



Letter to Editor

Nursing as a transformative action

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Introduction

Social justice is based on human rights and focuses on fairness, equality, and equity across numerous aspects, including economic, educational, and workforce (1). Equity focuses on people's needs, not only on social privileges (guiding distribution and opportunities of wellbeing for everyone) (2). Equity signifies that everyone should have fair chances to reach their full potential in health, in a way that no one should be impoverished. Equity implies equal entitlement and distribution of available services throughout the country (3). Equity is the equal distribution of opportunities, and health equity is the equal opportunity to fill the gaps in health status. At the same time, equality means the even distribution of health determinants among different population groups. Both are grounded in justice and the pursuit of health equity (4).

Health equity refers to the equitable distribution of opportunities to achieve one's full health potential by reducing avoidable gaps in health services and health outcomes (4-5). Health equity is grounded on the ethical conception of distributive justice (human rights), and pursuing health equity is the procedure of reducing inequalities in health by reducing determinants of health (addressing medical and social determinants of health) (6-7).

Currently, there is an increasing need to identify the influence of social and structural factors impacting the health and caring experiences of individuals. Increased structural vulnerabilities (e.g., structural stigma and

discrimination) among individuals from underserved populations result in inequalities and inequities (5).

Health inequalities refer to the differences in health status or the distribution of health determinants among different population groups. In contrast, inequities refer to the differences among populations affected by social, economic, and environmental conditions. These differences are considered unfair and unjust (4,8). Health disparities are differences in conditions that exist among specific population groups (underserved and marginalized) (4). The term health inequalities broadly refers to health differences and social structures, including health-damaging behaviors and unjust health conditions among underserved populations (5). For example, people of color, transgender people, and people with disabilities are often mistreated in health care settings due to structural stigma or social inequities (Unfair inter-social treatment, stigma, socio-economic, and unjust government regulations).

Therefore, there is an ever-increasing need to deliver person-centered, intercultural, transpersonal, and inclusive care. Social justice is problematic among transgender people (people whose gender identity is incongruent with their sex assigned at birth) and minoritized people. Social justice is central to nursing, and nurses have a responsibility to address inequities (9). Nurses, who are frontline healthcare professionals, encounter and witness health inequities in care for underserved populations firsthand and have an ethical and

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moral responsibility to address these inequalities, playing a transformative role in promoting social justice and decreasing disparities (10). Transformative actions claim that ethical research must be designed to promote social justice and human rights. Transformative paradigms consciously address inequities and justice (11). The purpose of this letter is to argue that nursing is a transformative action and highlight how transformative actions are enacted in nursing.

Traditional viewpoint about the nature and function of nursing

In nursing philosophy literature, there has been considerable debate about whether nursing is a profession, an occupation, a discipline, a science, or an art. Much of the discussion largely focuses on outlining how nursing as a scientific discipline generates evidence-based knowledge for delivering care, and/or as an art, is about building therapeutic relationships with those in need of care.

Nursing, as both a science and an art, has been explored by nurse theorists and philosophers. Transpersonal and transcultural nursing theories emphasize the importance of understanding diverse cultures and their values in promoting health and delivering effective nursing care (12). Though these discussions have helped clarify the nature of nursing, they fail to outline how nursing impacts patients, families, and communities, particularly underserved communities (e.g., people of color, women, transgender people, and people with disabilities).

During my clinical experience, I have witnessed how transgender individuals (referred to as hijras in Pakistan) have been mistreated in health care settings. The discrimination faced by transgender people is no different, even in other regions. For instance, a study by Nematollahi and colleagues found that transgender people reported discrimination in families and experienced physical and emotional violence (in public places or at home), which led to suicidal ideation (13).

There are numerous barriers for transgender population in accessing healthcare services. These barriers include discrimination,

refusal of treatment, and a lack of knowledge and clinical and cultural competencies among healthcare providers (doctors and nurses) (14). This led to them avoiding healthcare settings and healthcare professionals. Witnessing these unjust nursing acts made me realize that, if nurses do not deliver just care to patients (individually or collectively) by addressing discrimination and injustices, they are violating their moral and ethical responsibility. Transgender persons face discrimination in healthcare settings, and this hinders access to healthcare. Therefore, negative experiences make transgender people vulnerable to mental and physical problems (15). Transgender people are considered underserved people and treated differently (creating inequities and disparities), thus, focusing on the promotion of justice.

I believe nurses must combat these structural issues and ensure justice in care through warranting an equal resource distribution and equal access to care (5). I argue that the time has come to shift our focus from describing the nature of nursing to highlighting how it is a transformative action that impacts patients' physical, psychological, and social health and well-being, leading to socially just care.

What does it mean for nursing to be a transformative action?

As outlined earlier, I argue that nursing is not merely a profession, discipline, or science, but a transformative action. Transformative nursing is not a new concept in the recent era, as Nightingale called for and acted upon, better conditions for the poor and marginalized. Her work focused on environmental health determinants (air and sanitation) and social health determinants (education, employment, and culture) (16).

