



Indonesian Nursing Values from the Lens of Theory of Communion-in-Caring: A Future Invitation to an International Caring Dialogue and Collaboration

Cyrus P. Tuppal^{*1} , Arif Adi Setiawan² 

¹Faculty of Nursing, MAPUA Malayan Colleges Laguna, Philippines

²Doctor of Philosophy in Nursing Science, St. Paul University Philippines System, Tuguegarao City, Philippines



Corresponding author: drcyrus@gmail.com

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ABSTRACT

Indonesian nursing holds a rich heritage that dates back centuries. Indonesian nurses have embraced a holistic approach to care, recognizing the interconnectedness of physical, emotional, and spiritual well-being. This holistic perspective is deeply ingrained in our nursing values and informs our practice. This paper examines the pragmatic utility of the emerging Theory of Communion-in-Caring (TCIC), which invites Indonesian nurses to a caring dialogue for the theory's future advancement. In caring, communion refers to a deep and meaningful connection between individuals. It goes beyond superficial interactions and involves a genuine exchange of thoughts, emotions, and experiences. Communion is characterized by open-mindedness, vulnerability, and a willingness to truly engage with others. TCIC is an essential theory that can enhance and promote Indonesian caring values. By embracing this theory, individuals, particularly in the nursing profession, can foster stronger relationships with patients and others, thereby contributing to Indonesia's more compassionate and united society. Through these connections, healthcare professionals can embody the values of "gotong royong" (mutual assistance) and "silaturahmi" (building strong relationships), both of which are key to Indonesian culture.

Keywords: Indonesian Nursing, Nursing As Caring, Theory of Communion-in-Caring

1. Introduction

Indonesian nursing holds a rich heritage that dates back centuries (Gede Juanamasta et al., 2021). As a profession dedicated to caring for the sick and promoting health, nursing plays a vital role in the overall healthcare system. The history of Indonesian nursing can be traced back to the Dutch colonial era (Gouda, 2008). During this time, the Dutch established healthcare facilities in the archipelago and introduced modern nursing practices. One of the earliest pioneers was Raden Ayu Kartini, an Indonesian noblewoman who advocated for women's education and healthcare. Her efforts laid the foundation for nursing education in Indonesia (Gouda, 2008). Another notable pioneer is Martha Christina Tiahahu, the first Indonesian nurse to graduate from a Dutch nursing school (Seo, 2014). She dedicated her life to improving healthcare for indigenous Indonesians and played a crucial role in shaping the nursing profession in the country. These early pioneers paved the way for future generations of Indonesian nurses.

Over the years, Indonesian nursing has achieved significant milestones. In 1952, the Indonesian Nurses Association was established, providing a platform for nurses to collaborate, share knowledge, and advocate for their rights. This turning point brought together nurses from different backgrounds to work towards a common goal. In 1978, the first national nursing conference was held, highlighting the need for improved healthcare services and nursing education in Indonesia (Hennessy et al., 2006). This conference led to the development of standardized nursing curricula and the establishment of nursing schools nationwide. These milestones have played a crucial role in shaping the nursing profession and ensuring the delivery of quality healthcare services to the Indonesian population. The future of Indonesian nursing is promising. With advancements in healthcare technology and an increased focus on preventive care, there will be a growing demand for well-trained nurses. The Indonesian government has recognized the importance of investing in nursing education and has implemented initiatives to attract more students to the nursing profession (Efendi et al., 2022; Ferry et al., 2018).

Nursing values play a crucial role in shaping the care we provide for our patients. They serve as a moral compass, guiding us in making ethical decisions and ensuring our actions align with our patient's best interests. Indonesian nursing values emphasize the importance of respect, compassion, integrity, and cultural sensitivity in our interactions with patients and their families. These values enhance the quality of care we deliver and foster a sense of trust and connection between nurses and patients. The foundation of Nursing values plays a crucial role in shaping the care we provide to our patients. They serve as a moral compass, guiding us in making ethical decisions and ensuring our actions align with our patient's best interests. These values enhance the quality of care we deliver and foster a sense of trust and connection between nurses and patients. The foundations of Indonesian nursing values can be traced back to the country's early days of nursing education (Barber et al., 2007).

Nursing schools in Indonesia were created to train skilled and compassionate nurses to meet the population's healthcare needs. These schools focused on clinical skills and teaching important values like empathy, kindness, and commitment to the profession. Over time, nursing values in Indonesia have been shaped by cultural traditions, religious beliefs, and changes in healthcare. Indonesian nurses practice a holistic approach, recognizing the connection between physical, emotional, and spiritual health. Critical values in Indonesian nursing include respect, compassion, integrity, and cultural sensitivity. Over the years, the development of nursing values in Indonesia has been influenced by various factors, including cultural traditions, religious beliefs, and the evolving healthcare landscape. Indonesian nurses have embraced a holistic approach to care, recognizing the interconnectedness of physical, emotional, and spiritual well-being. This holistic perspective is deeply ingrained in our nursing values and informs our practice. Indonesian nursing values are centered around several core principles that guide our practice. These principles include respect (in bahasa *Rasa Hormat*), compassion (in bahasa *Kasih Sayang*), integrity (in bahasa *Integritas*), and cultural sensitivity (in bahasa *Kepekaan Budaya*).

