# Eudemonic wellbeing as a philosophical perspective of nursing

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Current research on wellbeing identifies eudemonic and hedonic perspectives. The eudemonic aspect can be seen and employed as an innovative approach for nursing, and health care delivery in general. The underlying concept includes planning, development, implementation, evaluation and sustainability assessment. Nursing has an important role to play in creating conditions favorable to eudemonic wellbeing. This means to judge the actual balance of a combination of strengths, concerns, lifestyle patterns, and skills, and provides the nurse with a foundation upon which to build a wide variety of interventions. The purpose of this paper is to introduce eudemonic wellbeing as a philosophical approach to nursing.

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http://www.ihs9art.com/Eudemonic_wellbeing_09.pdf

**Key terms:** Eudemonic wellbeing; "flow"; wellness; lifestyle; nursing philosophy

## INTRODUCTION

This paper reflects eudemonic wellbeing and describes a process necessary to plan, implement, and evaluate a Eudemonic-Wellbeing-Nursing-Paradigm (EWNP).

Health is as much a process as a state, and includes important elements of subjective experience, which are only in part to be analysed by traditional scientific methods (Smeltzer and Hinshaw 1988; Pender 2006). In her famous 1859 paper *Notes on Nursing: What It Is and What It Is Not,* Florence nightingale defined nursing as having "charge of the personal health of somebody" and the mission of nursing as to "put the patient in the best condition to act upon him" (Clarke 1996, 106). Health care requires that nurses demonstrate efficient, cost-effective, high quality care, within organized delivery system. "Further development of nursing theory must continue to address nursing interventions or therapeutics within the complexities of care systems, human behaviour, and health and disease processes" (Clarke 1996, 107). Nursing has multiple opportunities to contribute to eudemonic wellbeing by focusing on issues concerning quality of life from the perspective of the individual as well as from the viewpoint of families and ultimately, entire communities (Parse 2006).

## CONDUCTING THE RESEARCH

Current Contents®, Medline®, Google®, and locally available various electronic databases were searched from 1976 to 2007 to identify relevant publications. Keywords used in this search included: Eudemonic wellbeing; "flow"; wellness; lifestyle; and nursing philosophy. Reference lists of retrieved articles were searched for additional literature, which was also used in order to broaden the database. Further, scientific journals were hand searched for pertinent articles. The heterogeneous and electronic material for this paper precluded the use of a formal hermeneutic methodology.

## DEFINITIONS

### Eudemonic wellbeing

Eudemonic wellbeing focuses on the meaning of self-realization, and describes wellbeing in terms of the degree to which a person is fully operational. In contrast, hedonic wellbeing focuses on happiness and defines wellbeing in terms of pleasure attainment and pain avoidance (Lazarus and Folkman 1984; Ryan and Dec 2001). The hedonic view of wellbeing focuses on pleasure or happiness and has a long history. The Greek philosopher Aristippus believed that the goal of life is to experience the maximum amount of

pleasure, and that happiness is the totality of one's hedonic moments. Hobbes, DeSade and utilitarian philosophers such as Bentham followed this philosophical view.
The eudemonic perspective does not equate subjective happiness with wellbeing. Eudemonism is a philosophy that defines right actions as that which leads to wellbeing. Aristotle held that people find happiness in the expression of virtue, in doing what is worth to do. He considered hedonic happiness to be a vulgar ideal, making humans slavish followers of desire (Ryan and Deci 2001; Fromm 1976). In reference to the Aristotelian view, Fromm (1981) argued that wellbeing requires distinguishing between desires; that satisfaction leads to momentary pleasure; and that wellbeing is conductive to human growth and eudemonia.

**Wellness**
Many variations of a "wellness model" exist; they all focus on factors that support human health and wellbeing (salutogenesis**)** and on factors that cause disease (pathogenesis**)** in their conception. However, a central aspect focuses on balance throughout life. Wellness is understood as a continuously adaptive process – a person's journey through life towards self-enhancement (Anderson 1987; Myers et al. 2000; Montague et al. 2002). The *American Holistic Medical Association* describes wellness as "A state of wellbeing in which an individual's body, mind, emotions, and spirit are in harmony with, and guided by an awareness of society, nature and the universe" (Anderson 1987, 6). This definition appears best suited within the framework of eudemonic wellbeing as a nursing philosophy concept.
Early philosophies such as Buddhism and Taoism (the Eastern tenets of body, mind and spirit) laid the groundwork for a concept that we now call "wellness"; Aristotle mentioned in order to stay healthy and age slowly to exercise in moderation (Montague et al. 2002). Triggering a change from an *external* to an *internal* center of control, wellness gets fully integrated into a person's life. The more this dimension interacts with a person's inner core and with other human dimensions, the more relevant and fully internalized wellness becomes to an individual. This leads to a balanced and positive personal health perspective (Lazarus and Folkman 1984; Lazarus 1996; Paul and Weinert 1999; Pender 2006).

