Caring knowledge and informed moral passion

This article is based on an invited challenge address at the 1989 National Doctoral Forum related to future directions for substantive knowledge development. The focus is on the inclusion of caring knowledge into nursing's metaparadigm. Art and metaphor are used to make a case for caring knowledge and caring ontology as a metaphorical landscape for diverse epistemological "set pieces," all converging on a Common Room of caring knowledge within a broader human and natural landscape. Such a framework links ontology and epistemology as both substance and form, and allows matter and spirit to be of a piece, but distinguishable; human caring knowledge then becomes Annie Dillard's "Absolute base" and "Holy the Firm."

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FUTURE DIRECTIONS FOR CARING KNOWLEDGE DEVELOPMENT

In Margaret Mead's reflective book, Blackberry Winter, the author ponders a paper that her first husband Luther had written. As demonstrated in the following excerpt, the paper contains a metaphor relevant to the issue of caring knowledge and nursing science.

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This article is based on the Challenge Address given at the 1989 National Forum on Doctoral Education in Nursing, Indianapolis, Indiana, June 7–9, 1989. The author thanks Douglas Watson for his assistance with literary metaphors and Diane Lenfest for her assistance with references and preparation of this article. Special permission for quotations has been granted from the following sources: Blackberry Winter, by Margaret Mead, copyright 1972, by Margaret Mead. Reprinted by permission of William Morrow & Company, Inc.; Holy the Firm, by Annie Dillard, copyright 1977, excerpt reprinted by permission of Harper & Row, Publishers, Inc.; and adaptation of Upward Causation Model of Science, by Willis Harman, reprinted from Noetic Sciences Review, courtesy of The Institute of Noetic Sciences, Sausalito, California, copyright 1987, all rights reserved.

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Perhaps I can best illustrate the meaning of my thoughts by going back to Oppenheimer's felicitous metaphor of the house called "science." I would like to see us build a NEW room in that vast and rambling structure. This room, like the others, would have no door and over the entrance would be the words, THOUGHT, REFLECTION, CONTEMPLATION. It would have no tables with instruments, no whirring machinery. There would be no sound except the soft murmur of words carrying the thought of men [and women] in the room. It would be a Commons Room to which men [and women] would drift in from those rooms marked geology, anthropology, taxonomy, technology, biology, paleontology, logic, mathematics, psychology, linguistics, and many others. Indeed, from without the walls of the House would come poets and artists. All these would drop in and linger. This room would have great windows; the vistas our studies have opened. Men [and women] singly or together would from time to time walk to those windows to gaze out on the landscape beyond. This landscape in all its beauty, sometimes gentle, sometimes terrible, cannot be seen fully by any one of the occupants of the room. Indeed, it cannot be known fully by a whole generation of men [and women]. Explorers of each generation travel into its unknown recesses and, with luck, return to share their discoveries with us. So the life of the NEW room would go on—thought, reflection, contemplation—as the explorers bring back their discoveries to share with the room's occupants. This landscape that we gaze on and try to understand is an epic portion of the human experience.¹

This metaphoric introduction sets an appropriate stage for nursing science, now into its fourth generation of knowledge development, or into what Stevenson² calls era II. As we continue to question what room we will build for caring knowledge, we challenge ourselves with how we will furnish this room. What sounds or noise will fill the space for current and future generations of nurse scientists?

In framing some of the key issues about future directions for knowledge of caring, let us be reminded that the boundaries, furnishings, and set pieces for the rooms that we propose have the power, as do science and doctoral education, to establish the nature and standards of reality, to fashion how we see. We must be careful with the choices we make.

Commons room vs "set pieces"

In developing caring knowledge for nursing science, perhaps we can create a commons room. Commons room features that are explicitly included in contemporary nursing knowledge are concepts of person, health, environment, and nursing. Thus a commons room epistemology is beginning to emerge for nursing science.