Indonesian nursing values are not merely abstract concepts; they have a tangible impact on the care we provide to our patients. By incorporating these values into our practice, we create a nurturing and supportive environment for our patients, enabling them to heal and recover more effectively. Our values also guide us in making decisions that prioritize our patients' well-being and best interests, even in challenging situations. Adherence to Indonesian nursing values has a profound impact on healthcare outcomes. When patients feel respected, valued, and understood, they are more likely to participate in their care and follow treatment plans actively. This, in turn, leads to better treatment adherence and improved health outcomes. Additionally, Indonesian nurses' compassionate and holistic care contributes to the overall satisfaction of patients and their families, creating a positive healthcare experience.

While Indonesian nursing values are deeply ingrained in our profession, we face challenges in upholding them. The ever-changing healthcare landscape and resource constraints can sometimes create obstacles in providing the level of care we aspire to. However, these challenges also present opportunities for growth and innovation. By collaborating with healthcare leaders, policymakers, and educators, we can overcome these challenges and find creative solutions that preserve and promote nursing values. The article explores how the Theory of Communion-in-Caring (TCIC) can be applied to Indonesian nursing values to foster more profound, meaningful relationships in healthcare settings. The article highlights how TCIC, which emphasizes genuine human connections and communal support, aligns with Indonesia's cultural values, such as respect, compassion, and family-oriented care.

Through the lens of TCIC, the article encourages Indonesian nurses to engage in a caring dialogue and collaboration, advancing the theory's principles to enhance nursing practices in Indonesia. It emphasizes the importance of integrating patients' emotional, physical, and spiritual well-being, recognizing that a holistic approach to care rooted in cultural values can lead to better patient outcomes. Additionally, the article invites

international collaboration to develop this theory further and share global insights, improving nursing practices and patient care worldwide.

2. Methods

This paper employs a comprehensive literature review methodology to examine the pragmatic utility of the Theory of Communion-in-Caring (TCIC) within the context of Indonesian nursing values. The purpose of this method is to understand how the core principles of TCIC can be meaningfully integrated into the practice of nursing in Indonesia while also exploring how these principles align with and can further enhance the cultural values that shape the nursing profession in the country. The literature review draws from a diverse range of sources, including academic articles, books, reports, and case studies that cover both international perspectives on the theory as well as Indonesia-specific nursing practices and cultural values.

3. Results

Communion, in the context of caring, refers to a deep and meaningful connection between individuals. It goes beyond superficial interactions and involves a genuine exchange of thoughts, emotions, and experiences. Communion is characterized by open-mindedness, vulnerability, and a willingness to engage with others truly (Tuppall et al., 2021). In communion, individuals are fully present and attentive to each other, creating an environment of trust and understanding. It involves active listening, empathetic responses, and an acknowledgement of the other person's unique perspective. When we engage in communion, we prioritize the well-being of others, fostering a sense of belonging and connectedness. To truly understand the concept of communion, we must recognize that it is not limited to personal relationships but can also be applied to professional contexts. Various philosophical and caring theories guided the development of the TCCIC, namely, the Theory of Nursing As Caring by Anne Boykin and Savina Schoenhofer (Boykin & Schoenhofer, 2001), Jean Watson's Theory of Human Caring (Watson, 1997a), Madeleine Leininger's Theory of Culture Care Diversity and Universality is a nursing theory that focuses on the integration of cultural values and practices in healthcare, *Katie Eriksson's caring communion* (Eriksson, 1989; Eriksson, 2002), Sister Simone Roach's philosophy of caring (Roach, 1997; Roach, 1998) and Gabriel Marcel's philosophy of communion (Murchland, 1959).

3.1. Theoretical Assumptions

Theoretical assumptions are foundational beliefs that guide our thinking and decision-making processes. They provide a framework for understanding the world and help to make sense of complex phenomena. By examining the role of assumptions in different disciplines, we can gain a deeper understanding of how knowledge is constructed and expanded. Join us as we delve into the intriguing realm of theoretical assumptions and discover their impact on the world around us. The TCIC has the following assumptions:

Caring is inherent to all persons (p. 8). The theory posits that caring is an innate human quality, mirroring the Indonesian principles of *Guyub Rukun* and *Gotong Royong*. This cultural value emphasizes shared responsibility and cooperative action, fostering communal support for needy individuals. Within this framework, nurses become facilitators of shared care, collaborating with families, communities, and other healthcare professionals.

Siti, a compassionate young nurse, diligently cares for Budi, an elderly patient recovering from surgery. Siti's actions exemplify the essence of caring in Indonesian nursing practice throughout her shift. She patiently listens to Budi's concerns, addressing them with respect and empathy, reflecting the cultural value of *santun* (courtesy and politeness)

She meticulously follows the doctor's orders while incorporating traditional practices Budi finds comforting, demonstrating "gotong royong" (communal spirit and mutual assistance). Recognizing the importance of family in Indonesian culture, Siti encourages Budi's daughter to participate in his care, fostering a sense of *kekeluargaan* (togetherness and family). As Siti bids farewell to Budi at the end of her shift, a genuine smile on his face and a grateful utterance of "terima kasih" (thank you) solidify her understanding of caring as a fundamental aspect of her role, transcending technical skills.