**"Flow"**
Csikszentmihályi coined the term *flow* to describe a particular state, mindset, and feelings. We can attain a state of "flow" when we feel good about what we are doing, and about ourselves. Every person can experience these feelings, regardless of profession and social state. Devotion and purpose allow hopes to become reality (Csikszentmihályi 1987, 1990). What do we experience and what do we dream of? Psychological research holds that skill development and challenges create a desirable internal state; in addition, intense involvement in goal-focused activities constitutes a source of joy.

**Lifestyle**
Lifestyle refers to how one lives her or his life, how one handles problems and interpersonal relations (Boeree 1997, 2006; Wall 1999; Li et al. 2007) and has much to do with individual coherence and is heavily influenced by childhood experiences. For Alfred Adler, anything may tie into ones lifestyle. Meanings are not determined by a given situation per se, but we are self-determined by the meaning we attribute to that situation. Various types of lifestyle modifications will lead to a higher functional level: Physical, intellectual, social, emotional, vocational and spiritual (Lazarus and Folkman 1984; Anderson 1987; Sellers and Haag 1998; Myers et al. 2000; Montague et al. 2002; Li et al. 2007). Within an individual lifestyle concept, options and choices govern, appropriate conduct of life.
1) The *physical* dimension of the wellbeing concept promotes increased knowledge for

achieving healthy lifestyle habits, and discourages negative, excessive behaviour. It encourages participation in activities contributing to a high level of wellbeing, including personal safety and an appropriate use of the medical system (Hinghofer-Szalkay 1993; Lazarus 1996; Wall 1999; Tuck et al. 2006).

2) The *emotional* dimension of wellness emphasizes an awareness and acceptance of one's feelings. It reflects the degree to which individuals feel positive and enthusiastic about themselves and about life. This involves the capacity to manage emotional impulses, cope with stress, accept oneself unconditionally, assess limitations and develop autonomy (Lazarus 1996; Hinghofer-Szalkay 1998; Pender 2006).

3) The *social* dimension of wellness enhances interdependence with others and nature, and encourages the pursuit of harmony within the family. This element is humanistic in nature, focuses on the maintenance of healthy relationships, and emphasizes the creation of positive contributions to one's human environment in terms of common welfare (Lazarus and Folkman 1984; Lazarus 1996; Li et al. 2007).

4) The *spiritual* dimension deals with a strong sense of personal values and ethics. It involves the search for meaning and purpose in human existence. It fosters the development of a deeper appreciation of life, and of natural forces that exist in the universe (Sellers and Haag 1998; Hinghofer-Szalkay 2000; van Loon 2001; Swatzky and Pesut 2005; Rankin and DeLashmutt 2006).

5) Finally, the *intellectual* dimension involves one's ability to think creatively and rationally. The mind promotes a greater understanding and appreciation of oneself and others. This encourages the expansion of skills and knowledge, based on a variety of resources and cultural activities (Diener 1984; Hinghofer-Szalkay 1993; Cockerham and Abel 1993; Li et al. 2007).

## CONCEPTUAL PATH OF EUDEMONIC WELLBEING AND NURSING

The Eudemonic Wellness Nursing Paradigm (EWNP) should be established on the ground of the general nursing process, and consider individual life circumstances (environment, safety, values - Hinghofer-Szalkay 2001; Bunkers 2006). "Ethically sound decision and action in the health sector is frequently said to depend on the patient's best interest, on probable harms and benefits to client wellbeing, or on protecting and promoting the quality of life of the person involved" (Moore 1994, 207).

As a philosophical perspective, the EWNP inquires about conditions and circumstances that help patients to stay healthy. A combination of patient lifestyle patterns, skills, strengths, and concerns provides nurses with a foundation upon which they can build a wide variety of eudemonic wellbeing interventions that will ultimately increase quality of life on a broader basis (Kaufmann 1997; Hinghofer-Szalkay and Rössler 2003; Moore et al. 2004; Rolfe and Gardner 2005; Pender 2006).

