Original Article

Caring Science Youth Research during Three Decades in the Light of Eriksson's Caritative Caring Theory

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Abstract

Background: International research notes the challenges facing youth research and it is, therefore, urgent to examine its own knowledge base to be able to provide the lay of the land and uncover research gaps in caring science youth research. This study examines several decades of the development of caring science youth research.

Aim: The aim of this study was twofold - to explore and discuss caring science youth research in the light of Eriksson's Caritative Caring theory during a period of three decades and to uncover research areas or topics within youth research during that time.

Methodology: The data consists of 46 theses that deal with young people written in Åbo Akademi University from 1990 to 2020. The data were analyzed using thematic analysis. The results of the thematic analysis was mirrored against the Caritative Caring theory and the development of caring science.

Results: A paradigm shift in caring science has influenced youth research. Caring science has put its special stamp on youth research to discover a new substance. Research areas uncovered were a young person's multifaceted health dimensions and suffering, a young person as a patient in need of caring encounters, caring and learning in education of young nursing students. The substance of these topics has changed focus during the three decades. The caring science perspective gives a special focus such as highlighting existential issues among young persons.

Conclusion: Caring science has put its special stamp on youth research to discover a new substance through its specific focus on ontological dimensions of health and suffering and on existential life questions among the youth. The view on young people's health and health promotion, their caring needs and learning processes, has changed during three decades in the light of Eriksson's theory. Further research in caring science youth research should focus on these deeper existential dimensions for the purpose of developing basic research and uncovering the social life conditions in which the youth of today lives.

Keywords: Caritative Caring theory, theses, youth, young people, youth research

Introduction

Nursing science as an academic discipline and its theory development can today be historically observed and discussed. The theory development has during three decades brought much specialized knowledge about phenomenon in nursing care (Fagerström et al., 2020). Today we can take part of nursing theorists' work och observe diverse thoughts on key issues in nursing. We know that there exist different traditions and alternative perspectives, and that in nursing science a caring tradition has been developed. In the Nordic countries this tradition is strong. In Finland caring science has been deeply rooted through Katie Eriksson's (1943-2019) development of a caring theory. Her theory of Caritative Caring is internationally known and used (Lindström et al., 2018). It is of great importance that further generations put earlier theorists' work to good use. In this article, we wish to highlight how the development of caring science and Eriksson's Caritative Caring theory have influenced and enriched youth research during a period of three decades from 1990 to 2020.

The quest for knowledge has during these decades under Eriksson's guidance emphasized basic research with the help of which an autonomous theoretical core of caring science could be formulated. She emphasized the necessity to find a pure essence and substance of caring concepts and the importance of not diffusing the core of caring. Therefore, in relation to interdisciplinary research collaborations, she established in the caring science research program that an interdisciplinary dialogue requires a clear formulation of the caring science perspective and articulation of the theoretical core of caring (Eriksson 1987a, 1997b, 1988, 2001). Youth science is a natural interdisciplinary connection since both disciplines are interested in the human being – in this case a young human being as a whole.

During three decades the autonomous theoretical core of caring science has been developed by Eriksson. During the first decade she developed basic assumptions about the human being, health and caring (Eriksson, 1984). One of the most significant concepts during this decade was 'caritas' (Eriksson 1990, 2018) which is a basic motive in caring that forms the key idea that holds together the different elements. The human being was during this decade understood as a whole of body, soul and spirit. Health was emphasized as more than the absence of illness (Eriksson, 1984) and was described as multidimensional including wholeness and holiness. Health was understood as a becoming in an ontological health model (Eriksson, 2007). In the second decade caring science faced a paradigm shift which changed the reality of caring. This is when the fundamental category of caring was established as suffering (Eriksson, 1992a). Suffering became an important concept in Caritative Caring theory

(Eriksson, 2018), described as a natural part of human existence (Eriksson, 1993). Suffering was described as a human being's struggle between good and evil in a state of becoming. The new paradigm also provided a base for a caring ethics; the lynchpin was the human being's dignity and responsibility for the other (Eriksson, 1995). Dignity was another important concept (Eriksson, 1988, 1995, 1997) and belonged with ethos as the human being's home, which meant closeness to the holy (Eriksson, 2018). In the third decade, caring attained a natural and prominent position and in the caring encounter the human being was seen as holy and the human being's sanctity and dignity were emphasized. Another important concept was 'the caring relationship', which was defined as the contextual meaning of caring and was the structure that determined the caring reality (Eriksson, 2018). The caring relationship constituted the deepest form of communion that united and tied together (Eriksson, 1992a). Another important concept was the caring culture, which represented an inner value or ethos that, provided the culture is inviting and based on ethos with respect toward the human being. The immeasurable human being, multidimensional health together with suffering, natural caring and the infinite reality has been and still represents the ontological rootedness of caring science.

