

Hope: Toward Conceptual Maturity in Nursing

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Abstract

Purpose: to explore the contextual usage of the concept of hope within the discipline of nursing across two different contexts: spinal cord injury and cancer from the patient's perspective. **Method:** the Pragmatic Utility approach was utilized for surplus clarification and advancement of the concept. **Findings:** there is no consistency in the way the concept of hope is conceptualized across two contexts, a number of overlapping concepts were found, and the concepts' operationalization is limited. **Nursing Implications and Conclusion:** despite a considerable attention to the concept of hope, there is no consensus on the definition of hope. Refinement and clarification of the concept of hope will improve nursing practice through providing nurses who deal with patients suffering from chronic illnesses and their families with better understanding and helping them to design strategies to inspire hope across life span. Future studies to enhance the measurement of the concept of hope is needed.

Keywords: Cancer, Concept Maturity, Hope, Spinal Cord Injury.

1. Introduction

Behavioral and psychosocial concepts play an integral role in advancing the discipline of nursing. For research purposes, a clearly developed concept is ready to be operationalized and thus facilitate the identification of variables relevant for measurement (Morse, Hupcey, Mitcham, & Lenz, 1996a). According to Morse, Mitcham, Hupcey, and Tason (1996b), a mature concept is well-defined, has obviously described characteristics, demarcated boundaries, and specified preconditions and outcomes.

However, in agreement with these criteria, concepts of interest to nursing are relatively abstract in nature and multifaceted. Such lack of conceptual clarity will result in unpredictable outcomes and inconsistency with its use by the scientific community and practitioners (Morse, Hupcey, Mitcham, & Lenz, 1996a). Inconsistent use of concepts in research, theory, practice and policy confines their usefulness to nursing, hinders the advancement of nursing as a profession and so adversely affect the patients' wellbeing (Weaver & Mitcham, 2008).

As a concept, hope has been identified as an essential part of human existence and development, a process, a theory and a source of meaning and value in life (Stephenson, 1991). Nurses are in an exceptional position to promote human-health and wellbeing and thus to inspire and empower hope in people across the health-illness continuum.

Despite a considerable attention to the concept of hope, there is no consensus on the definition of hope. Herrestad, Biong, McCormack, Borg, and Karlsson (2014) argued that it is "a platonic dream" to settle on a description of the concept of hope that is contextually valid. As a result, the authors anticipated following a pragmatist approach to the science of hope in nursing in which an in depth analysis of how hope is contextually sensitive is conducted.

According to Morse et al., (1996a) selection of an appropriate approach to concept analysis research should be preceded by identifying the level of maturity or development of a concept. Concept analysis has been identified as an assessment process of exploring concepts level of maturity by terms of their internal structure, use, representativeness, and relations to other concepts ((Morse, Hupcey, Mitcham, & Lenz, 1996a). Four parameters were established to evaluate the level of maturity of a concept using the epistemological, logical, pragmatic and linguistic principles (Morse, Mitcham, Hupcey & Tason, 1996b).

The purpose of this study is to conduct an in depth analysis of the contextual usage of the concept of hope within the discipline of nursing across two different contexts; including spinal cord injury (SCI) and cancer from the patient's perspective.

2. Methodology

2.1. Pragmatic Utility (PU) Approach of Concept Analysis

In this study, the researcher used the Pragmatic Utility (PU) Method as developed by Morse (2000) (As cited by Weaver & Mitcham, 2008). PU method evaluates the use of the concept through comparing and contrasting applications, in particular, disciplines, determining conceptual adequacy with competing concepts, and identifying gaps, inconsistencies, and boundaries.

Penrod and Hupcey (2005) argued that the PU approach is a technique for further clarification and advancement of the concept rather than concept analysis. Accordingly, the PU approach is typically useful for evaluating concepts that are partially mature in which a sufficient amount of literature exists but the concepts have been inconsistently utilized in research, theory, practice and policy, that in turn adversely influence the advancement of nursing as a profession and so patients' well-being (Weaver & Mitcham, 2008; Morse, Mitcham, Hupcey, & Tason, 1996b). Corresponding to these criteria, the concept of hope can be considered as partially immature.