However, what is not generally addressed with nursing science knowledge and what needs more attention is a commons room ontology of caring in relation to person, environment, health, and nursing. Moreover, we must ask whether there is a metaphoric landscape connection between the ontology of caring and the epistemological rooms that we may propose for nursing science. In addition, we need to ask what kind of door or entrance there is for the rooms of nursing and caring knowledge. Would those currently outside the walls—for example, artists, poets, and musicians—be able to enter, linger, and assist with opening the windows onto the landscape? Is the landscape natural or artificial? Are horizons of landscape defined, or is the landscape continuous with the universe?
Perhaps we can metaphorically anchor the epistemological house, room, and furnishings to the ontological caring landscape. But first let us consider the commons room against different rooms or set pieces within the rooms. In drama and literature, the "set piece" provides each of the scenes with little plays within the novel.

Different views of the world generally result in different uses of set pieces. For example, the English novel makes great use of the technical set piece; it encloses the world, takes care of everything, and sees that everything is controlled and wrapped up into a neat package (including human conditions such as birth, death, marriage, and so forth). In Russian novels the drawing room serves as the technical set piece; however, the Russian novel uses the set piece to expand, to transcend, to free. In contrast to the enclosing set piece of the English novel, the Russian novel's set piece opens to the landscape: it looks out into the world and the universe.

In a metaphoric sense, English novels are about time, and Russian novels are about space. The former are fixed in time and space, the latter depict human processes as transcending time and space and as being continuous with nature and the larger universe. Both convey different metaphysical assumptions about human nature and ontologies of being.

The following quotes vividly illustrate these differences. The English novel Vanity Fair makes the point for Rebecca Sharp's world:

The catastrophe came, and she was brought to the mall as to her home. The rigid formality of the place suffocated her; the prayers and the meals, the lessons, and the walks which were arranged with a conventual regularity oppressed her almost beyond endurance; and she looked back to the freedom and the beggary of the old studio in Soho with so much regret.

The Russian short story "Streams Where Trout Play" makes the contrasting point:

The marshall spent two days in the forester's house. We shall not speak about love, because to this day we do not know what it is. Perhaps it is the thick snow falling all night, or the wintry streams where trout play. Or perhaps it is laughter and singing and the smell of old pitch just before dawn when the candles burn down and the stars press against the window pane. ... Who knows?... how at times life becomes like music?

In considering nursing knowledge development in general and knowledge of caring in particular, it is tempting to avoid differences in ontologic and epistemic landscape assumptions about what constitutes knowledge, how knowledge is created, and what the ultimate aims of science and knowledge are.

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It is tempting to avoid differences in ontologic and epistemic landscape assumptions about what constitutes knowledge, how knowledge is created, and what the ultimate aims of science and knowledge are. What, indeed, is substance and what is substantive knowledge? Is it restricting or liberating, enclosing or expanding? Is our epistemology (or are our rooms of science) linked to an ontological landscape, or is it (or are they) disconnected and distinctly separate?

Clarifying the assumptions

In spite of a backdrop of several eras of nursing science and development of nursing
knowledge, it has been recently acknowledged that "approaches to knowledge development show an alarming absence of theoretical [and philosophical] consistency and relevance, and nursing theory displays wide divergence." Allen 7 pointed out that there are several emerging and at times competing (or possibly incompatible) ideas about what kind of science or knowledge development nursing should consider. He highlighted the dominant analytic-empirical, the phenomenological-interpretive, and the critical social theory, emphasizing such concerns as understanding, free discourse, critical reflection, argumentation, and ultimate emancipation and liberation of the evolving human mind and spirit. Others, including this author, raise issues associated with the moral, the aesthetic, the relational, the spiritual, and the transcendent aspects of person, environment, caring, healing, and health.