Siti's actions embody the core values instilled in Indonesian nurses. *Kasih Sayang* (love and affection) underpins her patient interactions, which is evident in her attentiveness and genuine concern. Her *tepat waktu* (punctuality) and adherence to protocols demonstrate *disiplin* (discipline), crucial aspects of professional care. By respecting Budi's cultural beliefs and incorporating them into his care plan, Siti upholds the value of "kearifan lokal" (local wisdom).

Persons are relational beings (p. 8). Recognizing individuals as fundamentally relational aligns perfectly with *silaturahmi*, which emphasizes maintaining and strengthening social ties in Indonesian culture. The theory's focus on building genuine connections resonates with this value, transforming nurses from mere caregivers into trusted companions on the healing journey.

Patient: Ibu Sari, a 65-year-old woman from a rural village, huddles beneath a thin sheet on a hospital bed. She appears frail and withdrawn, clutching a worn photograph of her grandchildren. Ibu Sari was admitted for uncontrolled diabetes and has a history of social isolation since her husband's passing.

Nurse: Perawat Intan, a young, compassionate nurse, approaches Ibu Sari's bedside with a gentle smile. Recognizing the cultural significance of family in Indonesian society, Perawat Intan begins by addressing Ibu Sari with respect, using the honorific title "Ibu" (mother).

Perawat Intan: *Selamat pagi, Ibu Sari. Apa kabar hari ini?* (Good morning, Ibu Sari. How are you feeling today?)

Ibu Sari manages a weak smile, her eyes welling up. She speaks softly, revealing her worries about being away from her family and the unfamiliar hospital environment.

Perawat Intan: ***Ibu, saya mengerti perasaan Ibu. Pasti sulit berada jauh dari keluarga. Tapi, Ibu tidak sendiri disini. Kami para perawat akan membantu dan merawat Ibu sebaik mungkin.*** (I understand, Ibu. It must be difficult being away from your family. But you are not alone here. We, the nurses, will help and care for you as best we can.)

Perawat Intan listens attentively to Ibu Sari's concerns, fostering a sense of trust and open communication. She explains medical procedures in clear, culturally sensitive language, incorporating traditional remedies and practices familiar to Ibu Sari whenever possible.

Beyond physical care, **Perawat Intan** acknowledges the emotional and spiritual aspects of Ibu Sari's well-being. She facilitates video calls with her grandchildren, creating a sense of connection and comfort. Perawat Intan also encourages prayer and visits from the hospital chaplain, respecting Ibu Sari's spiritual beliefs.

Perawat Intan's relational approach to care improves Ibu Sari's health and uplifts her emotional state. She feels a sense of belonging and cultural connection within the hospital setting. Upon discharge, Ibu Sari expresses her gratitude to Perawat Intan, highlighting her care's positive impact beyond medical procedures.

Communion is a way of being that enriches and sustains moral sensitivity towards person (p. 8): Communion-in-caring promotes **kemanusiaan**, compassion, and respect for human dignity. This echoes the theory's emphasis on developing moral sensitivity toward people, guiding nurses to approach everyone with empathy and ethical consideration and recognizing their unique needs and experiences.

Mr. Budi Setiawan, a 70-year-old Javanese man, recently diagnosed with terminal lung cancer. He was admitted to the hospital for pain management and supportive care. Mr. Setiawan is a devout Muslim who prioritizes family and community. He expresses fear and anxiety about leaving his loved ones behind.

Mr. Setiawan's nurse, Siti Nurhaliza, adheres to the core values of Indonesian nursing, which emphasize wholeness, interconnectedness, and spiritual well-being. Recognizing the centrality of communion (*in Bahasa kebersamaan*) in Javanese culture, Siti fosters a relationship built on mutual respect and understanding. She incorporates silence and non-verbal communication alongside verbal cues, acknowledging the importance of unspoken emotions in Javanese expression.

Communion-in-caring professes oneness in belonging-being-becoming where the mind, heart, and soul meet (p. 8): The concept of "belonging-being-becoming" reflects the Indonesian value of **kebersamaan**,

emphasizing unity and togetherness. This holistic approach acknowledges the interconnectedness of physical, emotional, and spiritual well-being, aligning with the traditional Indonesian understanding of health.

Susana enters Ibu Sari's room. Her footsteps softened by the cushioned floor. She approaches the bedside with a gentle smile and a soft greeting in Bahasa Indonesia, her voice laced with respect. Ibu Sari's eyes flutter open, and a flicker of recognition crosses her face.