From an international perspective, youth research in caring science focuses largely on young people's health, more specifically on health risk behaviour (Chen et al., 2005; Lantz, 2000) and on health among sexual minorities (Daugelli & Hershberger, 1993). It has, however, been shown that young people's health risk behaviour such as tobacco and alcohol use has decreased (Youth Barometer, 2015), and young people today are also faced with other challenges that can threaten their health. Virtual activities such as gaming have replaced many forms of leisure that before were common among the youth (Ferguson, 2015), which has led to a standstill culture. Young people's mental health is a constantly current research area (Patel et al., 2007) and so are issues that touch on bullying and violations (Arseneault et al., 2010). Virtual meetings also mean new challenges for the young person's psychosocial health. Young people's life conditions have changed; virtual channels and social media have today become a natural part of their everyday lives (Nielsen & Larsen, 2017) which means that their lifestyle and social interactions have changed shape compared to earlier generations. The world in which young people come of age is also multicultural (Harris, 2013) and globalized (Nilan & Feixa, 2006) which in turn present them with new health challenges.

Aim: The aim of this study was twofold - to explore and discuss caring science youth research in the light of Eriksson's Caritative Caring Theory during a period of three decades and to uncover research areas or topics within youth research during that time. Methodological aspects: Katie Eriksson was appointed Professor in Caring Science at the Swedishlanguage university Åbo Akademi which is a reason for choosing data material from this university. A systematic interdisciplinary youth research in caring science was initiated in the mid-1990s at the same university. Since then a number of joint projects have been realized between caring science and youth science and a number of theses have been written within the frameworks of these projects. Of all caring science academic theses (n 444 =71 doctoral theses, 25 licentiate theses and 348 Master's theses) produced at Åbo Akademi University from 1990 to 2020 a total of 46 theses emerged on young people. The number of doctoral dissertations was 4, licentiate theses 2 and master's theses 40. Theses that focused on young people between 12 and 29 years or where the research subjects were adults working with youths were included. A thematic analysis of the aims and results of the thesis were done. At first, theses from 1990-1999 were analysed and after that those from 2000-2009 and last those from 2010-2019. The thematic analysis was inspired by Braun and Clarke (2006). The first step in the analysis was to read and reread data and to code it for the purpose of capturing meaningful patterns that resonated with the aim of the study. The last step consisted of an iterative process oscillating between moving back and forth in data to be able to create relations between the concepts. All themes were given an overarching and informative name. Finally the result of the thematic analysis was mirrored against the Caritative Caring theory and the development of caring science during three decades.

Ethical considerations: The study follows the guidelines for responsible implementation of research by the Finnish Advisory Board on Research Integrity (2012) in Finland. This means that the results are expected to be reliable. The ambition has been to avoid misuse and misinterpretations. Honesty, accuracy and carefulness have been considered in all parts of the research, from planning to presentation of results. Data collection and analysis methods have been connected with accepted scientific and ethical praxis and we have sought to obtain information that is correct and ethically sustainable. Moreover, the ethical approach has meant openness in the presentation of results, that is, the research is conducted, planned, and reported in detail in the way that the requirements on scientific fact requires (World Medical Association Declaration of Helsinki, 2013).

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Keywords: Caritative Caring theory, theses, youth, young people, youth research

Results

Three themes emerged: *The young person's multifaceted health dimensions and suffering, The young person as a patient in need of caring encounter* and *Caring and learning in the education of young nursing students.* These themes are depicted and discussed in the following.

