

AESTHETICS IN NURSING PRACTICE AS EXPERIENCED BY NURSES IN THE PHILIPPINES: A PHENOMENOLOGICAL STUDY

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ABSTRACT

Nursing aesthetics, acknowledged as a fundamental pattern of knowing, emphasizes the integration of aesthetic dimensions into nursing practice; yet the lived experiences of Filipino nurses in this domain remain under-investigated. Employing a phenomenological design, this study explored how 15 purposively selected nurses in Negros Oriental Province perceive and enact aesthetic care. Data were elicited through participant-generated drawings followed by semi structured interviews and analyzed using Kongsuwan's framework for interpreting artistic works and texts. Rigor was maintained via Lincoln and Guba's trustworthiness criteria—triangulation, member checking, thick description, and an audit trail. Four themes emerged: honoring persons as a whole, seeing things from the perspectives of others, intrinsic satisfaction from aesthetic care, and innovative, pleasant nursing interventions. Participants construed aesthetic nursing as a collaborative process that co creates meaningful patient experiences through therapeutic communication, needs assessment, and empathic engagement. These findings can inform healthcare organizations in developing policies and practices that foster aesthetic nursing. Future research should examine the longitudinal impact of aesthetic practice on patient outcomes, its relationship to nurse retention, and its adaptability across diverse clinical and cultural settings.

Keywords: *Aesthetics; nursing practice; phenomenology*



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BACKGROUND

In 1978, Barbara Carper identified fundamental patterns of knowing in nursing, one of which is aesthetic knowing (Carper, 1978). In describing the aesthetic pattern of knowing, Carper (1978) emphasized empathy as the mode of the aesthetic pattern of knowing. Possessing empathy—the ability to understand the feelings of others—enables nurses to design and provide effective and satisfying nursing care (Carper, 1978). Therefore, incorporating aesthetics into nursing practice contributes to the provision of satisfying nursing care.

Aesthetics in nursing practice has been investigated from the perspectives of both nurses and patients. From the perspective of patients, Kongsuwan and Dahal (2023) explored the meanings of the lived experiences of cancer patients receiving care in Nepal. In their hermeneutic phenomenological study, they conducted interviews with

eleven Nepalese cancer patients, who expressed their experiences of receiving care through drawings and interviews. The study revealed that patients perceived aesthetics in nursing as being nurtured like a family, experiencing a sense of healing while under the care of nurses, feeling hopeful for recovery and a longer life, and feeling as if they were given a new life. Another phenomenological study conducted by Radmehr et al. (2015) involving twelve patients in Iran found that aesthetic nursing care encompasses a subjective description of spiritual and desirable caring behaviors, combined with a sense of unity and empathy between the nurse and the patients. This connection leads to alleviate the desperate impasse that patients often experience, fostering a sense of satisfaction and peace within them.

From the perspective of nurses, Dahal and Kongsuwan (2022) conducted a hermeneutic phenomenological study to

investigate the lived experiences of sixteen nurses who provided aesthetic nursing care for cancer patients. Their study found that aesthetics in nursing practice is implemented by nurses through an understanding of patients' physical and psychological needs, the creation of a pleasant healing environment, and the innovative use of palliative care source. Additionally, a study by Betriana et al. (2022) explored the meanings of aesthetics as experienced by nurses in Indonesia. Interviews with thirteen nurses indicated that these professionals understood and experienced aesthetics in their practice by providing compassionate care, employing effective communication, alleviating patients' pain, and incorporating innovation into their care approaches.

Those previous studies (Dahal & Kongsuwan, 2022; Radmehr et al., 2015; Betriana et al., 2022) demonstrated different concepts of aesthetic nursing as understood and implemented by nurses. These differences might be influenced by cultural and contextual factors, as each study was conducted in a different country. Despite the variations in the definitions of aesthetic nursing, those concepts generally refer to one common concept, which is providing compassionate care. Radmehr et al. (2015) referred to desirable caring behavior as aesthetic nursing. Dahal and Kongsuwan (2022) highlighted understanding patients' need and creating a healing environment to describe aesthetic nursing. Meanwhile, Betriana et al. (2022) defined aesthetic nursing as caring with compassion.

While the implementation of aesthetics in nursing practice might vary depending on context and background, the experience of aesthetics in nursing within the Philippine context is not well known. Limited studies have investigated aesthetic nursing in the Philippines, primarily focusing on Filipino children (Galvez et al., 2021; Kongsuwan et al., 2024). However, there is a notable absence of research examining how Filipino nurses perceive and experience aesthetic nursing. Understanding how aesthetics in nursing care is practiced among nurses in the Philippines will contribute to the existing body of knowledge in this field. Thus, this study aimed to describe the meanings of aesthetics in nursing practice as experienced by nurses in the Philippines.