Stevensorf indicated that since we are in the era II of knowledge development (the first being dedicated to the educational preparation of nurse scholars for attainment of doctoral degrees, supporting research, etc), nursing will now be more concerned with knowledge per se, foci for knowledge development agenda, and new methods that overcome the Cartesian tradition of parts. Meleis,8 however, pointed out that we need to go beyond the debate of holism and particularism in relation to knowledge development and method: and we must instead refocus debate on substance, on personal commitment to the phenomena of health care in general, and on the discipline of nursing in particular. Furthermore Meleis recommends revising our passion for methodology, for science, and for philosophy. "Let us have a similar passion for substance, for the business of nursing. A passion for knowledge itself and not how we get the knowledge." 8

But I ask, What is substance? What is knowledge qua caring?

THE CHALLENGE FOR CARING KNOWLEDGE

From "passion for substance" to wide awareness for informed moral passion

I return to Mead's1 concept of a new room for these rambling issues. My room also has thought, reflection, and contemplation over its entrance and has great open windows with a landscape into infinity. The room is set in the midst of an even greater, vaster, more mysterious landscape of nature, human nature, and the wider universe—a universe that is constantly changing and evolving, as is science, as is doctoral education, which we are co-creating at this moment.

In spite of the urgent and appropriate call from Meleis and others for a passion for substance and knowledge itself, we do not and cannot create nursing and caring knowledge in a void. The house, room, and furnishings we create either connect with the metaphoric landscape in a harmonious, human, and natural way, or we artificially, technically contrive the set and decor that is inhospitable and uncomfortable for those who live there, and for visitors, and which may be even more remote for future generations who will occupy the corridors.

My plea is for informed passion, passion that is informed by thought, reflection, and contemplation, giving rise to moral landscapes and contexts of human and nature relational concerns. If not thoughtful, reflec-
tive, and contemplative about our knowledge, we become accomplices in stifling freedom, staying behind. Then knowledge development takes a simplified approach; we reduce humans and caring-healing health processes to problems to diagnose. Problems become laws, and we begin to empower problems as foci for study and external intervention void of the human and natural landscape, which results in purely technical, mechanical nursing interventions.

Perhaps the greatest challenge with knowledge is preserving an absolute value and wisdom while breaking new ground into the metaphoric landscape. Greene’s expansive book *Landscapes of Learning* has much relevance to the issues and questions nursing continues to ponder and to pursue as an evolving scientific discipline. Greene challenges us to develop “wide-awareness,” to become in touch with our human landscape as educators and scientists; to seek paradigm-shattering, emancipatory, self-reflective processes; to engage in futuring, going beyond to what is not yet but might be. Freire calls for critical consciousness to acknowledge the void, to liberate and free the mind to reflect and to imagine how things might be.

The wide awareness Greene advocates, consistent with the author’s thinking, calls for aesthetic, moral, intellectual, and reflective encounters that disturb as well as confuse, that promote experiences and questions with an emancipatory, rather than a restrictive, function. As Pierre in Tolstoy’s *War and Peace* confessed, most people study and become enlightened, but he studied and became confused. Greene states that even committed rationality rests on the capacity for self-reflection in a wide-aware landscape. Wide awareness of our moral, ontological landscape informs the passion and the perceptions and frames the questions about substance, knowledge, and reality. If knowledge is void of informed passion, it can be used for domination, for manipulation, for control, for power, for fixing the vision for the next generation on a reality others have already predefined.

Nonawareness leads to only one path for knowledge; a formula approach to people; objectifying, codifying, and reifying human experiences with “official” knowledge that takes on a life of its own—a life that is separate, decontextualized, rather than connected. Again, Tolstoy’s approach is simple. There is nothing complicated about his syntax or message. By contrast, Jane Austen’s work captures her society’s restrictiveness in a style that is beautiful but regulated, like a fine watch. If our aim for caring knowledge in nursing is higher than achieving machine-like knowledge, if our aim is to express and to reflect life and life forces, it is not enough to be technically correct. Much of nursing contains caring knowledge that enriches the soul, that connects with the landscape. How does any one way to knowledge development exemplify the wonder of humanity and human caring processes of nursing?