### Health history, strengths and problems

Collection of data (assessment) is the first step to create a plan of eudemonic wellbeing nursing. It is advantageous to employ a standardized assessment checklist, in order to make sure all key points during a health strength and problem oriented history interview are covered. Guidelines may vary from one institution to another, but they all should include the same key elements (Kerr 1996; Parse 2006; Kenney 2006). The assessment of the collected data leads to the identification of the patients' personal strengths and problems, concerns, and needs.

A eudemonic wellbeing nursing philosophy is a decision about strengths and problems and leads to appropriate nursing intervention and management. Desired outcomes are formulated to provide direction and to evaluate any specifically explored eudemonic wellbeing

components. Eudemonic wellbeing nursing philosophy helps the nurse and the patient to focus on progress (Stolte 1996, 1997). During this process, a concise, realistic, measurable, and transparent (understandable) terminology must be used because it serves as the guideline to evaluate any progress (Uys and Smith 1993; Parse 2006).

**Communication is everything**

Eudemonic wellbeing is best served by taking certain action steps. They should be clearly stated, since they are to be communicated to others. The nurse should plan any eudemonic wellbeing care together with the patient: Both sides are responsible for achieving definitive goals and desired outcomes. A solid nursing knowledge base is vital to this process because the rationale for the interventions needs to be sound and feasible, ultimately resulting in an individualized eudemonic wellbeing care program. Also, nursing and the medical system are interrelated and have implications for each other. Obviously, this relationship includes the exchange of data, which helps to avoid duplicities and errors.

A structured eudemonic wellbeing care documentation process aims at accountability, quality assurance, and liability. A permanent record assists the nurse as well as the patient to be aware of strengths and problems. The record defines goals and actions to be taken and provides for third-party payers, accreditation, and legal needs.

In sum, desired outcomes of the EWNP process are identified to facilitate the choice of appropriate interventions, and patient responses. These outcomes also form the framework for documentation, which represents the quality of EWNP. Whatever kind of documentation system is used, it must elucidate the initial status, the specific eudemonic wellbeing nursing provided, and the response to that care. Keeping the care plan current means to update, evaluate and modify individual needs.

**Implementing and evaluating eudemonic wellness nursing interventions: Focus on satisfaction**

Application of the EWNP should be kept focused; reassessment is used to confirm that the planned interventions remain appropriate. Quality of eudemonic wellbeing nursing is multidimensional and satisfaction with care is increasingly recognized as an important dimension. Satisfaction survey - measuring quality of life - can serve as a crucial and valuable measure, which complements the more objective measures of quality of care (Moore et al. 2004). Evaluation criteria are selected and compared to the patients´ response (Moore et al. 2004). According to the results of these evaluation procedures, any EWNP plan should be modified and re-evaluated.

Health care providers must develop a clear understanding of ethical implications to ensure that the eudemonic wellbeing-based nursing they provide is morally and legally acceptable (MacPhail 1996); Hinghofer-Szalkay 2001; Wallner 2007). “Ethically sound decision and action in the health sector is frequently said to depend on the patient’s best interest, on probable harms and benefits to client wellbeing, or on protecting and promoting the quality of life of the persons involved” (Moore 1994, 207). For this process, a focused commitment by mentors of the discipline is necessary, and should be lived in daily practice (Hinghofer-Szalkay and Wiltsche 2006).

**CONCLUSION**

The nursing process holds a unique position to maximize the benefits of a Eudemonic Wellness Nursing Paradigm. Its use assists to change cognitive, affective, emotional, spiritual and behavioral life aspects, despite potential barriers on various levels (individual, organization, environment). Within this framework, it appears mandatory to follow certain ethical principles: Both scientists and practitioners need to follow according guidelines for the

protection of human subjects. Vision, mission, and goals of eudemonic wellbeing philosophy promote guiding principles of future nursing. To render this vision successful, it is imperative that the knowledge and skills required to improve eudemonic wellbeing as a philosophical perspective of nursing gets effectively and thoroughly disseminated.

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Philosophy, Nursing, Analytical, Continental, Anti-Intellectualism. â€œPhilosophical inquiry does not lead to one correct answer but enables the articulation of various views of knowledge and therefore of nursing practiceâ€ [1]. Philosophy is often seen as a mystifying topic that is far removed from nursing practice. With abstract arguments and highly technical language, philosophy is frequently seen as too distant from the everyday practice and realities of nurses to be practical or meaningful [2]. Even doctoral students in nursing are leery of philosophy and its relevance as they question, â€œHow