

Article**The Use of Esthetics in Nursing Practice and Education in the 21st Century: The Context of Indonesia***Kusman Ibrahim**Associate Professor, Faculty of Nursing, Universitas Padjadjaran, Bandung, Indonesia.**Corresponding author: k.ibrahim@unpad.ac.id***Abstract**

Indonesia is a multi ethnic and culturally diverse country in Asia. In Indonesia, modern nursing has evolved since the colonization era of 1900s. Nursing has developed from a basic non-formal training to a formal university based education. This paper aims to explore and discuss the cultural perspectives on esthetics in nursing practice and education in the context of Indonesian nursing. A narrative review was carried out based on the available literature that could be accessed. Data source triangulation by comparing and contrasting various sources were conducted to assure validity and completeness of the data. Esthetics nursing has been integrated in the nursing curriculum. Nursing students developed sense of art through students' activities such as music, dance, choir, and performance clubs. Learning from people and environment were also facilitated by exposing students to the villagers. It was organized multidisciplinary across study programs that available in the University. Providing culturally appropriate, individual approach, and patient center care are model of care that nurses practice to ensure the implementation of esthetics in nursing practice. Understanding esthetic aspect of nursing is necessary attribute of good nursing practice.

Keywords: Cultural, Esthetics, Indonesian, Nursing**Introduction**

Indonesia is the fourth populous country in the world with over 250 million inhabitants, 52% of them living in urban area.¹ More than 40% of population is living in Java Island. Geographically, Indonesia is located in South East Asia region, lies between the Pacific and Indian oceans and between the continents of Asia and Australia, covering total area 1,919,317 Km². Indonesia is the largest archipelagic nation in the world consisted of more than 17,000 islands, about 6,000 of these islands are named, and about 1,000 are permanently settled. Administratively, the country divides into 34

provinces, 98 municipalities, 416 districts, 7,094 sub-districts, 8,412 town-villages, and 74,093 villages. Over 350 ethno-linguistic groups are recognized in Indonesia. Javanese make up 45 percent of the population, Sundanese 14 percent, Madurese 7.5 percent, coastal Malays 7.5 percent, and others 26 percent. Although Indonesian are diverse and multi ethnic-cultural, they live together with harmony under the national platform of “*Bhineka Tunggal Ika*” (Unity in Diversity) and communicate by an official language of “*Bahasa Indonesia*”.² All Indonesians are bound into the national philosophy of “*Pancasila*” (five principles) which consists of

belief in God, humanism, national unity, democracy, and universal justice.

Health development is one of the major concerns to achieve the vision of healthy for all Indonesians by 2025 as stated in the long term strategic planning for Indonesia health development.³ The national health system (Sistem Kesehatan Nasional – SKN) has been formulated as a guideline for health development. It is an arrangement with integration and mutual support gathering various efforts of the Indonesian nation to ensure the highest health status as a realization of the general welfare mentioned in the preamble of the 1945 Constitution. The objective of SKN is to implement a synergic, effective, and efficient health development utilizing all the nation's potency, including the government as well as the community and the business world, in order to achieve the highest community health status possible. The SKN lies on the principles of humanity, human rights, justice and equity, community empowerment and autonomous, partnership, priority and efficiency, and good governance.

Nursing as an integral part of health system, it has developed consistently along with the increase demand of the society as well as complexity of health problems and the advancement of science and technology. Historically, nursing was brought to Indonesia by the Dutch colonials to serve the health care needs of Dutch expatriates in Indonesia. When smallpox outbreak occurred in the era of 1910s, the Dutch began to recruit local people to be trained as vaccine immunizers. Afterward, hospital-based nursing training was initiated with student intake from primary school levels graduates.⁴ The nursing education was continuously improved from middle level to the higher level of education or university based education. Bachelor, Master, and Doctoral programs in nursing were offered in several Universities and schools in Indonesia. However, the

rapid growing number of nursing schools did not in line with the quality of nursing education. The government, nurses association, and nursing schools association have addressed this issue and working forward to improve the quality of nursing education which may impact to the improvement of quality of nursing care service. Strengthening policies and regulations, curriculum revisions, and improvement human resources and infrastructure were continuously implemented to enhance quality of nursing education and practice in Indonesia.

Nursing discipline has been continuously developed in Indonesia in order to get a fully recognition both as science and as professional practice. Nursing science was learned and developed through generating research evidences to strengthen empirical aspect of nursing. However, since nursing is a holistic human science and practice, other aspects of nursing such as ethics, esthetics, and personal need to be explored and discussed, how they were developed and implemented particularly in nursing education and practice. Esthetics aspect of nursing is one of which was rarely explored and discussed in nursing discourse particularly in the cultural context of Asian countries, more specifically in Indonesia.

Objectives

This review aims to portray the cultural perspectives on esthetics in nursing education and practice in Indonesia including highlighted various issues related the development of nursing education and practice in Indonesia. By knowing this issue, it is expected to enrich nursing knowledge especially about cross cultural perspectives on esthetics nursing from various countries. Hopefully, nurses may gain broaden knowledge which is useful to improve nursing care for patients with various cultural background.