Susana checks Ibu Sari's vitals, and her movements are efficient yet gentle. As she works, she inquires about Ibu Sari's well-being, not just her physical condition but also her emotional and spiritual state. She listens attentively as Ibu Sari shares her worries about her family and her fear of the unknown. Susana acknowledges Ibu Sari's emotions, offering words of comfort and support. She speaks of "gotong royong," the Indonesian spirit of communal cooperation, and assures Ibu Sari that she is not alone. She explains that the medical team and her family work together to ensure her recovery.

Susana then shares a passage from the Bhagavad Gita, a sacred Hindu text about the interconnectedness of all beings. Drawing on the concept of **welas asih** (compassionate understanding), she explains that true healing involves physical restoration and nurturing the mind, heart, and soul.

Ibu Sari's eyes well up with tears, not sadness but gratitude. She feels a profound connection with Susana, a connection that transcends the boundaries of illness and healthcare. In that moment, they experience a "communion-in-caring," a deep sense of oneness where mind, heart, and soul meet, woven together by the threads of compassion, respect, and shared humanity.

Love, hope, faith, and charity are foundational acts—motives of caring (p. 8) The emphasis on love, hope, faith, and charity as core motivators mirrors the Indonesian value of **keikhlasan**, which emphasizes sincerity and selflessness. Nurses, driven by genuine care and compassion, go beyond task-oriented actions to foster deeper connections and trust with patients, embodying this vital cultural value.

Ibu Sari, a seasoned nurse in a bustling Jakarta hospital, adjusted the batik cloth draped over her patient, Pak Budi. He was a weathered farmer admitted with a chronic illness that left him feeling drained and hopeless. Ibu Sari knew her job was not just about administering medication but about nurturing the spirit.

With a gentle smile, Ibu Sari began speaking in her soft, calming Javanese dialect. She shared stories of her grandmother, a pillar of strength, who used to care for the sick in their village. Ibu Sari spoke of the **cinta kasih** (love) her grandmother embodied, the unwavering belief in **harapan** (hope) for healing, the deep **iman** (faith) in God's grace, and the **kedermawanan** (charity) she showed to all in need.

Pak Budi, initially withdrawn, listened intently. He saw in Ibu Sari a reflection of his grandmother, who had instilled similar values in him. Ibu Sari then explained his treatment plan, using clear, simple language, and encouraged him to ask questions. She spoke of the **gotong royong** (communal spirit) in their shared fight against his illness, a concept he deeply resonated with.

Days turned into weeks. Pak Budi, nurtured by Ibu Sari's care and guided by her words, slowly regained his strength. He began participating in physiotherapy, a flicker of hope returning to his eyes. He spoke of his family, his grandchildren, the life he longed to return to. Ibu Sari, filled with her sense of **kepuasan** (satisfaction) from witnessing his progress, celebrated his small victories and offered unwavering support.

On the day of his discharge, Pak Budi, with newfound vigor, thanked Ibu Sari, his voice thick with emotion. He presented her with a piece of batik cloth, its intricate patterns symbolizing the tapestry of their connection. It was a gift imbued with gratitude, a tangible reminder of the love, hope, faith, and caring that had woven together his path to recovery.

Ibu Sari received the gift with a tear in her eye, humbled by the impact of her actions. As Pak Budi walked out of the hospital, she knew that the values embedded in Indonesian nursing, like threads in the batik, were not just principles on paper but the very essence of caring, making a difference one patient, one story at a time.

Communion-in-caring epitomizes the practice of nursing, the phenomenon of caring, and perspicuity in human conditions (p. 8): The theory's focus on the "meaning-essence of caring" resonates with **solidaritas**, highlighting the importance of togetherness and collective wellbeing. Indonesian culture emphasizes community support and shared responsibility, which translates into nurses collaborating with families, communities, and traditional healers to ensure holistic care beyond individual intervention. The theory aims to achieve perspicuity in human conditions. This resonates with **kearifan lokal**, valuing local wisdom and traditional knowledge. By understanding local beliefs and practices, nurses can navigate complex situations with cultural sensitivity, fostering mutual trust and respect within the healing process.

Ibu Nita enters Pak Budi's room, her gentle smile and soft voice immediately calming the anxious atmosphere. She notices the worry on his face and the tears glistening in his eyes. Instead of rushing into clinical tasks, Ibu Nita sits beside him, offering him a warm cup of ginger tea, a traditional Indonesian remedy for comfort and well-being.

As Pak Budi sips the tea, Ibu Nita engages in a heartfelt conversation. She speaks as a medical professional and a fellow human being. She listens patiently as Pak Budi expresses his fears and anxieties about his illness, his concerns for his family, and his longing for his village home. As the conversation unfolds, a sense of calm washes over Pak Budi. He feels seen, heard, and understood. He shares stories of his village life, his family, and his hopes for the future—a glimmer of peace returns to his eyes.

Ibu Nita's approach exemplifies the concept of 'Communion-in-Caring.' It goes beyond the technical aspects of nursing care and delves into the profound human connection between the nurse and the patient. By fostering this connection, Ibu Nita provides medical care. She offers comfort, hope, and a sense of shared humanity, deeply resonating with the Indonesian values of compassion, respect, and community.