The young person's multifaceted health dimensions and suffering

Reviewing the thesis it clearly emerges how the paradigm shift in caring science has influenced the view on young people's health and health promotion. In the first decade, health research focused on young peoples' views on health (Lindholm, 1990). It demonstrates that their views on health was changing from having been one-dimensional with a focus on healthiness and good health habits to becoming multidimensional (Nylund, 1991). In terms of health promotion Lindholm (1995, 1998) reveals that young people's life values are important and affect their health motives. Toward the end of this decade health research among youth has increasingly focused on existential issues. Young people's existential loneliness was seen as a shelter or a prison (Granström, 1999). Loneliness was the most profound suffering. Involuntary loneliness entails suffering where young people feel abandoned and a sense of not being seen or recognized (Weckström, 1999). It can be expressed in self-destructive behaviour including substance abuse and truancy (Vestö, 1997). For young people chosen aloneness can however be experienced as something positive that gives them time to reflect, grow as a person, rest, and gain strength.

In the second decade when the fundamental category of caring was established as suffering, many theses describe suffering in relation to health. Suffering in young people is expressed both in somatic and psychic symptoms (Björkquist, 2008; Pellfolk, 2008), which are connected to several parts of the young person's life. Sjöblom (2010) indicates that young people's corporeal expressions also convey their health and suffering.

Different forms of communion and loneliness have a specifically great influence on young people's health (Hyvönen, 2017). Young people who find themselves in a good communion where they have a sense of

being loved and recognized, while they also have the freedom to shape their own lives, view life with a sense of hope and confidence (Storbäck, 2005). In contrast, young people in a negative loneliness express this through negative and destructive feelings bullying including their peers (Nieminen, 2001). Experiences of aloneness and communion are important for young people and affect their understanding of life (Storbäck, 2005). Big changes in the family including divorce may have a great impact on young people in different ways and affect their experience of existing in a context (Karvonen Lemmetty, 2006).

In the third decade the multidimensional view of health is a natural part of many theses. Because of unemployment young people experience weariness in life. They do not see themselves as whole, when nobody recognizes their needs (Björklund, 2019; Östman-Myllyoja, 2012). Young people's dreams and hopes are important for their health and so are good relationships with friends, parents and family (Holmström, 2008). Young people who live in destructive relationships accordingly become vulnerable. Young people who receive corporeal punishment express their suffering through aggressions, low self-esteem, depressive and psychosomatic symptoms and alcohol consumption (Huusko, 2012).

For today's youth, the virtual world is a concrete place where they meet with both positive and negative communities. Smått-Nyman (2017) demonstrates that the virtual world can be an important support for young people, but because it is anonymized violations may occur. For communion on social media to be experienced as good, young people need, like in physical life, experiences of being treated with dignity, that they have the freedom to take responsibility for themselves and others and that they fundamentally can be themselves (Nyman, 2014).

The young person as a patient in need of caring encounter: Several theses focused on the encounter with the young person as a patient. These theses reveal that as a result of the development of the theoretical core of caring science, where the human being is viewed as a body, soul and spirit, a change in the young person as a patient has also taken place (Lindfors Ylimannila, 1999). In the second decade, several studies on caring encounters with young people appear. The young patient emerges in the theses as a human being who puts demand on care. Djupsjöbacka (2001) shows that it is important for young patients to be recognized as human beings through being invited to the caring relationship. The caring relationship with young people is characterized by understanding and sharing (Tornivuori, 2014). Kackur (2013) underscores that it is important for young patients to be treated in a unique and personal way. School nurses can be important in their encounter with young people, primarily by helping

them attain a better insight and understanding of themselves (Lindberg, 2007). It is important that young people are seen as precisely that, not as children, because that could be a profound violation of their dignity (Korhonen, 2007). Several studies show that for young people a caring encounter, an aesthetic environment with a permissive atmosphere where young people are seen as human beings consisting of body, soul and spirit, is meaningful (Djupsjöbacka, 2001; Korhonen, 2007; Lönnfors, 2013). In such a caring culture is a life-affirming atmosphere that promotes young people's health and help them endure their suffering. In this way, young people's dignity is confirmed which in turn help them move on in their lives, situations including bullving (Nieminen, 2001). School health service workers who build a relationship of care with trust, openness and authenticity can, for instance, more easily act as support for young people in difficult life situations (Karlsson, 2000). In the third decade, young people are understood in the drama of suffering with eating disorders. A caring relationship in this case requires genuine concern, wisdom, humbleness, courage, responsibility, loving engagement and genuine compassion (Nyberg, 2011). In a caring encounter even a bullied young person's suffering can be alleviated (Björk, 2014).

