain a larger perspective of its professional obligations to society.

Dignity is defined as a core concept of nursing, and is experienced as the ability to feel important and value in relation to others, communicate this to others, and be treated as such by others, in contexts which are perceived as treating (Yahiro, 2011; Ota, Yahiro, et al., 2012). Also dignity is concerned with how people feel, think and behave in relation to the worth or value of themselves and others (RCN, 2008;

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Haddock, 1996). People will have dignity when they can experience their capabilities and for health workers to promote a patient's dignity, they must either 'expand capabilities or improve circumstances' (Gallagher & Seedhouse, 2002).

In its preamble, the Japanese Nursing Association Code of Ethics for Nurses (JNA, 2003) expresses that:

"People hope to stay healthy and happy while maintaining human dignity. The mission of nursing is to meet such universal needs of human-beings, and to contribute to the healthy lives of all people".

Yet, we know nursing as public services has always been influenced by the market economy, the social policy context, and various contemporary global issues. The Japanese government seeks to take cost cutting measures and in order to accomplish this has become more involved in regulating the activities of both hospitals and healthcare staffs (Nishimura, 2012). For example, when the government reduces the number of hospital nursing staff and allocates scarce resources, nurses often do not have the time to fully attend to their patients needs.

Transition of population

Japan now has the 10th largest population in the world with about 128 million people but with the declining birth rate. The National Institute of Population and Social Security Research estimates that the Japan's population will decrease about 30 million people in 2050, and the ratio of the population of productive workers (from 15 years old to 64 years old) will be around 50 percent (IPSS, 2012). Most recently, by the

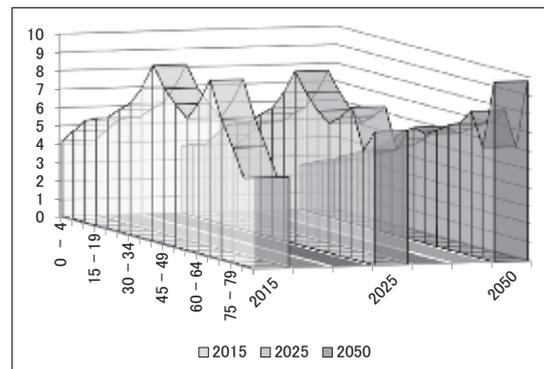


Figure 1 Projection of the Japanese population by major age group in 2015, 2025 and 2050

year 2015 more than one in five people will be over 75 years of age and this group will be one third of the total population of Japan in 2025 (JHWS, 2012). This outlook of declining population has certainly contributed to the current long-continuing economic recession.

The present condition of the healthcare systems in Japan is characterized by universal health insurance coverage and a universal pension scheme, so the increasing burden of its social security on the younger generations has triggered heated debates on who should shoulder the responsibilities of taking care of the elderly (Motani, 2010; Nishimura, 2012) (See Figure 1).

The report

This report illuminates dignified care as carried out by Japanese second-year nursing students in their teenage or early twenties during their first practicum in a local hospital in Japan. During two weeks on a surgical ward, the students cared for and assisted older patients, in their eighties, with their activities of daily living. Before going into the practicum the nursing students had developed their basic nursing care skills, and could therefore assist the

patient's needs such as eating and drinking, sleep and rest, elimination, hygiene, ambulation, and so on.

Mainly the patients were postoperative: the students became good walking companions. By applying basic and carefully planned interventions, the patients gradually regained from prolonged bed rest and imposed immobility. The students also attended to other aspects of dignity in the care of elderly people that contributed to improving their well-being.

For example, the students assessed that their patients needed to be warmed their foot or to feel their muscle relax after increase the activity. Then, they offered foot baths to their patients to have relaxed time in the sun lounge in the surgical ward on the fifth-floor. Since clinical placement took place in the late-winter season, the patients acknowledged a spectacular view of snowcapped their landmark mountain from the window. One male patient described this experience like being on holiday: "Goku-raku. This feels like heaven." One observation was that those students were ideally placed to provide timely continence assessment and individualized nursing interventions. The students were willing to assist their patients for two weeks in the hospital, and all six patients in their care became more mobile, moving between their beds and the sun lounge by foot in order to enjoy meals. This could return constraint activities that exist transiently on the elderly patients due to their hospitalization. On the last day of the practicum, two patients reported the inconvenience with ambulation due to their incontinence pads: "It is hard to walk with a

diaper, so please take my thick diaper off. Actually I didn't need it when I was at home." The elderly patients appeared much happier as a result of the support they received to become more active through walking. Meanwhile some students reported their self-confident. Although these students were beginners in their field with limited capacity for clinical nursing, they provided care with dignity. Gallagher (2007) argues that "we need to consider the nature of nursing practice, the people involved in delivering care, the places or environments where care is delivered and processes that nurses engage in that have the potential to enhance or diminish dignity".

In sum, the two week practicum for second-year nursing students placed emphasis on daily living nursing skills. In order to help the nursing students to acquire these competencies with person-centered care, the nursing students were assigned to help post-operative elderly patients to regain strength in ambulation and maintain continence instead of relying on diapers. Both patients and nursing students acquired positive experience. The patients gained healthier lives in receiving care that conserved their dignity, the nursing students gained happiness by witnessing patients' recovery and by receiving patients' appreciation.

Special emphasis here is directed toward unprecedented social changes in Japan, with fewer children and an aging society.

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