Communion-in-caring is a soul-felt in-synch connectedness central to a nurtured caring environment, meaning-essence of caring, and cultural dynamics (p. 8): emphasizes a "soul-felt in-synch connectedness," mirroring the Indonesian value of **menyeluruh**, seeking harmony and balance in all aspects of life. This synergy promotes a deeper understanding of the patient's experience, not just medically but also emotionally, spiritually, and culturally, aligning with the holistic view of health in Indonesian tradition.

Pak Budi is a 65-year-old Javanese man who adheres to the Islamic faith. He is anxious about his recovery and feels a deep sense of longing for his family, who live hours away in a rural village. Ibu Maya approaches Pak Budi with a warm greeting in Bahasa Indonesia, acknowledging him respectfully as **Pak** (Mister). She takes his vital signs, but her care extends far beyond technical. She notices his worry and gently inquires about his well-being. (Indonesian cultural value: **Rasa hormat**—respect for elders and those in authority)

Communion-in-Caring: Pak Budi shares his anxieties, and Ibu Maya listens attentively, offering comfort and encouragement. She explains the medical procedures, ensuring he understands his care plan. (Indonesian nursing value: **Kebersamaan**—togetherness and a sense of community)

Meaning-Essence of Caring: Recognizing Pak Budi's cultural and religious background, Ibu Maya incorporates Islamic prayers into his care routine. She finds him a prayer rug and ensures the room is oriented towards Mecca. These small gestures demonstrate her understanding of the importance of faith in his healing process. (Indonesian nursing value: **Spiritualitas**—spirituality and acknowledging the role of religion in well-being)

Cultural Dynamics: Aware of the importance of family in Javanese culture, Ibu Maya facilitates video calls between Pak Budi and his family. She also assists him in writing letters, ensuring he maintains

strong social connections despite the physical distance. (Indonesian cultural value: **Kekeluargaan**—emphasis on family and maintaining strong family ties)

Outcomes: Through her communion-in-caring approach, Ibu Maya fosters a sense of trust and rapport with Pak Budi. He becomes more engaged in his recovery, his anxiety lessens, and his overall well-being improves. He expresses his gratitude for her care, highlighting the significance of cultural sensitivity and a holistic approach to nursing.

Caring is the purest essence of nursing, where communion-in-caring is grounded (p. 8): "Purest essence" implies going beyond technical expertise. This aligns with the Indonesian understanding of health as a multidimensional concept encompassing physical, emotional, and spiritual well-being. It also resonates with the theory's focus on holistically understanding the patient's "lifeworld" and tailoring care accordingly.

The gentle morning sunlight filtered through the woven bamboo walls of the bale, a traditional Balinese pavilion, casting dancing shadows on Ni Wayan, a young nurse, as she knelt beside Ibu Sari, an elderly woman recovering from a debilitating fall. Ni Wayan's voice, soft and melodic like the gamelan music that often filled the village, spoke in Bahasa Indonesia, the national language, but also sprinkled with the gentle lilt of her native Balinese dialect.

Ibu Sari's face, etched with pain and worry, spoke of her fear of burdening her family and her longing to return to the rice fields, a vital part of her life and identity. Ni Wayan listened intently to the words and the more resounding melody of emotions woven into Ibu Sari's voice.

Drawing upon the core values of **gotong royong** (mutual cooperation) and **temen** (deep friendship), Ni Wayan did not just focus on the medical aspects of Ibu Sari's recovery. She gently massaged Ibu Sari's aching limbs, an act of **ngayah**, selfless service deeply ingrained in Balinese culture. She encouraged Ibu Sari to share stories of her life in the rice fields, fostering a "rasa kekeluargaan" (sense of family) and connection that transcended the clinical setting. This "communion-in-caring" was not just about fixing, understanding, respecting, and honoring Ibu Sari's unique life experience.

Ni Wayan, inspired by the **Tri Kaya Parisudha** (three gates of good conduct)—thought, word, and deed—spoke of the healing potential in modern medicine, the strength of Ibu Sari's spirit, and the support of her community. Together, they explored ways to modify Ibu Sari's work in the fields, ensuring her continued contribution while prioritizing her well-being.

Ibu Sari's physical and emotional state improved as days turned into weeks. The once-empty bale became a space of shared laughter, stories, and cultural wisdom. Ni Wayan, guided by the lamp of Indonesian nursing values, provided medical care and nurtured a profound connection, a testament to the enduring power of caring in its purest form.

A relational caring practice makes nursing a distinct, unique, and collaborating discipline with a caring substance and moral probity imbued in all practice domains (p. 8): Nursing's focus on caring and relationship-building sets it apart from other healthcare professions. This resonates with the Indonesian value of **musyawarah**, which emphasizes deliberation and consensus-building. Through open communication and collaborative decision-making, nurses respect individual preferences and cultural perspectives, upholding the uniqueness of each patient's situation.

Mrs. Sari, an elderly woman from a rural village, was recently diagnosed with advanced lung cancer. Fear and confusion cloud her eyes as she struggles to adjust to the unfamiliar hospital environment.

Nurse: Intan, a young nurse with a warm smile and a kind disposition. Raised in a village herself, Intan understands the importance of family and community in Indonesian culture.