Conceptual Framework

Carper's⁵ patterns of knowing in nursing were used to guide the conceptualization of esthetics nursing. Esthetic knowing or "the art of nursing" refer to intangible essence of what nursing is, attends to uniqueness of "contextual wholeness" rather than particular moment. It is expressive, intuitive and creative aspect of nursing. Esthetics nursing is embedded with historical and cultural development of nursing. Therefore, to understand the esthetics nursing as a whole, exploration of cultural and historical development of nursing is needed.

Methods

Literature review was carried out to grasp an understanding about historical development and cultural perspectives on esthetic nursing in Indonesia. Data were gathered through available literature, documentaries, and resources that could be accessed both online and by hand. Data then were synthesized into information and classified into sub-topics to describe the context of Indonesia, historical development of nursing, and highlighted esthetic aspect of nursing education and practice. Discussion and recommendation were addressed to highlighted key points and future implication for nursing development.

Results

Results of this review are presented in a sequential sub-topics as follows:

Nursing Development in Indonesia

It was noted that modern nursing firstly came to the archipelago (name of the region before Indonesia was established) brought by the Dutch European to meet health care need of the expatriates at the time. Development of nursing can be classified into several era:

1. Colonial and Old Government Order (1602 – 1968)

The era of colonialization began with the

presence of traders who formed a trading company named "United East India Company" or in Dutch language named "*Vereenigde Oostindische Compagnie (VOC)*" in 1602.⁶ The VOC then was transformed from a military-trading organization to administrator of a colonial empire. In 1799, the Dutch colonial established the first hospital in Batavia (currently Jakarta).⁴ Nurses were recruited and trained from local people. Dr. W. de Bosch established Java Medical School (1852) then developed to be STOVIA (1898), Midwifery training was initiated in 1852, yet it was closed down in 1875. Basic Nursing training was started in Cikini Hospital in 1900 and Stadverband Hospital in Glodok 1912, in 1919 changed to be CBZ (*Central Burgerlijke Zieken inrichting*) and moved to Salemba which nowadays established as Cipto Mangunkusumo (RSCM) Hospital in Jakarta. The Dutch colonial state was destructed by the Japanese in 1942 which took the rule until 1945. At the time, nursing did not develop, and even decline. Nursing jobs were carried out by unskilled and untrained persons, drugs and medical supply were scarce, diseases epidemic was increasing. Indonesia came to the era of Independence/Post Colonial/Old order (1945 – 1968). The Indonesia Government started to develop and improved health sector. Basic Psychiatric Nurse was offered in several hospitals such as RS Cilendek Bogor (1951), RS Jiwa Malang (1950). In 1952, it was firstly offered School for Nurse Teacher in Bandung, candidates were recruited from experience nurse plus one year training. In 1953, Nurse School was opened in Medan, Bandung, Surabaya, with student intake from junior high school graduates (SMP/grade 9th) plus 3 years training. By 1965 Diploma III in nursing (three years), the first tertiary level of nursing education was introduced with students entering from senior high school or equivalent.

2. New Government Order (1969 – 1998)

In line with the process of nursing

professionalization, nursing education was improved. University based nursing education which offered a bachelor degree in nursing was established in 1985 by University of Indonesia. This was followed by a number of state universities (Universitas Padjadjaran, University Sumatra Utara, University of Gajah Mada, etc) and private colleges throughout Indonesia, offering bachelor degree in nursing. During this era, BSN curriculum was integrated between academic and clinical/community practice experience.

3. Reformation Government Order (1999 – 2014)

In 1999, Faculty of Nursing Universitas Indonesia firstly offered master degree in nursing and nurse specialist program, followed by doctoral program in nursing which was opened in 2008. Followed by other universities offering Master program in nursing. At this period of time, Indonesia Nursing Act was passed by Indonesian Parliament on September 25, 2014 after many years was proposed and attempted by nurses.

4. Regional Integration and Global Connectivity (2015 – onward)

ASEAN leaders has come to an agreement to build ASEAN Economic Community by 2015⁷. In relation to this, ASEAN has been working on mutual recognition arrangements (MRAs) to facilitate the free movement of skilled labour in the region. Nursing is one of eight professional groups included in the agreement. Nurses in this region need to:

- 1) Develop national skills framework towards an ASEAN skills recognition framework
- 2) Promote greater mobility of students and faculties
- 3) Support greater mobility of skilled workers through regional cooperation mechanisms and by efforts to safeguard and improve educational and professional standards;
- 4) Develop an ASEAN competency-based occupational standard;

- 5) Encourage the development of a common standard of competencies as a base for benchmarking with a view to promote mutual recognition.

