PATIENT DECISION MAKING PROCESS: CONCEPTUAL PAPER

ZAGADNIENIE DOTYCZĄCE PROCESU PODEJMOWANIA DECYZJI PRZEZ PACJENTA W UJĘCIU KONCEPCYJNYM

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ABSTRACT

Objectives. To explore the conceptual framework on the patient decision-making process in the context of philosophical and nursing world views.

Methods. Conceptual paper discussing non-nursing philosophers and the nursing world view of Jacqueline Fawcett, Professor of Nursing; PhD, New York University.

Material. An extensive database search was conducted including PubMed, CINAHL, Web of Science, and Embase. Keywords used: conceptual, patient, decision making process. The search was used to identify existing literature discussing the concept. The articles were limited to English articles only and abstracts were reviewed for relevance to the presented subject.

Conclusions. Very little information exists about the conceptual ideas of patient decision making processes. The patient decision making process is dynamic and influenced by many different variables. Further research is recommended to support the presented theoretical concept.

KEYWORDS: conceptual, nursing world view, patient, decision making.

'Science is organized knowledge. Wisdom is organized life'.

Immanuel Kant

Since the ancient times to present, philosophers have delivered insights to ideas pertinent to illness, significance, human being, righteousness, sorrow, ethics, scientific truth and nursing discipline. The author of this paper was presented with a question regarding to what leads patients in decision making processes during difficult and challenging times involving illness. Reflecting upon the several readings, one philosopher stood out more than others. The author will provide analysis of the work of Immanuel Kant that provides a deeper insight into the phenomenon of human decision making

STRESZCZENIE

Cel. Celem pracy jest przedstawienie zagadnienia dotyczącego procesu podejmowania decyzji przez pacjenta w kontekście filozoficznym oraz światopoglądu pielęgniarskiego.

Metody. Praca poglądowa w zakresie pielęgniarstwa przedstawia poglądy filozoficzne, jak również światopogląd pielęgniarski w oparciu o model koncepcyjny i teorię opieki pielęgniarskiej Jacxqueline Jacqueline Fawcett.

Materiat. Przeanalizowane zostały kolejne bazy danych: PubMed, CINAHL, Web of Science, Embase. Słowa kluczowe: koncepcyjne, pacjent, podejmowanie decyzji. Wyszukiwanie zostało podjęte w celu identyfikacji istniejącej literatury omawiającej rozważane zagadnienie. Wyszukiwanie zostało ograniczone do artykułów opublikowanych jedynie w języku angielskim, a konspekty artykułów zostały przeanalizowane dla stwierdzenia przydatności do prezentowanego przedmiotu.

Wnioski. Istnieje bardzo niewiele informacji na temat konceptualnych idei dotyczących procesów podejmowania decyzji przez pacjentów. Generalnie, proces podejmowania decyzji przez pacjenta jest procesem dynamicznym, który jest uzależniony od wielu rożnych czynników. Przedstawiona tu koncepcja teoretyczna powinna być poparta dalszymi badaniami nad tym zagadnieniem.

SŁOWA KLUCZOWE: koncept, światopogląd pielęgniarski, pacjent, podejmowanie decyzji.

during difficult and challenging times. Jacqueline Fawcett's worldview will be applied to nursing practice and/ or potential research focus to describe the interaction between the concept of a person and the environment.

Material

Several database searches were conducted including a wide-ranging overview of PubMed, CINAHL, Web of Science and Embase literature collections. The inquiries were narrowed to the following words: conceptual, patient, decision making process. The examination was used to identify existing literature discussing the concept. Articles were limited to English only and abstracts were reviewed for relevance to the presented subject. Commentary articles were excluded. Please look at

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Figure 1 to see the criteria used to keep or remove studies from the review. The studies were excluded if they were not written in English, and if they did not report conceptual ideas of the patient decision making process.

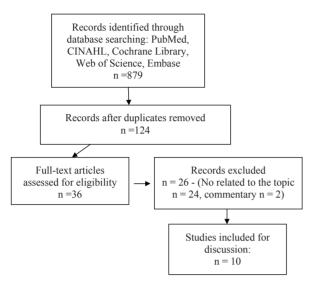


Figure 1. Study selection process Source: authors' study

Philosophy

During the nursing practice, the author often experienced patients having reacted to a poor prognosis differently if not contrastively. This initiated the interest to perform further research to find the origin of this phenomenon. The abundant literature was reviewed to analyze both the positive and negative outlooks during the challenging situations and tough health prognosis for patients and their families. The findings of this research are presented. Literature implies that social upbringing and family support play a great role in problem solving; however, there was something more to this problem. While reading Kant, the idea of subjectivization of the objects has spiked the interest of this author. In one of Kant's publications titled: The Critique of Pure Reason [1] the philosopher discusses 'Analogies of experience' (Chapter II, Section III) [1]. One of Kant's concepts presented there ties previous experiences to personal perception. According to this idea, one can infer that the personal experience is based on objective information about the disease and its process, which also can be seen throughout subjective perception. Therefore, the overall experience and outlook fluctuates among patients.

The second aspect that makes a difference in a patient's reaction, has to do with the patient's faith and belief in a greater transcended truth. Kant's philosophy refers to characteristics of this experience as a true prism of 'priori conception' or instinctual knowledge [1]. In this

perspective of reality the pure instinct is perceived as a much more effective guide to understanding the world or personal well-being and happiness. Kant discussed this phenomenon in Section II of Book I within the same publication and further deducted that one's insight or interpretation of transcendent truths and values may predetermine a person's viewpoint. This stance, once more, would explain the patient's variance in perspective to news received about their condition [1].

