



UiO : **University of Oslo**

# **Mature care - a conceptual, empirical and critical evaluation**

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# The presentation

- Background and motivation
- What is mature care?
- How has the concept of mature care been used in the literature?
- Is further development of the concept of mature care a worthwhile enterprise?

# Background and motivation

- The conceptualization of care in Norwegian nursing textbooks
- Altruistic care
- Altruistic care: selfless act; self sacrifice; given unconditionally, spontaneously and to a particular person in need (Pettersen 2012)
- My concern:
  - Miss differentiated descriptions of caregivers
  - Altruistic caring ideals tend to be romantic and idyllic

# Mature care

- Background

Carol Gilligan: 'In a different voice' (1982)

Differences in girls' and boys' moral reasoning

Moral development – morally mature agent: one's own *and* others needs and interests

## Mature care (cont.)

- **Balance between the interests of one's own and others'**
  - Selfish: failing to go beyond themselves and their own needs
  - Altruistic: focusing on the needs of others
  - "The selfish care as well as the selfless care are pathological rather than ethical, and are not what an ethic of care should be founded on" (Pettersen 2008, p. 59)
  - 'The virtue in the middle'
- **Relational ontology**
  - Interrelated, interdependent, vulnerable
  - We learn how to care and receive care in relationships
  - Not injure, promote growth, well being and human flourishing (Pettersen 2004)
- **Developing a caring attitude**
  - Attentiveness, responsiveness, (self)reflection
  - Caring must be learned, developed and finely tuned

# How has the concept of mature care been used?

- Ideals and reality

Hem, M.H. (2008). Mature care? An empirical study of interaction between psychotic patients and psychiatric nurses

- Reciprocity

Hem, M.H. and Pettersen, T. (2011). Mature care and reciprocity: Two cases from acute psychiatry

Pettersen, T. and Hem, M.H. (2011). Mature care and nursing in psychiatry: Notions regarding reciprocity in asymmetric professional relationships

## Criticism

- Criticism: "the principal matter in professional care is always concern for the patient, not concern for self" (Nordhaug and Nortvedt 2011, p. 212)
- It is the patient who needs help and it is the nurse who is responsible for giving it

# Discussion

- **Developing one's skills as a carer**

  - Mature care: systematic focus also on the professional

  - Intimate work – demanding – requires self-reflection

  - To have boundaries and to balance traits

- **Dynamic interaction**

  - Care is not 'delivered' or administered: mutual process between patient and the professional

  - Contextual and relational understanding (Pettersen 2012)

- **Care and boundaries**

  - Moral credit in our culture: sacrifice one's own needs

  - Difficulties setting boundaries "despite being deeply careworn" due to "compulsive sensitivity" (Forssén et al. 2005, p. 652)

  - Sandwich generation

  - Focus on reciprocity prevents that care is boundless (Pettersen 2012)

# Is further development of the concept of mature care a worthwhile enterprise?

- Empirical works from different parts of the health services – can contribute to develop, correct, refine and differentiate the theory
- Theoretical development may contribute to new ways to meet empirical challenges
- Questions
  - How does one learn mature care?
  - How does one know one is a mature care giver?
  - Can a graduate nurse be a mature carer? If she can not, does it mean that she is selfish or altruistic?
  - What impact will mature care have on education and practice?
  - Can mature care teach us something about the interests of family, colleagues and the institution?
  - What about other health care and welfare professions like medical doctors, teachers, social workers?

**Thank you ;-)**