Nursing Education System in Indonesia

Historically, nursing education started with a basic training in hospitals then formalized into hospital based nursing education. In order to gain professional recognition, nursing education continuously improved and move to university based education. Nursing curriculum has been developed to adapt new trends and progresses in the country and society, such Law on Higher Education, Indonesian Qualification Framework, National Standard on Higher Education, and ASEAN Economic Society. According to the Indonesia Nursing Act;⁸ Nursing Higher Education consisted of three types; 1) vocational – minimum level is Diploma III, 2) academic – BSN, Master, Doctoral, and 3) Professional – General Nurse, Specialist Nurse. There are about 498 Schools of Vocational Nursing that offer Diploma III in Nursing, 318 schools offering BSN, 15 schools offering Master, and one School for Doctoral in Nursing throughout the country.⁹ Unlike in other countries, nursing education at Bachelor level divided into academic phase which take 4 years to complete, and profession phase about one year internship in clinical as well as community. Nursing students at Diploma and Profession level are required to pass the National Competency Examination as requirement to obtain the licence for working in nursing service area.

Esthetics in Nursing Education and Practice

Chinn and Kramer¹⁰ suggested that esthetic aspect of knowing refer to connection to deep meaning of a situation and calls forth inner creative resources that transform experience into what is not yet real, but possible. It expressed through actions, bearing, conduct, attitudes, narrative and interaction, knowing what to do without conscious deliberation.⁵ In Indonesian nursing education, esthetics aspect of

nursing has been integrated into nursing curriculum and taught by various modes of learning. Nursing art was integrated in the subjects of basic skills of nursing, therapeutics communication, as well as fundamental and clinical and community nursing. Learning cultural arts such as traditional music, dance performance, singing, drawing, etc. was offered as an extra curricular to develop sense of art and cultural sensitive of the students. In addition, Small Group Discussion with a tutor, discussing a case presentation/situation that reflected esthetics knowledge underlying the case in nursing care, follow by a project assignment to deepen the students' understanding about a particular issue.

In nursing practice, esthetics nursing was integrated in the nursing care with various forms. Empathy, the capacity for participating in vicariously experiencing anothers' feeling, is the most important of mode esthetic nursing. Nurses might reflect their feelings when enounered the touchfull experience of caring particular patients. Nurses also maintained their sensitive feeling through deep appreciation of the meaning of a situation, moved beyond the surface of a situation, transformative art/acts, and brings together all the elements of a nursing care situation to create a meaningful whole. Similarly, nurses' sense of the arts were cultivated through appreciation of several arts performance such as music, dance, choir, and drama which performed in a particular events.

Discussion

In many countries, nursing has shown a significant contribution for social development and welfare of the society.¹¹ Development of nursing should take place as an important part of development the country at whole. Nursing in Indonesia has developed significantly to reach the equal position with other health professionals as well as nurses in other countries. Knowing history of nursing in a prticular context could be a fruitfull lesson to reflect

the journey of nursing and to set up the future strategic plan to imprpove the dignity of nursing profession.

Indonesia nursing has shown a significant improvements in many aspects of education and practice. However, the major challenges are remaining exist. In the fild of nursing education, the implementation of mandatory national competency examination has triggerred the efforts to imprpove the quality of nursing education. Every nursing schools have to comply to the national standard of higher education. However, the lower percentage of nursing graduates who passed the national exam which was less than 70%, compared to medical students¹² still left a big challenge for nurse educators. Various creative and innovatives strategies need to be developed in nursing education sector to improve the quality of nursing graduates. The curriculum need to tranform from the old type curriculum that emphasized on more bio-medical model focusing on pathology and etiology of disease processes and medical treatment to the transformative learning curriculum that emphasize on more developing analytical and critical thinking skills, leadership and managerial capabilities among the students to work collaboratively across disciplines.¹³ In addition, the development of nursing curriculum need to incorporate various ways of knowing including esthetics knowing in nursing.

Nursing service has become an integral part of national health system in Indonesia. Improving the quality of nursing service through acreditation and supervision has the major agenda among nurse managers in all level of organization. The advancement of nursing role and autonomy in clinical as well as community nursing need to be addressed for future development of nursing practice in Indonesia. Indonesia are challenged to bring the nursing profession from a current state that majority is vocational and general nurse level to the next state that produce more advance nursing practitioners

including nurse specialist and nurse consultant¹⁴. Therefore, career path of nurses should be clear and established to assure the continuity of professional development.

Conclusion and Recommendations

Nursing education has changed progressively due to demand of society and the advancement of science and technology of human being. In order to maintain the sustainability of nursing, more innovative strategies in embracing of technology are necessary. In the era of globalization, nurses are challenged to work

with more educated consumers and interdisciplinary, to work across country and culture, to solve the complexity of patient health problems, to be efficient in cost of health care and shifting to health insurance, to advocate policies and regulations, and to advance nursing science through research and its application into nursing practice. Incorporating esthetics aspect of nursing into nursing education and practice become inevitable since nursing is committed to provide holistic human care. Local cultural context and beliefs could influence nurses to explore, express, and communicate esthetics aspect of nursing.

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