Hartmann's (2014) article 'The Biological Basis of Physics and the Role of Homeopathy' can serve as one of the examples of patient decision making based upon Kant's 'prior conception' [1, 2]. The Kantian theory of 'priori conception' was used here to defend the reasoning for the utilization of alternative medicine [1]. The article provides philosophical insights to convince the public to accept homeopathy as one of the possible healing methods. The position of Immanuel Kant on existence of basic principles was used by Hartmann to deduct that there is no need to be explained since the existence of homeopathy is a given. Further, Hartmann (2014), develops his postulate that homeopathy is preexisting and should be perceived as a given; therefore, people should accept homeopathy as an alternative form of healing [2].

Worldview

Fawcett's worldview was chosen to demonstrate the interaction between the person and environment and to apply this concept to nursing practice. Fawcett in 1984 presented a comprehensive mixture of many world views where an original reciprocal interaction within the worldview evolves from organismic views [3]. This view supports Kant's idea of experience and its relationship to personal perception. Fawcett describes interactions between the person and environment as being reciprocal, and similarly to Kant, she agrees with the existence of objective and subjective ways of collecting knowledge [4]. Fawcett perceives each individual as a complex puzzle consisting of many pieces that are closely interacting with the environment and creating more variables that influence the decision making process of an individual. Since the patient can collect his/ her knowledge through different means, a change in the environment can hinder the learning process [5]. A great example of this phenomenon can be the perception of a possible outcome. For example, one patient may feel comfortable with a change and be open to new ways of treatment while another may resist the change and for this reason not receive any positive outcome. The initial reaction would vary even though the situation may be similar; the patient's judgment may be opposing yet weighing.

Human choices throughout perplexing times are also influenced by what researchers describe as a patient's initial reaction to nursing teaching. In the article titled 'Advanced Practice Nursing and Conceptual Models of Nursing' [6], the authors describe that patient teaching provided by nurses today will have an impact of upcoming trends of an overall patient's wellbeing. These researchers are deducting that the lack of a patient's knowledge about a specific disease process has a great impact on the outcomes of the patient's care. Patients who lack knowledge, will have a skewed perception of their situation and condition, and this could lead to inconsistency in the patient's decision making on the treatment for that particular disease. The lack of knowledge may also explain the patient's maladaptation and development/use of wrong coping mechanisms during challenging times [6].

According to Fawcett [4], the environment and the individual possess a mutual bond. That mutual bond may interfere with the personal perception of surroundings even when the environment changes [5]. Patients who are admitted to an acute setting, would have severe environmental changes. Some may have visited that setting a few times and start to feel familiarity with that particular setting. The above example paints two scenarios and each individual's decision making may be affected differently by that change in the environment.

Outcome

Patient education is an essential and integral part of quality health care. Nurses on a daily basis educate patients on various aspects of healthcare provided to them. For education to be successful the nurse should recognize and acknowledge all of the aspects of the patient decision making process while providing care to the patient [2, 7-10]. Recognition of the underlying thought process can lead to quicker patient recovery and longer quality of life as effective education and behavior modification potentially could occur. Many nurses during busy shifts place the patient education on the end of the 'to do list'. Nurses also do not feel comfortable at times to provide needed education due to the lack of knowledge of importance and educational techniques [7]. Secondly, nurses may require practice in writing an individualized education plan that considers the patient decision making process which influences their health care goals and helps support quicker patient recovery and longer quality of life [7-10]. Larsson at al., discover in their studies that patients that are more educated on steps and needs to the provided care are more effective in implementation of behavior modification during the decision making process [9]. Bujorian [8] studied variables that influence patient decision-making processes to enter clinical trials. The study results agreed with the above presented factors that influence a patient decision making process and suggest that a nurse should include all of the aspects and variables of that patient decision making process during patient education. Pellissier and Venta [10] emphasized that patient values should be considered during not only the decision making process but also when providing education to help support the desired outcome.

Summary

The concepts surrounding a patient's response were once assumed to be abridged to the background and upbringing of the patient. However, there is more to what surrounds the patient. There are experiences, faith and belief, prior conception, outside forces and the patient him/herself that provides the response to a bad situation. The interactions of the environment and the patient can help provide some clues as to why patients respond to certain situations more positively while others do not. Nurses should recognize and acknowledge all of the aspects of the patient decision making process during care. Recognition of the underlining thought process can lead to guicker patient recovery and longer quality of life as effective education and behavior modification potentially could occur. Based on collected information the authors suggest Figure 2 illustration as conceptual framework of the patient decision-making process. Further research is recommended to support the presented theoretical concept.

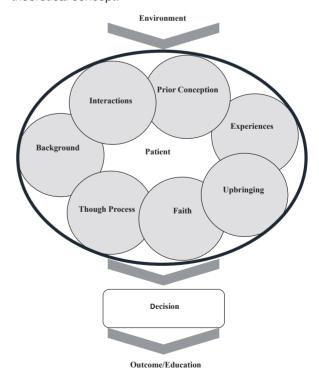


Figure 2. Conceptual framework of patient decision-making process Source: authors' study

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