Caring and learning in the education of young nursing students: The theses clearly show the paradigm shift that occurred in nursing education in tandem with caring science's emergence as a human science discipline. They show that during three decades the focus shifted from young students' professional identities and ethical discussions on caring in professional development to students' development of an ontological clinical competence. Theory-based learning became the basis for caring and learning as parallell processes. In the first decade Matintupa (1995) shows that the paradigm shift in midwife education led to discussions on midwives' professional identity and Boucht (1996) identifies three paradigms in the supervision of nursing students; the caring science- oriented supervisor, the down-to-earth supervisor; and the administratively oriented supervisor. In the second decade, Nylund (2000) shows that ethical discussions on caring, dignity, guilt and virtue are important for nursing students' professional development. Ethics is highlighted also by Karlsson (2006) who illuminates the importance of inner ethics, a value base, among nursing students. She claims that nursing students who feel they can follow their value base in their work radiate joy, inner strength, courage and willingness to do something for someone else. In the third decade it emerges that the strong theoretical core that has been created through basic research now informs the practical nursing education, supervision, teaching and learning at work. Haldin (2014) demonstrates that it is important in educational contexts that students are seen as individuals and that

they receive personal recognition. Sandfors (2015) underscores the significance of a personal relationship with students for learning and for a trusting learning relationship. Björkmark (2014) shows that this can be important especially for nursing students from other cultures who have experienced outsidership in society and education. Foxell (2016) reveals that a tactful nurse teacher strengthens student's self-esteem and that they become aware of their own resources. In learning at work, which is a considerable part of vocational education, the theses show the importance of students feeling welcome and invited and involved in the training position. The supervisor's responsiveness for student needs and the relationship with the supervisor are important for how students experience work and the field (Nyman, 2014). According to Virkki (2014), nursing students feel that reflection as time, invitation of the patient and the opportunity to take the specific patient's needs in consideration, important in practice. In this decade caring science theory becomes active in the education in a concrete and tangible way. Sandvik (2015) shows that a caring culture with a caring ethos is important for student learning and process of becoming which is why both theory and practice are inseparable in nursing education. After graduation the theoretical core of caring science supports students in their work (Sjöblom, 2017). Wikblad (2016) shows that newly oscillate between graduated nurses doubting themselves and feeling as worthy co-workers. The paradigm shift has, however, altered the view on what clinical competence is. Lejonqvist (2018) shows that this paradigm shift has altered nursing students' views on clinical competence. Nursing students describe clinical competence as being able to meet, know, perform, mature and develop. She indicates that the emphasis in nursing education should therefore be on developing ontological clinical competence, while contextual competence is developed in practice through experience. Clinical competence thrives and develops in a caring culture; it cannot be practiced but requires education. Caring and learning are therefore parallel processes that develop through a caring culture in the classroom.

Discussion

Examination of the results: The aim of this study was twofold - to explore and discuss caring science youth research in the light of Eriksson's Caritative Caring theory during three decades and uncover research areas or topics within youth research during that time.

The analysis of 46 theses in caring science youth research shows that focus and research interests have been on the young person's multidimensional health, suffering, caring and learning in different contexts. The interdisciplinary dialogue with youth science has followed the caring science perspective and there has an articulation of the theoretical core of caring was present (Eriksson, 1988, 2001) in all theses. The substance has been more important than the contexts, which Eriksson saw as a prerequisite for interdisciplinary collaborations. Yet, the Caritative Caring theory has more key concepts than these research topics show and the question is why topics like ethics, dignity, caritative caring, invitation, act of caring or caring culture t have not been of interest in youth research. These topics are, however, mentioned in the studies about nursing education.

