

# Hope in Nursing Care

Subjects: **Nursing**

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Hope is a central concept within the nursing literature, which is crucial towards the development of nursing knowledge. Nursing teams play a crucial role in exploring the meaning of hope and promoting hope among patients and their families.

holistic health

hope

nursing diagnosis

nursing theory

## 1. Introduction

Hope is an integral part of being human and a dynamic and multidimensional phenomenon with numerous meanings. The concept of hope has been studied extensively in many academic fields, including philosophy, psychology, and medicine, although it only appeared in the nursing literature in the 1980s, which defined the concept for specific populations and inspired the first strategies. Since then, hope research and its inclusion in nursing care have become a priority [1]. Hope has become an important and crucial factor in the care of people with health problems and their families [2], with three main focuses: (a) hope as an inner power that facilitates transcending the present situation and conceiving a reality-based expectation of a better future for oneself or others; (b) hope as a state of being, characterized by the anticipation of a good and improved state, or a release from perceived entrapment or a human experience [1][3]; (c) hope as a personal experience, centered on personal responsibility and convictions about the world and the chances of achieving what we want [4].

Scholars agree on describing hope as an idiosyncratic complex process that is essential to life, future-oriented, deliberate, and highly personalized [2][5]. It also entails the presence of substantial goals that are both desired and achievable, as well as the motivation and capacity to make judgments and choices [6].

Dufault and Martocchio provide the most extensive analysis of hope in the nursing literature [7]. They define hope as a dynamic process, a multidimensional “life force” that anticipates achieving a practically attainable and personally relevant good, with some degree of confidence despite marked uncertainty. Within the hoping process, the authors differentiate between generalized hope (a more global longing for some positive, yet undefined, future) and particularized hope (focused on a specific goal) [7][8].

Farran et al. [9] conceptualized hope as a psychological and cognitive process that can possess spiritual or transcendent dimensions. It involves the formation of positive expectations and optimistic beliefs about future outcomes [9]. These positive expectations are influenced by various factors, including self-belief (confidence in

one's abilities and potential), trust in others (confidence in the reliability and support of others), and adherence to a religious doctrine (faith in a higher power or spiritual principles) [9].

Hope emerges as a forward-looking process that involves a dynamic interplay among cognition, action, emotions, and interpersonal connections. This process is oriented toward the pursuit of future accomplishments that hold personal significance [10].

The International Classification of Nursing Practice (ICNP®) defines hope as "the feeling of having possibilities, a trust in others or in the future, a zest for life, an expression of reasons and will to live, and inner peace and optimism, associated with setting goals and mobilizing energy" [11] (p. 1), which can constitute a nursing diagnosis (despair), intervention (promoting hope), or outcome (hope). The continuous updating of this classification ensures its usefulness, relevance, and ongoing quality, as well as supporting future health models and nursing. Regarding the definition of the diagnosis of hope proposed by the ICNP®, recent scientific findings point to a better clarification of the concept. In this way, nurses can consider this focus more easily, considering its attributes when making the initial assessment and monitoring nursing care in this area.

Hope research in nursing care has focused on different populations, life spans, and stages of the health–disease transition process [1][12], varying according to the experienced events and cultural environments [13]. Several studies on hope are grounded in nursing's totality paradigm. In this paradigm, nurses view individuals not just as a collection of isolated symptoms or medical conditions but as whole beings with physical, emotional, psychological, social, and spiritual dimensions. Nurses consider the interplay of these various aspects of a person's life when providing care, aiming to address the individual's needs in a comprehensive and integrated manner and are frequently developed to promote healing and quality of life through interventions with specific individuals or certain health conditions [2]. Some examples include elders [14], individuals with chronic medical conditions [15][16], children and adolescents [13][17], caregivers and spouses [17][18], homeless people [19], and people with mental health disorders [20][21].

Recently, there has been an increased interest in the promotion of hope in advanced clinical nursing practice to aid and support clients in managing the complexity of physical and emotional suffering. The nurse's ability to foster hope necessitates a deliberate approach and the establishment of circumstances for therapeutic interaction through interpersonal engagement. This occurs in response to situations characterized by suffering, uncertainty, or emotional distress, ultimately leading to mutual personal growth for both the nurse and the client [22]. Some of the hope-promoting strategies included making a meaningful impact on their patients' lives, establishing deep connections with them, accompanying them on their journey, and gradually building trust over time. Additionally, the nurses emphasized that the way they approached their tasks and interactions was more important than the specific actions they took [23]. In this regard, the nursing team plays a crucial role in exploring the meaning of hope and promoting hope in patients and their families. Promoting hope is a professional responsibility and a moral and ethical obligation, which is foundational to all nursing care [24].