Thus, knowledge structures of all sorts ought to be considered for their diverse expressions in relation to various communi-
ties of scholars and in terms of various commitments. Each perspective and each subject matter must be considered in relation to the human interest that gave rise to it—to the question it was invented to solve, in this instance, to human caring and to the human spirit in relation to healing, health, and illness experiences. According to conversations with N. Noddings (1990) and J. Quinn (1990), Fig 1 outlines the pressing epistemological, ontological, praxis, and methodologic structure that helps to organize the development of nursing’s full range of knowledge.

Chinn reminds us that “when we begin to cease all forms of erosion of the human spirit, compassion, and caring and find approaches that yield not only knowledge, but also substantive [wide-awareness] wisdom, we will be on the path to healing the great wounds of our present social and health care system.”

Opening the windows and doors:
Surveying the landscape

The human-science, human-caring lens proposed here is more like that of the Russian novels and seeks wide awareness, even if we do not have all the answers, even if we do not always know what to say or how to say it, even if what we say disturbs and confuses. If we deal with human relational processes, the human wholeness of mindbodyspirit, and evolving human consciousness that is continuous with nature and the universe, we

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| Praxis                | Caring Practices                              |                                                |
| (Application of       | • New Caring Modalities                       |                                                |
| Learning to Practice  | • Practice of Knowing and Being               |                                                |
| – Study of Practice)  | • and Doing in Caring Relationship             |                                                |
| “Informed Passion”    | • Natural Healing Modalities                  |                                                |
| Methodology           | Human Science Method                          |                                                |
| (Nature of Study –    | • Qualitative – Art and Science               |                                                |
| The Way One Pursues   | • Combination of New Methods of               |                                                |
| Knowledge)            | Inquiry                                       |                                                |
|                       | • Quest for New Contextual Methodologies       |                                                |

Fig 1. Four dimensions affecting advancement of the art and science of human caring. Adapted with permission from Watson J. Academic and clinical collaboration: Advancing the art and science of human caring. *Commun Nurs Res.* 1987;20:11.
have to become part of the processes. We must be willing to enter into them, and we have no choice but wide awareness and informed passion.

Like Tolstoy’s characters, we may start to speak and not finish our sentences because it is now openly acknowledged that all knowledge development is a distinctively human endeavor, not a technical activity. All knowledge is contextual, emotional, subjective, intersubjective, rational, passionate, controlled, evolving, and so forth. Thus our technocratic knowledge is not the same as our lived human experiences and life processes.

In a knowledge-building sense, caring in nursing requires informed moral action, informed passion, which incorporates this changing, natural, and technical human-made landscape. Nursing’s knowledge of caring needs open windows and doors that will create harmonious and aesthetic decor and sounds—an ontological relational structure that clings to a distinct moral, passionate, and substantive position that adamantly resists reducing person to the moral status of object.

HUMAN SCIENCE AND HUMAN CARING AS SUBSTANCE

In integrating caring into our knowledge development to date, it is becoming increasingly obvious that caring is the foundational ontological substance of nursing and underpins nursing’s epistemology. However, human caring needs to be explicitly incorporated into nursing’s metaparadigm. Furthermore, specific theories of caring in relation to specific human conditions and specific health-illness experiences with identified populations calls for both micropsychoimmune-system-level and macroglobal-level approaches. Approaches to knowledge that preserve human caring as the interface between technologic and biobehavioral sciences and ecosystems need urgent research. Finally, differing epistemological perspectives can still allow for diverse set pieces for organizing caring knowledge, for example, use of carative factors, use of cultural-care concepts, and considerable use of human-environment energy patterns, all possible classifications of human caring during transpersonal caring occasions. All of these approaches to knowledge development include human caring as substance within a metaphysical and ontological landscape.