3. Literature Search

The search strategy is limited to including research studies on the experiences of hope across two different contexts; Spinal Cord Injury (SCI) and Cancer. The databases CINHALL PLUS full text, MEDLINE full text and SCIENCE DIRECT were searched in March 2015 for relevant research studies. Search terms were "hope AND spinal cord injury" and "hope AND cancer patients" or "hope AND oncology patients." Research studies were included if their main focus is the concept of hope from the patient's perspective who suffered from either SCI or Cancer, and the first author is a nurse. Non-English, Interventional studies and those written from the perspective of family caregivers were excluded. Figure (1) summarizes the search strategy used.

4. Evaluation of Findings

4.1. Hope and Spinal Cord Injury

Using the search terms "hope" AND "Spinal Cord Injury," CINHALL PLUS fulltext, MEDLINE FULLTEXT and SCIENCE DIRECT databases produced 166 studies after duplicate removal. Title and abstract screening produced 12 articles for fulltext screening. Finally, five articles met the predefined inclusion criteria; Lohne (2009), Lohne and Severinsson (2006), Lohne and Severinsson (2005), Lohne and Severinsson (2004a), and Lohne and Severinsson (2004b). Research studies that met the inclusion criteria used a qualitative approach with a descriptive and explorative design.

4.2. Hope and Cancer

Using the search terms "hope" AND "Cancer patients" or "Oncology patients," CINHALL PLUS fulltext, MEDLINE and SCIENCE DIRECT databases produced 148 studies after duplicate removal. Title and abstract screening produced 17 articles for fulltext screening. Finally, eight articles met the predefined inclusion criteria.

4.3. Assessing Level of Maturity of the Concept of Hope

To evaluate the concept's level of maturity, Penrod and Hupcey (2004) claimed that it was necessary to start with reviewing the scientific literature concerning the concept of interest. Consistent with the purpose of the current study, a thorough literature review on the concept of hope is carried out by the researchers within the discipline of nursing across two different contexts; SCI and Cancer.

Across the two different contexts (SCI and Cancer), there is a paucity of nursing literature on the concept of hope. However, Penrod and Hupcey (2004) argued that a small sample of literature regarding the concept being studied does not undermine the process of concept analysis. According to Morse and field (1995)

adequacy and appropriateness of the literature reviewed are key evaluative criteria (As cited by Penrod & Hupcey, 2004).

