

Health: A Developing Concept in Nursing

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PURPOSE: The purpose of this paper is to evaluate the level of maturity of the concept of health in the nursing discipline.

METHOD: The four principles of Morse and colleagues were used to evaluate the level of maturity of the health concept—epistemological, logical, pragmatism, and linguistics.

FINDINGS: This evaluation suggests that the concept of health in nursing is immature, defined inconsistently, and with different instruments.

CONCLUSION: Health is a central concept for nursing. Additional concept development and clarification are needed.

PRACTICE IMPLICATIONS: For the concept of health to be conceptualized, it is important that nurses have consensus regarding the definition of health. The nursing discipline should define health in a manner that is consistent with its philosophical presuppositions. Further, it should be measurable, empirically based, and capture the outcomes that are sensitive to the nursing interventions.

Introduction

Most concepts in nursing are relatively abstract. So the multiple dimensions and characteristics of these concepts should be specified and precise in their meanings (Waltz, Strickland, & Lenz, 2010). Health is one of the central concepts in nursing discipline (Johansson, Weinehall, & Emmelin, 2009; Reynolds, 1988). It is one of the nursing metaparadigms and the basic concept in nursing theories (Lyon, 2012b).

How health is defined or understood is important for both health professionals and patients to plan healthcare interventions and health promotion programs. However, health concept is considered complex and includes multiple dimensions (Amzat & Razum, 2014). As a complex concept, it is more difficult to be consistently defined, and its operationalization becomes more complex (Waltz et al., 2010). Concepts can be operationalized at a high level of pragmatic development of the concept. Thus, the concept should be relatively well developed and uniformly understood in order to be appropriately operationalized (Penrod & Hupcey, 2005). Therefore, the purpose of this paper is to evaluate the maturity level of the concept of health in the nursing discipline.

Definitions of Health

The World Health Organization's (WHO's) definition of health is the most commonly used and cited definition in the

literature (Awofeso, 2005; Hwu, Coates, & Boore, 2001; Johansson et al., 2009). The WHO provides a definition of health that is holistic: "a state of complete physical, mental, and social well-being, and not merely the absence of disease and infirmity" (WHO, 1948). The definition includes three interconnected components of health. First, the physical component reflects the physiological or biological component of the definition. It is used to imply the homeostasis maintenance and a soundness of the body. Unhealthy people can be identified by physical problems that may be detected by a series of laboratory tests or clinical examinations. Second, the social component represents the behavioral aspect of health. Social health means that a person is able to participate in the network of social interaction and fulfill social roles and expectations. Social abnormality can be determined if the individual is inactive in the social network and detached from the norms and values of society. The social component of health also includes the spiritual dimension. Finally, the mental component indicates the psychological, emotional, and mental status of the individual. Any problem that affects the mental component can lead to mental illness. Examples of manifestations of mental illness may include emotional apathy, fixation, and maladjusted personality (Amzat & Razum, 2014).

On the other hand, medicine has traditionally held the objective view of health. The biomedical model is the most popular and widely used view of health in which health is operationalized as the absence of disease (Lyon, 2012b). In addition, the most powerful idea is that health is constituted

by physical and mental balance. A person in balance is a healthy person. That is, the various parts of the human body and mind and their functions are harmoniously connected and keep each other in check (Nordenfelt, 2007). Health is also defined as “a dynamic state of well-being characterized by a physical and mental potential, which satisfies the demands of life commensurate with age, culture, and personal responsibility” (Bircher, 2005, p. 336).

In sociology, health can be defined by different social groups or by cultural contexts. Also, health is connected with socioeconomic class (Nettleton, 2006). Health in psychology is not the absence of disease but the physical, psychological, cultural, economical, and spiritual well-being (Marks, Evans, & Estacio, 2011).

Health in Nursing Discipline

Prior to 1988, there was little concern about researching the concept of health in nursing. Health in nursing studies was most commonly defined as absence of illness, disability, or symptoms. The multiple dimensions of health, such as physical, mental, and sociological aspects, were also ignored (Reynolds, 1988).