The Encounter: Intan enters Mrs. Sari's room and greets her in Bahasa Indonesia, the national language. She gently takes Mrs. Sari's hand, noticing her frail grip and worried expression.

Culturally Sensitive Communication: Intan avoids medical jargon and uses simple terms that Mrs. Sari can understand. She acknowledges Mrs. Sari's cultural beliefs and integrates them into her care plan whenever possible.

Building Trust: Intan listens to Mrs. Sari's concerns and anxieties. She validates her feelings and explains medical procedures clearly and compassionately.

Family-Centered Approach: Recognizing the significance of family in Indonesian culture, Intan includes Mrs. Sari's daughter in conversations and encourages her to participate in her mother's care.

Moral Probity: Intan upholds the highest ethical standards, ensuring Mrs. Sari's privacy, dignity, and autonomy are respected throughout her care.

The Outcome: Intan and Mrs. Sari develop a trusting relationship over time. Mrs. Sari's anxiety lessens as she feels understood and cared for. Her daughter feels empowered to support her mother's well-being.

Lifeworld constitutes the known, knowable, and unknown phenomenon (p. 8). The focus on understanding the individual's "lifeworld" aligns with the values of **Tenggang Rasa**, deliberation, and consensus-building. This encourages nurses to engage in open communication, actively listen to patients' experiences, and tailor care plans collaboratively, respecting individual contexts and cultural nuances.

Patient: Maya, a 35-year-old Indonesian woman, is admitted to the hospital following a car accident. She has sustained a fractured leg and requires surgery. Maya is anxious and worried about her recovery, especially as she is the primary caregiver for her young children and elderly parents.

Lifeworld

Known: Maya's lifeworld is shaped by her strong family values and her sense of responsibility towards them. She takes pride in caring for others and fulfilling her duties.

Knowable: Through culturally sensitive communication, nurses can gain deeper insight into Maya's needs and concerns. This includes exploring her understanding of the illness, preferred communication style, and support systems within the family.

Unknown: Unfamiliar aspects of Maya's lifeworld may include her cultural beliefs and practices related to illness and healing. Additionally, the impact of the accident on family dynamics and coping mechanisms might be unknown.

Indonesian Nursing Values

Kekeluargaan (Family-centeredness): Nurses can acknowledge the importance of family in Maya's life and involve them in her care plan whenever possible. This may involve facilitating communication between Maya and her family or providing support and education to the family members caring for her after discharge.

Gotong Royong (Mutual cooperation): Nurses can collaborate with Maya and her family to develop a care plan that respects her cultural values and preferences. This may involve incorporating traditional healing practices alongside conventional medical treatment if appropriate and safe.

Religiosity: Exploring Maya's religious beliefs and practices can help nurses understand her coping mechanisms and provide spiritual support if needed. This may involve ensuring access to religious services or prayer materials.

By understanding Maya's lifeworld and incorporating Indonesian nursing values, nurses can provide culturally competent care sensitive to her needs and promote her healing process.

Table 1 The TCIC Theoretical Assumptions' alignment with the Indonesian Values

TCIC Theoretical Assumptions	Indonesian Caring Values
Caring is inherent to all persons.	<i>Guyub Rukun</i> <i>Gotong Royong</i> <i>Silaturahmi</i> <i>Kemanusiaan</i>
Persons are relational beings.	
Communion is a way of being that enriches and sustains moral sensitivity towards a person.	
Communion-in-caring professes oneness in belonging-being-becoming where the mind, heart, and soul meet.	<i>Kebersamaan</i>
Love, hope, faith, and charity are foundational acts—motives of caring.	<i>Keikhlasan</i>
Communion-in-caring epitomizes the practice of nursing, the phenomenon of caring, and perspicuity in human conditions.	<i>Solidaritas</i>
Communion-in-caring is a soul-felt in-synch connectedness central to a nurtured caring environment, meaning-essence of caring, and cultural dynamic.	<i>Kearifan Lokal</i>
Caring is the purest essence of nursing, where communion-in-caring is grounded.	<i>Menyeluruh</i>
A relational caring practice makes nursing a distinct, unique, and collaborating discipline with a caring substance and moral probity imbued in all practice domains.	<i>Musyawarah</i>
Lifeworld constitutes the known, knowable, and unknown phenomenon.	<i>Tenggang Rasa</i>

4. Discussion

4.1. Pragmatic Utility of the TCIC

Various strategies and initiatives can be implemented to promote TCIC within the Indonesian nursing community. Education is crucial in fostering a culture of caring from an early age. Integrating lessons on empathy, compassion, and communal responsibility into school curriculums can help instill these values in future generations (Tuppal et al., 2021). Community-based programs and initiatives that encourage active participation and engagement are vital to the promotion of the Theory of Communion-in-Caring (TCIC). These programs can serve as platforms for both healthcare providers and community members to build meaningful, reciprocal relationships that go beyond the clinical setting. By involving patients, families, and local groups in the process of caregiving, these programs align with the TCIC's core values of communion and connection. For example, initiatives that bring together healthcare professionals and community members in collaborative health workshops, support groups, or wellness events can foster trust, understanding, and mutual support.