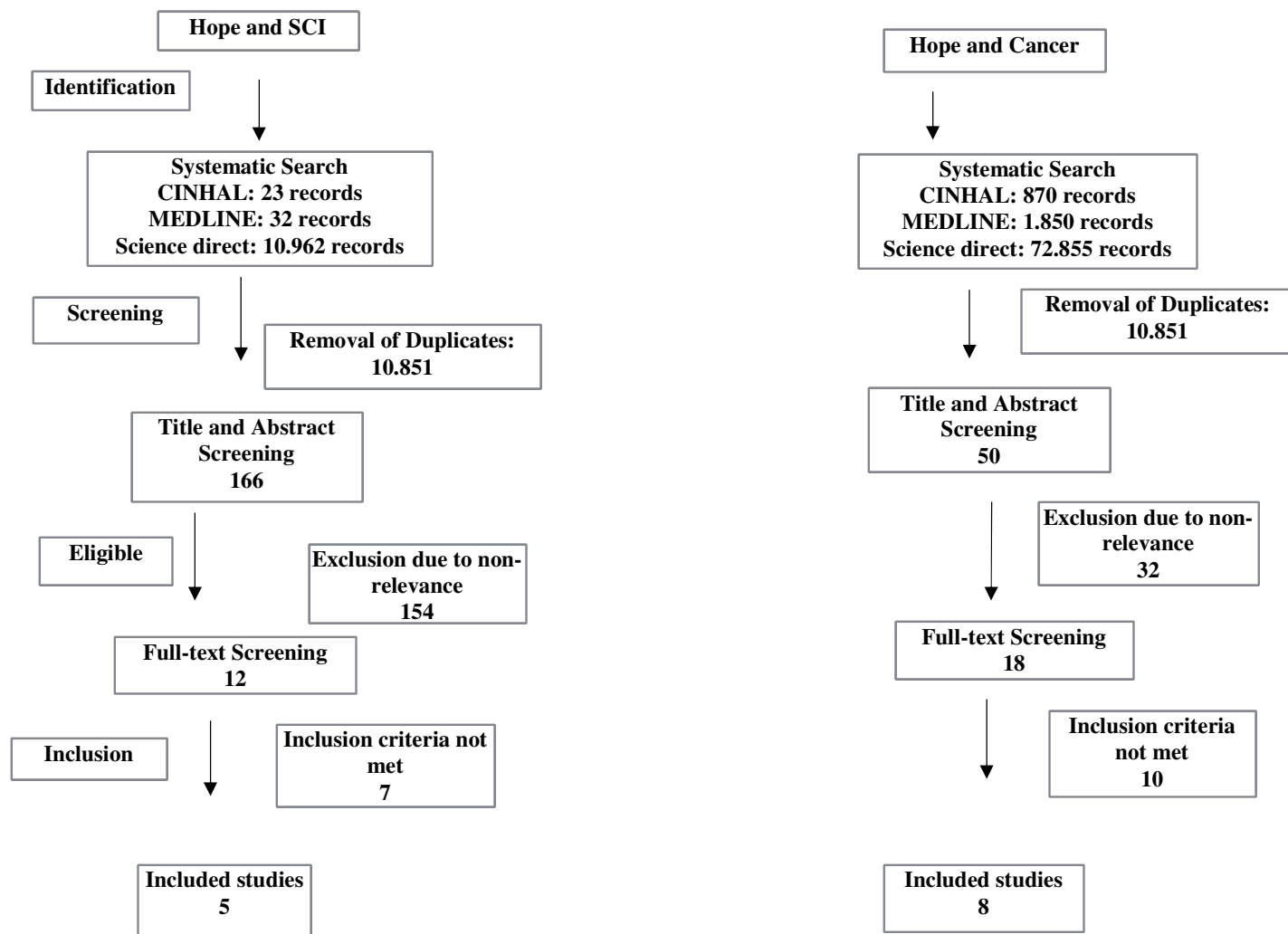


Figure (1): Summary of the Search Strategy

4.3.1. Hope and Spinal Cord Injury

In the context of spinal cord injuries, the concept of hope from patient's perspective has been described in different ways. During the first few months following acute and unexpected SCI, hope has been featured by turning points; mainly physical improvement, which awakens the process of hoping. Findings showed two main themes demonstrating the "awakening of hope" including: hope and despair, and uncertainty (Lohne & Severinsson, 2004a). Likewise, Lohne and Severinsson (2004b) claimed that hope in SCI patients is complex, future-oriented, and contradictory phenomena; expressed by positive expectations and emotional dichotomies "ups and downs." and "downs".

During the first year following acute SCI, having a hope described as moving out through "The Vicious Circle" from suffering to hoping depending on physical improvement and emotional and mental independence

gained by each participant, and "Longing" as a source of created new hope (Lohne & Severinsson, 2005). A year after acute SCI, Lohne and Severinsson (2006) stated that hope had been described as a power "the power of hope" and associated mainly with "will" but also with "faith." As well hoping, struggling and growing to symbolize the process of hoping.

Three to four years after suffering SCI, hope has been described in various perspectives depending on the degree of emotional, mental, and physical progress gained by each respondent. Three main themes emerged including; "life-related hope," "body-related hope," and "creative and expanding hope" (Lohne, 2009). In the reviewed literature, within the context of SCI operationalization and measurement of the concept of hope is limited.

4.3.2. Hope and Cancer

Within the context of cancer, hope usually differs across different stages of life and within changed situations. Borneman, Irish, Sidhu, Koczywas, and Cristea (2014) reported that, for instance, lung cancer patients "hope for a cure"; particularly if improvement in their health occurred. However, once reality is accepted, hope could not be vanished, but it may be maintained. Mok, Lam, Chan, Lau, Ng, and Chan (2010) found that hope experienced by advanced cancer patients had five components, including "living a normal life," "social support," "actively letting go of control," "reconciliation between life and death," and "wellbeing of significant others." In a similar way, elderly and women patients living with advanced cancer described hope "for not suffering more," "for living life to the fullest," "a peaceful death," "life after death" and "for a better life in the future for their family" (Duggleby & Wright, 2004), and "for participate in meaningful activities and survive the disease" (Reb, 2007).