In the last several decades, the nursing discipline has been concerned with the holistic and multidimensional view of health. In addition, the nature of health is recognized and accepted to be dynamic and subjective among both researchers and patients (Hwu et al., 2001). Health professionals, including nurses, view health as a subjective experience and multifaceted concept, including physical, mental, and spiritual dimensions. They also believe that the definition of health varies according to the individuals, culture, and context (Johansson et al., 2009). Nurses define health as absence of disease, living in a good environment, and social and psychological satisfaction (Shoqirat, 2014). Examples of definitions of health concept in nursing discipline are included in Table 1.

Methodology

The maturity of a concept means that it should be “relatively stable and clearly defined, with well-described characteristics, demarcated boundaries, specified preconditions and outcomes” (Morse, Hupcey, Mitcham, & Lenz, 1996, p. 256). In order to evaluate the maturity level of the health concept, the four principles of Morse et al. (1996), epistemological, logical, pragmatism, and linguistical, were used.

The CINAHL database and Google Scholar were searched using health, health concept, health status, concept analysis, health measurement, and nursing keywords. Searching was limited to full text, English language, and publication years between 1995 and 2015. If full text was not available, other databases were searched for the full-text article. Those databases include Science direct, SAGE journals, Wiley online library, and Springer. In addi-

Table 1. Nursing-Focused Conceptualizations of Health (Lyon, 2012a)

Author	Definition of health
Henderson (1966)	Health is viewed in terms of a person's ability to perform 14 self-care tasks and a quality of life basic to human functioning.
Peplau (1952, 1988)	Health is defined as forward movement of the personality that is promoted through interpersonal processes in the direction of creative, productive, and constructive living.
Rogers (1970, 1989)	Health is defined as a value term for which meaning is determined by culture or the individual. Positive health symbolizes wellness.
Orem (1971, 1980, 1995)	Health is defined as a state that is characterized by soundness or wholeness of bodily and mental functioning. It includes physical, psychological, interpersonal, and social aspects. Well-being is the individual's perceived condition of existence.
King (1971, 1981)	Health is defined as a dynamic state of the life cycle; illness is an interference in the life cycle. Health implies continuous adaptation to stress.
Neuman (1989)	Health is defined as reflected in the level of wellness.
Parse (1981, 1989)	Health is defined as a lived experience—a rhythmic process of being and becoming.
Tripp-Reimer (1984)	Health is defined as encompassing two dimensions, the etic (objective) and the emic (subjective), which include both disease/nondisease and illness/wellness.
Lyon (1990)	Health is defined as a person's subjective expression of the composite evaluation of somatic sense of self (how one is feeling) and functional ability (how one is doing). The resulting judgment is manifested in the subjective experience of some degree of illness or wellness.

Note: Examples of nursing's definition of health. Adapted from Lyon (2012b, p. 13) with permission.

tion, related references that were found in the articles were included. Some nursing articles published before 1995 were included because they covered valuable information such as concept analysis, nursing definitions of health, and instruments used in nursing.

Findings

Epistemological

In this principle, the concept is evaluated by identifying the clarity and distinction of the definition. Concept should be defined clearly and differentiated from other concepts (Penrod & Hupcey, 2005).

In the literature, there was no absolute consensus on the definitions of health (Amzat & Razum, 2014; Lyon, 2012b). The health concept has a form of vagueness because it is multidimensional, complex, and sometimes

intangible (Amzat & Razum, 2014). Health is defined in different ways such as “a value judgment, as an objective state, as a subjective state, as a continuum from illness to wellness, and as a utopian state (rarely achievable)” (Lyon, 2012b). Sometimes the definitions contradict each other. For example, the WHO definition reveals that health is not merely the absence of disease. In contrast, health is defined as the absence of disease based on biomedical model of health (Amzat & Razum, 2014).