To develop nursing knowledge that incorporates human caring within its metaparadigm, the most fundamental wide-awake landscape question is how we view person and caring. Walker suggests that we “start with nursing’s most pervasive phenomenon of concern—people.” To address the nature of being human calls for expanded views of person and phenomena.

Other considerations are whether being a nurse in a caring transaction is a special way of being-in-relation; whether we view caring as an inherent value; whether nursing and caring are means to some broader end; or whether caring can be both a means and an end. Should we acknowledge moral ideals associated with caring in nursing practice as the highest form of commitment to person and society?

Stevenson noted that after 40 years of struggle, a consensus is developing about the nature of nursing knowledge, its philosophic and ethical bases, its content foci, and even the processes necessary to produce and to disseminate its knowledge. It is not clear
whether such a view is accurate. However, once the issues are reframed into foundational assumptions that are central to knowledge development, once anomalies become evident, once we unveil underlying or implied epistemological assumptions and ontologies in our views of person and being and caring, we may more easily inform our passions. Our informed moral passion and caring ontology, in turn, becomes our substance.

Pulitzer prize-winning contemporary author Annie Dillard helps us to understand this issue and this quest for substance in her book *Holy the Firm*:

I... posit a substance. It is a created substance, lower than metals and minerals on a "spiritual scale," and lower than salts and earths, occurring beneath salts and earths in the waxy deepness of planets, but never on the surface of planets where men could discern it; and it is in touch with the Absolute, at base. In touch with the Absolute! At base. The name of this substance is: Holy the Firm.

Holy the Firm: and is Holy the Firm in touch with metals and minerals? With salts and earths? Of course, and straight on up, till "up" ends by curving back... But if Holy the Firm is "underneath salts," if Holy the Firm is matter at its dullest, Aristotle's materia prima, absolute zero, and since Holy the Firm is in touch with the Absolute at base, then the circle is unbroken. ... Thought advances, and the world creates itself, by the gradual positing of, and belief in, a series of bright ideas. Time and space are in touch with the Absolute at base. Eternity sockets twice into time and space curves, bound and bound by idea. Matter and spirit are of a piece but distinguishable.27

The extended, upward-looking model of knowledge development can more fully and uniquely provide meaningful philosophic, ontological, and epistemological foundations for caring knowledge in nursing (Fig 2).2 Fig 2 helps to provide the full range of Dillard's57 holy-the-firm, absolute-at-base landscape of human caring knowledge while still allowing movement upward and downward. Holy the Firm and the Upward Causation Model of Science can help us harmonize the whole and create an expansive landscape upon which to build our structures. Through them we can pursue wide awareness for informed passion for substantive knowledge and for knowledge of human caring, healing, and health as a consciousness context wherein the human spirit is open to multiple

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![Diagram](image-url)  
**Fig 2.** "Holy the Firm," an upward causation model of science: "Absolute at Base; Matter and Spirit are of a piece but distinguished" (Dillard, 1977). Adapted with permission from Harman W. Upward causation model of science. *Noetic Sci Rev.* 1987;4:23.
ways of being, knowing, and doing.

The future landscape that advances toward us bears little resemblance to what we have known before. Process, transcendence, transformation, emergence, patterns of relationships, relativity of space and time, nonphysical phenomena, fluid, energy fields all have implications for a new room of nursing science—as we now seek new knowledge for new reasons. As we more consciously choose informed moral passion and a relational caring ontology as context, as we seek to entwine ourselves into the human health, healing, caring landscape, we need Greene’s wide awareness and Dillard’s Holy the Firm. These call for paradigm-shattering approaches for the set, the furnishings. We need windows and doors that embrace the humanity and the relational life processes of patients and nurses and ecology as part of the vast metaphysical landscape that is continuous with the universe into infinity: a landscape that is sometimes gentle, sometimes terrible, sometimes confusing. Let caring knowledge in nursing guide us into the freshness of this expanded landscape with an informed moral passion that leads to wide awareness for this absolute substance at base.

REFERENCES


