

THURSDAY 16 SEPTEMBER 1999

## Debate

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### **Speaker against: This house believes that nurses are able to meet patients' health care needs**

Karen A. Luker. *University of Manchester, United Kingdom*

The images transmitted via formal education programmes and the professional literature is of a nurse who embraces the holistic concept of health and gives priority to meeting patient and family needs. The nurse is usually portrayed as working in partnership with patients, as patient advocate and as a good team player.

When patients are confronted with bad news such as a cancer diagnosis, or a terminal illness prognosis, then nurses believe that it is they who have the specially honed communication and other skills to tailor care to meet individual need. This presentation challenges these assertions. It is suggested that nurses' interactions with cancer patients are not needs led, but initially governed by who knows what about the disease condition and prognosis. In many instances nurses are more concerned about maintaining harmonious relationships with professional colleagues than ensuring patients' needs are met.

Against this backdrop nurses may know what the physical needs of patients are, but cannot realistically meet the psychosocial needs of patients and their families.

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### **Speaker in favour: This house believes that nurses are able to meet patients' health care needs**

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The argument presented in support of this motion is based on the distinction made by Stevens in the 70s between the 'ought-to-be' and the 'is' of nursing. The 'ought-to-be' of nursing encompasses multiple levels of ideals and ambitions and thus provides necessary guides for practice, research and education. The 'is' realm of nursing has to vary greatly according to time, place, specific setting, available resources, organization, and culture.

I argue here that although the 'is' of nursing may act as a hinder, this motion can be supported. Not only 'ought' nurses be able to meet patients' health care needs, but empirical evidence exists indicating that through creative and therapeutic intervention, nurses have been shown to meet patients' health care needs in ways not previously done.

I will conclude with some general suggestions for furthering nurses' potential to meet patients' health care needs. These include the need to distinguish between a 'caring' perspective and a professional perspective, a movement toward collaboration with patients, families and other disciplines to develop clinically relevant knowledge for theory and practice, and a need for increased critical thinking within the field of cancer nursing.