Although the WHO’s definition is the most commonly cited, it has been criticized for many years (Awofeso, 2005; Huber et al., 2011; Saracci, 1997). The WHO definition is described as “utopian, inflexible, and unrealistic” (Awofeso, 2005). The word “complete” makes most people, if not all people, unhealthy most of the time (Awofeso, 2005; Smith, 2008). The definition also makes people with chronic diseases and disabilities unhealthy (Huber et al., 2011).

There is an inconsistency in the definition of health as a central concept in nursing (Lyon, 2012b). Nursing studies sometimes used only one dimension, such as physical or psychological, to define health and others include multiple dimensions (Hwu et al., 2001). Four concept analyses of health were found and all were done by nurses (Noughabi, Alhani, & Piravi, 2013; Sadat Hoseini, Panah, & Alhani, 2014; Simmons, 1989; Wang, 2005). The concept analysis by Wang (2005) was in Chinese. Based on the abstract, health was defined as “a process and outcome that involves subjectivity, individuality, objectivity, culture, dynamics, self-control, external control, changeability, and development” (Wang, 2005).

Simmons (1989) identified four themes for health concept definition. Health was defined as the absence of disease, as role performance, as adaptation, and as maximizing human potentials. She also identified two critical attributes for health. The first is biomedical adaptation, which includes a dynamic equilibrium among an individual’s biological, psychological, and sociocultural systems, “including the capacity to adjust to life events and roles” (Simmons, 1989, p. 158). The second is self-actualization, which is defined as the maximizing of the individual’s potential through goal-directed behavior, reflecting growth, and reproductive living.

Sadat Hoseini et al. (2014) did a concept analysis of health based on an Islamic source. Health in Islamic text viewed as value and includes two main dimensions, physical and spiritual. Spiritual health is superior over the physical health and persons can use their intellect to attain spiritual health. Spiritual health gives the ability to perceive life events as normal or abnormal.

Noughabi et al. (2013) provided hybrid concept analysis of health in old people. They concluded that health in old people includes physical, social, mental, spiritual, familial, and economical dimensions and the ability to perform daily life activities that can be measured by medical and functional approaches. Health in old people is affected by genetic factors, environment, healthcare services, and lifestyle.

Logical

In this principle, the concept is evaluated based on its relation and integration with other concepts. It focuses on the conceptual boundaries and if the concept overlaps with other concepts (Penrod & Hupcey, 2005).

Health has many images that reveal the complexity of the concept. Those images include the opposite of disease, a balanced state, growth, a functional capacity, goodness of fit, wholeness, well-being, transcendence, empowerment, and health as a resource (Arnold & Janssen Breen, 2006).

There are some concepts that contribute to the confusion of health concept such as wellness, well-being, quality of life (Lyon, 2012b), and happiness (Johansson et al., 2009; Saracci, 1997). For example, health and wellness are used interchangeably (Lyon, 2012b); and also the term “well-being” is used instead of health in some nursing research (Hwu et al., 2001). Moreover, health professionals describe that there is a close connection between health, well-being, and happiness (Johansson et al., 2009). Furthermore, Saracci (1997) revealed that the term “complete physical, mental, and social wellbeing” used by the WHO reflects happiness more than health. That is, any disturbance to happiness may be construed as a health problem. Other terminologies that are used interchangeably are health status, health-related quality of life, functional status, and frailty (Feeny, Eckstrom, Whitlock, & Perdue, 2013).

Pragmatical

In this principle, the focus is on the applicability and usefulness of the concept and how it is operationalized (Penrod & Hupcey, 2005).