Besides identifying hope as being important and dynamic, cancer patients described hope as a choice (Duggleby & Wright, 2004; Reb, 2007). A similar result reported by Benzein, Norberg, and Saveman (2001) in which patients with cancer felt hope as an ultimate experience to their will and to have a normal life. Health locus of control, being informed about their cancer diagnosis and family support was significantly associated with the level of hope in cancer patients (Lin & Tsay, 2005; Zadeh, Agahosseini & Kermani, Rahmani, 2011; Reb, 2007). Likewise, Khater and Alkwiese (2013) reported that availability of social support systems, including family, relatives, friends, nurses, or physician, was the foremost contributing factor of hope in Jordanian cancer patients.

In the reviewed literature, the most widely used instrument is Herth Hope Index (HHI) by patients' level of hope and strategies used to foster hope (Herth 1990).

4.4. Criteria for Evaluating Concept Maturity

To evaluate the level of maturity of the concept of hope, the researchers utilized the four principles of concept maturity as developed by Morse et.al., (1996b); which include the epistemological principles (clarity of definition, boundaries, attributes, preconditions, and outcomes), the logical principles (consistently and systematically related to other concepts), the pragmatic principles (concepts appropriately operationalized in research and practice), and the linguistic principles (concepts appropriately used in various contexts) (Weaver & Mitcham, 2008). Table (1) summarizes the evaluation of the level of maturity of the concept of hope within the discipline of nursing across two contexts (SCI and Cancer).

4.4.1. Epistemological Principle

This principle relates to concepts that are clearly defined and well differentiated from other concepts. In patients with SCI, hope is defined in different ways and is not well differentiated from other concepts. It has been defined as being future-focused phenomena, awakened by turning points (e.g., improvement), regarded as positive expectations and emotional conflicts "ups and downs," and "downs", related to powering, longing and will rather than faith, and derived from its contrary suffering, despair, hopelessness. On the other side, patients living with cancer defined hope as being directed toward the future but for a cure, not suffering more, having a normal life and the best for their beloved ones, reflected as a choice, and strongly connected to the social support system. In both contexts, there are several competing definitions; for instance, expectations, optimistic, faith, belief, goal, and wish.

4.4.2. Pragmatical Principle

This principle represents the fitness of the concept with the phenomena common to the discipline, and if it has been appropriately operationalized. Based on the accessible databases, within the context of SCI, the operationalization and measurement of the concept of hope are limited. However, within the context of cancer, the concept of hope has been operationalized in terms of patients' level of hope and hope-fostering strategies.

4.4.3. Linguistical Principle

This principle relates to the appropriateness and consistency of using the concept with context. Within the context of SCI, there is not enough literature to assess the use of the concept of hope. However, in each selected context (SCI and Cancer) the concept is used appropriately and consistently since it is linked to being future-oriented, free from suffering and despair, settled with expectations, goals, and beliefs, and created by will, choice, and faith.

4.4.4. Logical Principle

This principle examines whether the concept holds its boundaries through theoretical integration with other concepts. For patients suffering from an SCI, hope overlaps with other concepts such as expectations and beliefs, while for patients, living with advanced cancer the concept of hope overlaps with other concepts as optimistic, goals, faith and wish.

5. Synthesis of Findings

The purpose of this study is to conduct an in depth analysis of the contextual usage of the concept of hope within the discipline of nursing across two different contexts; including spinal cord injury (SCI) and cancer from the patient's perspective. Hope is a core concept for nursing practice to promote human health and wellbeing and empower people across the health-illness continuum. However, hope as an intra-disciplinary concept remains unclear (Nweze, Agom, Agom, & Nwankwo, 2013).