Nursing as a transformative action means that every nursing act of care, whether in clinical settings or communities (with individual patients, families, or communities), is a powerful tool for promoting social justice. Social justice includes actions that are imperative and common to rectify the unfair treatment and address inequalities and deliver equivalent health amenities without

considering their sex, gender, race, ethnicity, and socio-economic status (5,10).

Transformative actions are based on transformative paradigms, which serve as a meta-physical umbrella and encompass philosophical strands, including feminism, critical theory, Indigenous and post-colonial theories, as well as theories related to disability and deafness rights (11). Transformative actions are those considered to bring about change at the community and institutional levels. However, in nursing, transformation occurs on a personal level, as change at any level begins with the transformation of the individual (11,17). Transformational changes require transformative leadership, education, and research. Transformational leaders are crucial for driving change.

The theory of nursing care by Watson helps promote health and restore health. Nursing brings changes by focusing on health promotion through transformative nursing practices (12). Therefore, transformative actions are necessary to bring about change at the structural level to address the needs of underserved and marginalized populations. The pillars of transformative nursing are embedded in the ICN Code of Ethics for Nurses (2012), which guides nurses in restoring and promoting health based on universal principles, thereby demonstrating their professional duties. ICN codes are critical to nursing practices and to maintain safe, equitable, social, and economic working conditions (intra and inter-professional relationships) (18).

Transformative nursing focuses on enhancing the respect and dignity of diverse cultures, incorporating socially just thinking in everyday interactions, and protecting human rights. One concrete example of transformative action is involving underserved patients (e.g., older adults, ethnic minorities, and people with disabilities) in the care and decision-making process to respect their autonomy, empower them, and promote their social, psychological, and physical well-being. Involving and fully engaging individuals in their care process promotes a deeper understanding of their situation. Hence, allowing nurses to focus not only on patients' physical condition but also

consider their personal values, singularity, and preferences (19).

Why has nursing not made transformative progress?

I argue that to date, we have made little progress in social justice in nursing practice. Many nurses often focus more on accomplishing their daily concrete care tasks rather than engaging individuals in the care process and evaluating how genuine care can make a difference in their lives. With the recent nursing knowledge, the nurses are not able to recognize the disparities and inequities among the underserved population, thus ignoring the true function of nursing (provision of justice and removing disparities) to bring transformation.

Other factors contributing to this neglect in social justice are structural issues for nurses, their powerlessness, and the organizational culture of traditional care (5,20). There are certain models that direct the engagement of stakeholders in deliberation and transformation to enhance social organizations towards more empowerment and socially just practices (17). However, nurses face burnout and a negative work culture (difficult communication and workload) due to a lack of organizational support and nursing leadership (21).

How can transformative acts be enacted in practice?

There are several ways to enact transformative action in practice. Nursing faculty should educate nurses to promote knowledge, skills, and attitudes to bring about changes (22). In nursing education, transformative learning is a learner-centered process that inculcates critical reflection and discourse among nursing students to achieve a deeper understanding. This promotes self-confidence and competencies to promote changes in practices (23). To bring about transformation, nurses must pursue leadership and management positions in their healthcare settings and enhance their leadership skills at the bedside, clinical, and community levels to effect change (24).

Transformational leadership has four key components, including a) idealized influence (role model towards followers), b) inspirational motivation (compelling and inspiring), c) intellectual stimulation (innovative solutions), and d) individualized consideration (providing a supportive climate and achieving goals) (21). Furthermore, nurses in clinical practice also face a constant lack of time, and they must use their mental acuity to solve clinical problems. Nurses must use skills to complete technical and physical tasks and be a good, busy nurse (25). Nurses should process self-control, self-efficacy, courage (moral and professional), new means of communication, promotion of equality, and safe practices to increase continuous transformation (18).

First, we shift our thinking and align with the transformative paradigm. Aligning with this paradigm facilitates the examination of concerns related to power, social justice, and cultural complexity; hence, it can have a central precept that power is an issue that needs to be addressed at every phase of nursing research (11). Transformative actions are learned through experiences, as well as clinical and in-class learning. Transformative learning helps enhance sensitivity and responsibility, and in the most intense situations, brings stability; however, creativity, critical thinking, and effective problem-solving are also transformative (26).

Second, along with alignment with the transformative paradigm, adopting the structural competency approach can be instrumental. The structural competency approach examines the pathologies of societies and organizations that have long been overlooked. The aim of this approach is not only to address the cultural diversity but also the upstream decisions (inequitable institutional, social, and political practices, structural racism, violence, and discrimination) (27).

Conclusion

In conclusion, I argue that considering nursing as a transformative action places the emphasis on the outcomes and effects of nursing on individuals and communities, enabling nurses to promote social justice

among patients and societies, ultimately leading to better health outcomes. Nurses, through their transformative nursing actions, can promote equity and make social justice a part of the system. In the current research era, the nature of nursing is being elaborated; however, the nursing actions and their impacts on promoting social justice are not well-articulated. Presenting Challenges makes the argument less realistic. Nurses can be leaders in shaping policies by conducting research that involves clients as both participants and collaborators in the research process. This will provide nurses with an opportunity to develop policies at the unit, organization, and national levels in the education system and nursing practices.

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