How to describe or define health is a central challenge in deciding on the measurement of health (Chatterji et al., 2002). The multiple definitions, inconsistency in the definitions, the multidimensionality, and the abstract nature of the concept are making it difficult, if not impossible, to clearly operationalize the concept of health (Johansson et al., 2009; Lyon, 2012b; McDowell, 2006). For instance, the term complete in the WHO’s definition is not practical and cannot be measured or operationalized (Jadad & O’Grady, 2008). The first step to measure health appropriately is to reach an agreement regarding the definition of health and what is to be measured (McDowell, 2006). There are many instruments used by clinicians and researchers to measure health. Nevertheless, consensus has not been reached regarding which instrument is to be used in research or clinical settings (Haywood, Garratt, & Fitzpatrick, 2005). Health is mainly measured by reporting perceived health because it can examine different dimensions of health. In contrast, objective measures can only assess one area of health such as level of glucose in blood (Noughabi et al., 2013).

In nursing research, operational definitions of health were varied and included one dimension of health (e.g., physical, psychological or social dimension) or a combination of all

Table 2. Application of Health Concept in Nursing Researches

Author (year)	Title	Purpose	Target population	Conceptual definition of health	Operational definition of health	Term used to reflect health	Health dimensions measured
Doumit, Nasser, and Hanna (2014)	Nutritional and health status among nursing home residents in Lebanon: Comparison across gender in a national cross sectional study	Explore the socio-demographic, health, and nutritional status of elderly residing in Lebanese nursing homes (NHs) and compare these characteristics across gender.	Elderly people living in Lebanese NHs	Not explicitly mentioned. Health was reflected by functional ability, psychological status, and social relations.	The Mini Mental State Examination Scale The Geriatric Depression Rating Interview (question about perceived health status and if they are visiting others or being visited by others)	Health status	Cognitive functioning (psychological) Depression (psychological) Basic functioning tasks (physical) Perceived health status Social relations (social)
Leaver (2014)	Visiting Again? Subjective well-being of children in elementary school and repeated visits to school health nurses	To compare student reports of subjective well-being between children who do and do not repeatedly visit the school nurse with vague complaints	Children in grades 4 through 6	School Well-Being Model (school environment, social relationships, physical health status, and means of self-fulfillment)	School Well-Being Profile (SWBP)	Well-being Health Health status	Health status (physical) School environment (environmental) Social relationships (social) School as a means of self-fulfillment (psychological) Physical Cognitive/Behavioral (psychological) Emotional (psychological) Social health
Pawl et al. (2013)	Sleep loss and its effects on health of family caregivers of individuals with primary malignant brain tumors	Understanding correlates of sleep loss and relationships to health may enable improvement of health of caregivers of individuals with primary malignant brain tumors (PMBTs).	Caregivers of individuals with PMBTs	Health is defined as four dimensions: physical, cognitive/behavioral, emotional, and social health.	Serum markers of immune functioning and the physical health component of the Medical Outcomes Study short form (SF-36)	Health	Physical Cognitive/Behavioral (psychological) Emotional (psychological) Social health
Clendon and Walker (2013)	The health of nurses aged over 50 in New Zealand	Examined the characteristics and experiences of nurses aged over 50 in New Zealand	Nurses in New Zealand aged over 50	Not explicitly mentioned. Health was reflected by the ability of nurse to do usual activities, the presence of pain or discomforts, or presence of anxiety or depression.	Fatigue subscale of the SF-36 and Fox Simple Quality of Life Scale The Center of Epidemiologic Studies-Depression scale and the Functional Assessment of Chronic Illness Therapy-Spiritual Well-Being Scale The Interpersonal Support Evaluation List and the Work Limitations Questionnaire The online EQ5D-3L survey	Health status Health-related quality of life	Usual activities (physical) Anxiety and depression (psychological) Pain and discomfort (physical)
Hørdam, Sabroe, Pedersen, Mejdahl, and Sjøballe (2010)	Nursing intervention by telephone interviews of patients aged over 65 years after total hip replacement improves health status: A randomized clinical trial	Hypothesized that all areas of health status after total hip replacement (THR) could be improved in patients aged 65 years and over by using telephone support and counseling	Patients aged over 65 years admitted to elective THR	Patient's normal activities in relation to health issues and activities of daily living: well-being, expectations as to physical function (PF) after surgery and compared with those before surgery, physical symptoms, eating and appetite, fluid intake, ability to follow prescribed activity and exercise, and need of support from family	SF-36	Health Health status	Dysfunctions and general health perceptions (physical, psychological, and social)