Additionally, community-based programs can offer nurses and healthcare professionals opportunities to develop culturally sensitive practices by learning about their needs, beliefs, and values directly from the community. As integral members of the community, nurses can actively participate in health promotion efforts, such as public health campaigns, health screenings, or family-centered care activities, emphasizing collective responsibility and the shared duty of care. Furthermore, these initiatives can focus on addressing the social determinants of health, such as access to education, nutrition, and healthcare resources, thereby promoting a more holistic view of health that TCIC advocates. By engaging the community in health-related discussions and encouraging shared responsibility, these programs improve individual health outcomes and contribute to creating a more compassionate, collaborative, and caring society. In the long term, such community-centered initiatives can help normalize the practices of empathy, mutual respect, and collaboration, ultimately embedding the values of TCIC in the cultural fabric of Indonesian healthcare. This proactive approach also ensures that healthcare practices are not just dictated by professionals but are co-created with the active involvement and perspectives of the communities they serve.

4.2. Cultural sensitivity in end-of-life care

Cultural sensitivity is crucial in end-of-life care in today's multicultural and diverse world (Tuppal et al., 2021). The TCIC emphasizes the importance of understanding and respecting different cultural beliefs and practices during this sensitive period. By considering cultural factors, healthcare professionals can create a more inclusive and compassionate environment for patients and their families. By integrating these principles

into their practice, healthcare providers can ensure that individuals from diverse backgrounds receive personalized care sensitive to their cultural needs and values.

A nurse in a palliative care setting demonstrates cultural sensitivity by respecting the religious and cultural beliefs of terminally ill patients and their families. This includes facilitating religious rituals, providing emotional support, and ensuring a peaceful and dignified death.

4.3. *Compassionate care for vulnerable populations*

Providing compassionate care for vulnerable populations is a moral imperative and a fundamental aspect of building a just and equitable society (Watson, 1997b; Watson, 1988). In this article, we delve into the theory of communion-in-caring, which highlights the importance of empathy, connection, and understanding in delivering effective care to those in need (Tuppal et al., 2021). By examining this theory, we can gain valuable insights into best practices and strategies that promote holistic and person-centered care.

A nurse in a remote village provides healthcare services to underserved communities, demonstrating compassion and empathy towards individuals with limited access to healthcare resources. This nurse goes above and beyond to ensure that every individual receives the care they need, regardless of socioeconomic status.

4.4. *Ethical decision-making in a challenging situation*

Making the right decision can be challenging in complex ethical dilemmas. This holds true when our choices impact our well-being and those around us. By understanding this theory, we can gain insights into navigating complex ethical situations and prioritizing the well-being of all parties involved. Nurses often face difficult ethical decisions. Drawing upon their integrity and the core principles of Indonesian nursing values, they navigate the situation with professionalism and ensure that the patient's best interests are upheld. The TCIC faces criticism and problems like any other theory (Watson, 1997b; Watson, 1988). Critics say stressing communion may lead to power imbalances or overlooking individual needs. Inefficient institutions like busy hospitals and communion-in-caring might be challenging to implement. It involves mentality adjustment and a commitment to making time for meaningful connections despite daily chores. TCIC advocates say true connections and compassionate care improve outcomes, not efficiency. They accentuate the importance of balancing efficiency and relationship quality for overall well-being. Indonesian society promotes caring, which is rooted in its rich culture. Caring for family and community has long been central to Indonesian culture.

The TCIC provides a lens through which we can understand the nursing values in Indonesia. This theory emphasizes building meaningful connections and relationships with patients, families, and communities. In the Indonesian context, this theory can be applied to highlight the unique nursing values deeply rooted in the country's culture and traditions. Indonesian nurses prioritize holistic care, where the patient's physical, emotional, and spiritual well-being is considered. They value the concept of togetherness and collaboration in patient care, which aligns with the theory's emphasis on building communion.

Understanding the nursing values in Indonesia from the perspective of the Theory of Communion-in-caring has significant implications for nursing education. Nursing students must be exposed to different cultural perspectives on caring to develop a broader understanding of nursing practice. Incorporating Indonesian nursing values into the curriculum can help students develop a more inclusive approach to care and enhance their cultural competence. By learning about the Indonesian perspective, nurses can expand their knowledge and skills, improving patient outcomes and increasing satisfaction.

Nursing administration can also benefit from understanding Indonesian nursing values through the Theory of Communion-in-caring lens. By recognizing and appreciating these values, nurse administrators can create a supportive and nurturing work environment that fosters collaboration and teamwork. This, in turn, can lead to improved job satisfaction among nurses and enhance patient care quality. Understanding these values can help nurse administrators develop policies and guidelines that align with Indonesian nurses' cultural beliefs and practices (Tuppal et al., 2021).

Indonesian nursing values can enhance patient-centered care in nursing practice. Nurses can provide care that respects their Indonesian patients' cultural beliefs and practices by incorporating these values into practice. This can improve communication and collaboration between nurses and patients, resulting in better health outcomes. Furthermore, understanding these values can help nurses recognize and address cultural biases or stereotypes that may influence their care delivery.