## 2. Hope in Nursing Care

## 2.1. The Antecedents of Hope

The data indicate that hope is a comprehensive concept that requires support to achieve positive outcomes [25][26]. Antecedents of hope may consist of a pivotal life event or a stressful stimulus, such as loss, major decisions, hardship, suffering, pain, despair, and uncertainty due to illness, chronic diseases, or terminal illness. Antecedents of hope may also include a predicament or threat [25][27][28][29][30][31][32][33][34], such as an uncertain prognosis, experience of a trusting and loving relationship [27][34][35], a successful learning experience, reaching a goal [36][37][38], and connectedness with others and God or spirituality [27][28][31][36]. Antecedents such as “trust, interpersonal relationships, effective communication, and relationships with health professionals” underline the importance of holistic care [28][34] (p. 1029). It is crucial to consider and prioritize these aspects, as they play a vital role in the overall well-being and satisfaction of patients or individuals receiving healthcare services.

## 2.2. The Attributes of Hope

Hope was defined and described in several ways: an expectation of positive outcome [27][29][30][32][33][34][38][39]; an orientation towards the present and future [32][35]; a multidimensional and dynamic process of goal identification [27][29][30][31][32][35][39]; a personal quality [32][33][34][37][38]; a cognitive decision-making process [39]; spirituality [34][35]; a feeling of comfort and safety [28][34]; an interpersonal relationship and feeling of belonging and being needed [32][34]; a legacy [34]; an energy-action towards the future [29][31][32][35]; an ongoing adjustment to personal and observed experiences during illness and loss to daily living [30][36][37]; a sense of limitation [25]; a coping strategy [27][33][35][38]; mutuality experiences [34]; a positive social support [38].

These attributes frame a more pragmatic view (see the [Supplementary File](#)) and can help understand how nurses might identify hope in the continuum of care.

## 2.3. The Consequences of Hope

Possible consequences of the concept indicated in the literature included the following: returning to a more stable life, with better physical health and quality of life [28][29][30][35][36]; finding hope and meaning in life [27][31][33][38]; overcoming a difficult situation and obtaining greater healing and satisfaction [27][33]; facing uncertain future constructively [27][32][33][34]; accepting a health condition [27][28][31][32][33][34]; coping with pain and suffering [27][28][31][32][33]; promoting a sense of renewal, peace, and legacy, and developing new strategies and a positive outlook for family and friends [27][32][33]; survival [27][32][33][37]; positive changes in self-concept and growth opportunities [27][28][31][36]; developing new feelings of safety or comfort, formulating new and realistic goals, and promoting confidence in the future and trust in the support from others [25][28][31][34][38]; faith and spirituality [37]; a winning position [31]. Faith and the perception of the transcendent emerge as consequences, as they become resources for individuals, particularly in times of uncertainty and vulnerability.

## 2.4. Updating the Definition of Hope

The authors compared classifications (NANDA international diagnoses, ICNP® axis, and similar terms) and proposed a new definition for the hope diagnosis and a new term for the ICNP® (**Table 1**).

**Table 1.** Proposed update of the definition of hope in the ICNP®.

Definition of Hope—Code 10009095 (ICNP, 2019)	Proposal of Hope Definition for ICNP®
Emotion: Feelings of having possibilities, trust in others and the future, zest for life, expression of reasons and will to live, inner peace, optimism, associated with setting goals and mobilization of energy.	A dynamic emotional state, multidimensional energy that evokes a positive outcome expectancy and is process-oriented toward the present and the future. Depending on the context, hope can focus on living a fulfilling life around important people, legacy, spiritual dimensions, and maximizing quality of life. Hope is central to adapting to uneasiness or uncertainty. It is characterized by a cognitive, action-oriented expectation that a positive future goal or outcome is possible.

The data suggest that is possible to update the definition of hope in nursing practice in the ICNP® [11], providing a

**References** the relationship between hope and nursing practice and focusing on how people endure and sustain a positive outlook on life, despite their difficulties. Compared to the ICNP® definition, which is more concise [1]. Lohne, V. 'Hope as a lighthouse' A meta-synthesis on hope and hoping in different nursing and emphasizes certain emotional aspects of hope, the proposed definition of hope is more detailed, contexts. *Scand. J. Caring Sci.* 2022, 36, 36–48.

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### 3. Summary

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formulated a conceptual definition. From a chronological perspective, several definitions have arisen: (a) hope as the anticipation of a positive possible future, accompanied by desire and expectation [22], (b) hope as an energetic cognitive state, an action-oriented expectation of a positive future aim or outcome [39]; (c) hope as dynamic, multidimensional theory that promotes positive expectations, motivating actions, and personal significant and realistic future goals [40]; (d) hope as the reassuring or life-sustaining, realistic belief in a positive future for self or others [29]; (e) "it is a belief in something positive without any guaranteed expectation that it will occur" [39] (p. 410); (f) hope in terminal illness represents "a calm, emotional, global focus on the hopes of loved ones" [29] (p. 458); (g) hope is "a multidimensional construct arising from our memories, beliefs, and values", which permeates all our actions and thoughts, shaping our hope in spheres and dimensions [30].

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Hope is a process with individual value derived from lived experiences [2]. Some authors report behaviors

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