dimensions. On the other hand, the spiritual dimension of health was ignored because it is difficult to measure. Nevertheless, the majority of the health measures used in nursing were multidimensional. Health concept was measured based on variety of populations such as adults, adolescents, older people, families, men, women, caregiver-recipient dyad, communities, and children. Health was mainly measured using self-report indicators and self-measurement instruments, and some scales were specific for particular populations or groups (Hwu et al., 2001); for example, the General Health Rating Index for children (Post, Kuyvenhoven, Verheij, de Melker, & Hoes, 1998) and the Duke Older Americans Resources and Services Questionnaire (OARS) for older adults (Fillenbaum, 1988).

In the past, nursing researchers ignored the reliability and validity of measures that assessed participants' health (Reynolds, 1988). The focus on the reliability and validity of the instruments increased and they became more sophisticated in the last years. Construct validity was the most widely used method of validity. Factor analysis, convergent validity, discriminant validity, and concurrent validity were used. Also, the repeated use of well-established instruments enhanced the validity of the instrument by testing their application in various settings (Hwu et al., 2001).

Examples of well-established and most widely used instruments in nursing research include (Hwu et al., 2001): the Health Perception Questionnaire (Ware, 1976) and its derivative the General Health Rating Index, Laffrey's Health Conception Scale (Laffrey, 1986), and Duke-UNC Health Profile (Parkerson et al., 1981). However, there are inconsistencies in the operational definitions or tools used in nursing studies. In addition, more than one instrument is mainly used in the same nursing study to measure health (Doumit, Nasser, & Hanna, 2014; Pawl, Lee, Clark, & Sherwood, 2013). Examples of applications and instruments used in nursing research are included in Table 2.

Linguistical

In this principle, concept is evaluated if it is appropriately and consistently used in the context (Penrod & Hupcey, 2005).

Nursing uses the concept of health in the literature to reflect the perceived health status of the clients (e.g., nurses, persons, and patients). It is applied in different contexts and in individuals, families, and communities. In addition, health-related concepts are widely used in nursing literature. For example, health promotion, health beliefs, health needs, health care, and health education, etc.

Based on the four criteria mentioned above, health concept is still immature in both interdisciplinary and intradisciplinary features.

Discussion

Although there is a large body of literature that addresses the concept of health, there is no consistency in

the definition and operationalization of health. Health concept was evaluated based on Morse et al.'s (1996) principles of level of maturity of the concept. There was consistency in describing the health concept as dynamic and subjective and varies according to the context, individuals, and cultures (Hwu et al., 2001; Johansson et al., 2009; Lyon, 2012b). Nevertheless, health concept was defined using different terminology and definitions. For example, health was defined as objective state, subjective state, and value (Lyon, 2012b). Health concept is considered as multidimensional, complex, and difficult to be measured. It was measured using different instruments based on the population, context, and the purpose. Therefore, further concept development and clarification are needed. Nurses and other health professionals should work on the definition of health concept and reach global consistency regarding the conceptualization and operationalization of health. Nurses should reach consensus regarding the definition of health in order to be appropriately operationalized. Health in nursing discipline must be defined in a manner that is consistent with its philosophical presuppositions, should be measurable, empirically based, and capture outcomes that are sensitive to nursing interventions (Lyon, 2012b).

Conclusion

Although health is a central concept in nursing, health is defined inconsistently in nursing and other disciplines. Additional concept development and clarification is needed. Health should be defined in a consistent manner in order to help nurses and other healthcare professionals provide healthcare services and interventions. How health is defined can help the nurse with assessing the patient's health and identifying health problems and patient's needs. In addition, the nurse will be able to develop nursing diagnosis that provides the basis for nursing intervention to achieve health outcome.

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