Through this in depth analysis, the concept of hope has been used inconsistently and inappropriately. There is no uniformity in the way the concept of hope is conceptualized within the discipline of nursing across the two contexts (SCI and Cancer). Similarly, Cutcliffe and Herth (2002) indicated that it is still difficult to find one definition that captures all about hope and lacks a sense of logical sequence in how it relates to the health-illness continuum.

Herrestad, Biong, McCormack, Borg, and Karlsson' (2014) revealed that hope statements were more likely to be linked with distinct sets of related philosophies, thus are used to describe and legitimate different arrays of initiatives and actions. They argued that hope studies should be contextually localized. McClement and Chochinov (2008) argued the challenging issue of how to define hope. The findings demanded that each conceptualization of hope must reflect its complex, process-oriented, multidimensional, dynamic, individualized and future-oriented nature.

Table (1): Evaluation the level of maturity of the concept of hope within the discipline of nursing across two context (SCI and Cancer)

Criteria for Evaluating Concept Maturity	Hope within Spinal Cord Injury (SCI) Context	Hope within Cancer Context
Epistemology Principle <i>The concept is clearly defined and well differentiated from other concepts.</i>	Hope is defined as being future-focused phenomena (Lohne & Severinsson, 2004b), awakened by turning points (e.g., improvement) (Lohne & Severinsson, 2004a), regarded as positive expectations and emotional conflicts "ups and downs" (Lohne & Severinsson, 2004b), related to power, longing (Lohne & Severinsson, 2005) and will rather than faith (Lohne & Severinsson, 2006), and derived from its contrary suffering, despair, hopelessness.	Hope is defined as being directed toward future but for a cure (Borneman, Irish, Sidhu, Koczywas, & Cristea, 2014), not suffering more, having a normal life and the best for their beloved ones (Duggleby & Wright, 2004, Reb, 2007), reflected as a choice, and strongly connected to the social support system (Lin & Tsay, 2005, Zadeh, Agahosseini & Kermani, Rahmani, 2011, Reb, 2007). Several competing definitions were found as expectations, optimistic, faith, belief, goal, and wish
Pragmatical Principle <i>The fitness of the concept with the phenomena common to the discipline and if it has been appropriately operationalized.</i>	The operationalization and measurement of the concept of hope is limited.	The concept of hope has been operationalized in terms of patients' level of hope and hope-fostering strategies (Herth 1990).
Linguistic Principle <i>The appropriateness and consistency of using the concept with context.</i>	In the two selected contexts, the concept of hope is used appropriately and consistently as it is linked to be future-oriented, free from suffering and despair, settled with expectations, goals, and beliefs, and created by will, choice, and faith.	
Logical Principle <i>Whether the concept hold its boundaries through theoretical integration with other concepts.</i>	Hope as a concept overlaps with other concepts such as expectations and beliefs.	Hope as a concept overlaps with other concepts as optimistic, goals, faith and wish

Our study found that the operationalization and measurement of hope as a concept is limited within the nursing discipline. Correspondingly, Herth and Cutcliffe (2002) illustrated that there is limited instruments designed to measure hope in adolescents and young children but not from a cultural perspective. Further they suggest both qualitative and quantitative methods of measurement of the concept of hope to address hope in those who are unable or too young to speak or write, do speak foreign language, or confused or unconscious patients.

5. Conclusion

Despite a considerable attention to the concept of hope, there is no consensus on the definition of hope. Further refinement and clarification of the concept of hope is required within the discipline of nursing and

across other contexts. This in turn will improve nursing practice through providing nurses who deal with patients suffering from chronic illnesses and their families with better understanding of the concept of hope and helping them to design strategies to inspire and empower hope across the life span for Nursing Knowledge, Practice and Research.

6. Implications for Nursing Knowledge, Practice, and Research

Further research and literature review is needed for additional refinement and clarification of the concept of hope within the discipline of nursing and across other contexts. Particularly, this will improve nursing practice through providing nurses who deal with patients suffering from chronic illnesses and their families with better understanding of the concept of hope and helping them to design strategies to inspire and empower hope across the life span. Moreover, future studies are recommended to enhance the measurement and operationalization of the concept of hope in people with different age groups and from different cultural perspectives.

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