Indonesian nursing values from the perspective of the Theory of Communion-in-caring can also have implications for nursing research. Researchers can contribute to the growing body of knowledge in transcultural nursing by exploring how these values impact nursing practice and patient outcomes.

Additionally, researching these values can help identify best practices that can be shared internationally, leading to a global dialogue and collaboration on caring practices.

Indonesian nursing values viewed through the lens of the Theory of Communion-in-caring have significant implications for nursing education, administration, practice, and research. Incorporating these values into education and practice can improve patient outcomes and enhance cultural competence among nurses. Nurse administrators can create supportive work environments by recognizing and appreciating these values. Lastly, researching these values can contribute to a global dialogue on caring practices.

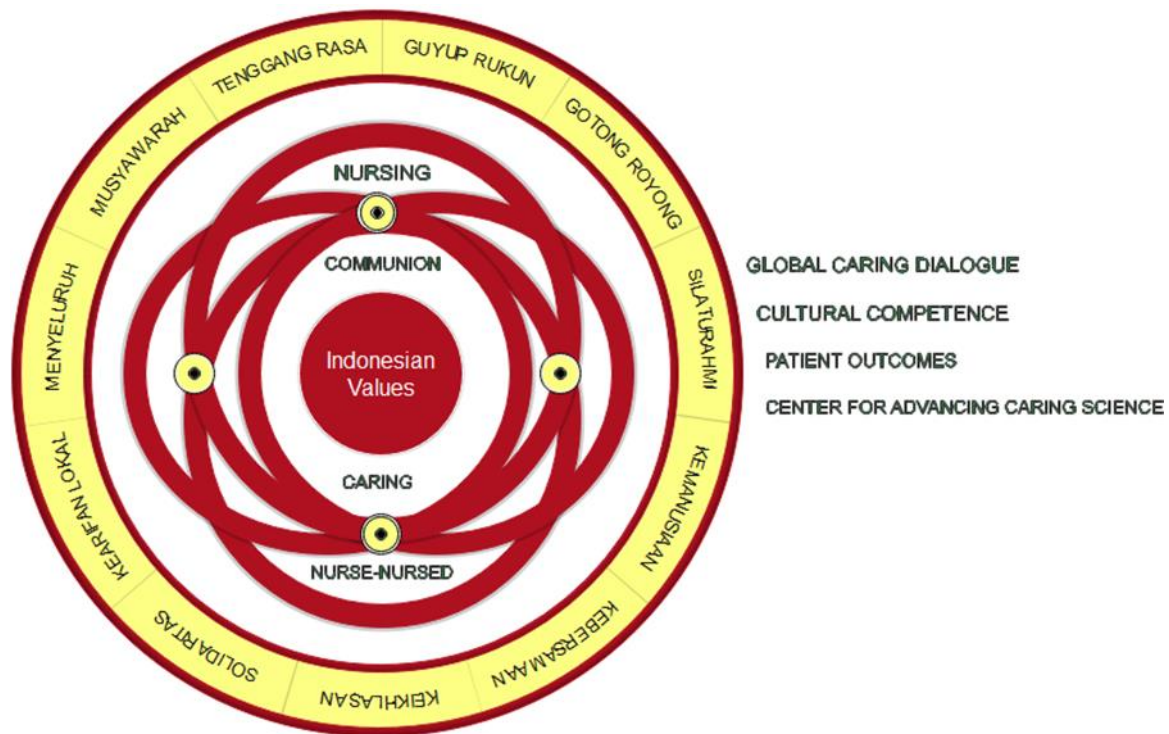


Figure 1 Indonesian Nursing Values form the Lens of The Theory of Communion-in-Caring.

5. Conclusion

When viewed through the lens of the TCIC, Indonesian nursing values offer a unique perspective on the importance of fostering interpersonal connections and building relationships in the nursing profession. The values of respect, compassion, and empathy are deeply ingrained in Indonesian culture and reflected in how nurses care for their patients. TCIC emphasizes the significance of these values and encourages nurses to see their patients as individuals with unique needs and experiences. By embracing these values, Indonesian nurses have the potential to enhance the quality of care they provide and contribute to the overall well-being of their patients. There is an invitation for an international caring dialogue and collaboration through the Asia Association for the Advancement of Nursing as Caring to further explore and expand upon Indonesian nursing values. This dialogue can allow nurses from different countries to share their experiences and learn from one another. In this dialogue, nurses can better understand different cultural perspectives on caring and expand their knowledge and skills. This collaboration can lead to the development of innovative care approaches informed by diverse cultural perspectives.

Furthermore, an international caring dialogue and collaboration can also contribute to the global advancement of nursing. By sharing knowledge and best practices, nurses can work together to improve the quality of care. This collaboration can also lead to developing international standards and guidelines that promote a holistic and patient-centered approach to care. Nurses can advocate for the recognition and appreciation of nursing as a vital component of healthcare systems around the world.

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