Internationally, youth research in caring science focuses largely on young people's health and on health risk behaviour (Chen et al., 2005; Lantz, 2000). Young people's mental health is also a current research area (Patel et al., 2007) and so are issues that touch upon bullving and violations (Arseneault et al., 2010). In this study, health behaviour is seen only as one dimension of multidimensional health and issues like bullying and violations are studied in the light of suffering. The study shows that young people's views on health have changed (Lindholm, 1990; Nylund, 1991) from one-dimensional to multidimensional. The study also shows that young people's attitudes affect their health (Lindholm, 1998) and that the emphasis has shifted to health promotion that supports young people's meaning in life and that this focus on health itself (Weckström, 1999) is important for their health and sense of wellbeing (Björklund, 2019). The paradigm shift can be said to be coupled with the development of caring science where Eriksson has developed a multidimensional understanding of the human being and the human being's health (Eriksson, 2018). The focus has also become more human scientific with an emphasis on the influence of existential dimensions on youth, their health and suffering and caring. Here the caring science view of the human being as body, soul and spirit (Eriksson, 2018) has had the strength to highlight deeper dimensions in the young person, including existential ones. This study shows, for instance, that unwanted loneliness for young people can entail a very profound suffering and that they feel they are not being seen in their lives (Hyvönen, 2017; Harti, 2013) and they experience the situation as unbearable and hopeless (Granström, 1999) which may result in selfdestructive behaviour (Vestö, 1997). Opportunities for meaningful activities can promote young people's health (Korhonen, 2007) as can the possibility to have access to their dreams and good relationships. The present study also demonstrates that the view on young people as patients have changed in tandem with how the theoretical core of caring science has developed. The studies' interest is not in young persons' illness or how they receive nursing care. Focus is on the caring encounter and relationship with young people (Tornivuori, 2014) because they long to be treated in unique and personal ways (Kackur, 2013). Warmth, respect and tolerance (Sandfors, 2015) constitute the characteristics of the encounter. Korhonen (2007) has here highlighted the importance of being treated as a young person, not as a child,

because that would violate the young person's dignity. The relationship with the young also requires responsibility and loving engagement (Lönnfors, 2013). This study reveals that a clear paradigm shift has occurred in nursing education in tandem with the emergence of caring science as a human science discipline. The shift went from an understanding that education was more than practical skills and toward ethical discussions on caring (Karlsson, 2000; Virkki, 2014). Haldin (2014) emphasized the importance of personal recognition and a personal relationship between young students and supervisors where trust can emerge (Sandfors, 2015). Students' views on work and work field are influenced by whether their supervisors are responsive to their needs (Nyman, 2014) and reflections on time and the invitation of patients are important for students (Virkki, 2014). The paradigm shift also manifested in the form of students' views on clinical competence including being able to treat patients well, having expertise, preparedness and maturation in the sense of cultivation (Wikblad, 2016). Caring science with its broad existential mark, adds essential basic research youth research which has a scientific to interdisciplinary nature. Youth research is an umbrella term that connects with a number of various research disciplines. Despite the fact that these disciplines differ from each other a link is forged between them in youth research through a shared research interest in creating knowledge, descriptions and understanding of the young human being. The young person is the uniting link that ties together caring science and youth science and therefore represents the thread that unites these. Caring science youth research has contributed to establishing youth science and caring science has put its special stamp on it to discover a new substance through its specific focus on existential life questions among the youth.

Validity of the results: Stolt et al. (2018) have reported that a total of 56 doctoral dissertations in Finland have been conducted with children and young people as informants. These theses are written from a nursing perspective and it could have strengthened the validity of this study to compare them with youth research from a caring science perspective. In this study, we found only four doctoral dissertations and we decided to also choose licentiate theses and master's theses. This data material could be seen as too narrow and articles could also have been included. Yet, the doctoral theses are all article disserations and other articles are based on the licentiate or master's theses. Validity was ensured by having two of the researchers conduct the data analysis separately, and the final themes that were identified were later discussed. A strength is that all the researchers discussed and participated in the discussion on the new understanding that was created.

Conclusion: This study has contributed to uncovering research gaps in youth research from a caring science

perspective and has highlighted how youth research in accordance with Katie Eriksson's Caritative Caring theory has influenced and enriched youth research during a period of three decades from 1990 to 2020.

The theses reflect the multifaceted health and suffering among young people, the young patient in need of caring encounter and how the paradigm shift that has taken place influenced the research topics in nursing education where caring and learning are seen as parallel processes. Because of its spiritual perspective caring science has contributed to a nuanced knowledge thanks to its basic research which has specifically focused on existential issues among youths. Further research in caring science youth research should focus on these deeper existential dimensions for the purpose of developing basic research and uncovering the social life conditions in which the youth of today lives.

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