METHOD

Study design

The design of this study was qualitative research grounded in hermeneutic phenomenology, following van Manen's approach (van Manen, 2014). In this study, participants were invited to share and reflect on their experiences of providing aesthetic nursing practice through graphic illustrations, which were subsequently followed by interviews. The Theory of Aesthetic Nursing Practice (AesNURP) developed by Kongsuwan (2022) guided the analysis of both the graphic illustrations and the participants' reflections. To manage researchers' preconceptions, a reflective journal was used during data collection. The reflective journal was managed to record researchers' reflections, thoughts, and any significant events that occurred throughout the data collection process.

Setting and participants

This study was conducted in two hospitals located in Negros Oriental Province, Philippines: one private and one government-operated. Both institutions serve as regional referral centers, directing patients to specialized care that surpasses the capabilities of primary care facilities. This ensures that individuals receive optimal and tailored treatment for their medical needs. As referral hospitals, they handle patients from various regions with diverse illnesses. Consequently, nurses in these hospitals are exposed to a

wide range of medical conditions, which enables them to provide nursing care that is responsive to each unique situation.

Participants in this study were nurses who met the inclusion criteria: (1) being a registered nurse who had at least two years of experience in providing nursing care that is beautiful/pleasurable/compassionate/appreciative/inspirational/satisfying in a clinical setting; and (2) being able and willing to share and reflect on their experiences through graphic illustration (drawing) and interviews.

Access to participants

The researcher communicated with the hospitals and submitted a request letter to ask permission to access the participants. After receiving approval, the researcher provided the head nurses with detailed information about the study and the inclusion criteria for the participants. The head nurses authorized the study to be proceed and assisted the researcher in explaining the study to their staff nurses. Once the qualified staff nurses agreed to be contacted, the researcher reached out to those who agreed to participate in the study.

Data collection

Data were collected from March to April 2020. Data collection took place in the nurses' lounge, pantry, conference rooms, and a vacant unit room, all of which were reserved with permission from the Office of Nursing Services prior to the interviews. The interview rooms provided adequate lighting, comfortable seating, and a quiet environment, which helped maintain the privacy and confidentiality of the sessions. Each interview lasted for approximately 30 to 60 minutes. The researcher conducted each interview with a participant using a semi-structured interview guide. With a background in qualitative research and over ten years of experience as a clinical educator, the researcher was well resourced for the task. Interviews continued until data saturation was achieved, meaning no new information emerged from the participants. In this study, saturation was reached after 15 interviews, resulting in a total of 15 participants.

Data analysis

Data, both graphic illustrations and interview transcriptions, were analyzed following data analysis steps formulated by Kongsuwan (2022) to analyze artistic works and texts. This approach consists of six steps: 1) analyzing the visual artistic works; 2) interpreting and reflecting on the meanings of the visual artistic works through aesthetic conversation; 3) reading the transcripts; 4) returning to each transcript and highlighting significant phrases that reflect the themes; 5) reading and re-reading the themes and thematic statements to select the significant themes that reveal the essence of the phenomenon; and 6) grouping the selected themes into thematic categories. In this study, the researcher started to analyze the drawing by asking participants to reflect on its meanings during the interviews. These interviews were audio recorded and transcribed verbatim. Subsequently, the interview transcriptions were read and re-read together with close attention to the drawing to develop a sense of the whole.

The significant phrases were highlighted and synthesized into themes. Themes with similar meanings were grouped into thematic categories. Each thematic category was described using the researchers' own words, accompanied by supporting drawing. This step involved a hermeneutic process, wherein researchers utilized their background and preconceptions to interpret and understand themes or meanings.

Ethical considerations

This study is part of a large project titled "Aesthetics in Nursing Practice as Experienced by Nurses and Patients in Three ASEAN Countries: Thailand, Indonesia, and the Philippines," which received approval from the Social and Behavioral Sciences Institutional Review Board of Prince of Songkla University, Thailand (#2019 NL-QL 003). Prior to data collection, the researcher secured approval from the hospital's Nursing Training and Education Office. This research presented no immediate physical or psychological risks to the participants. Before obtaining data, participants were informed about the study's details. Those who agreed to participate were asked to provide their signature on a consent form, ensuring they understood that participation was voluntary and they could withdraw at any stage without ramifications. To maintain confidentiality, participants' identities were kept anonymous using numerical codes during the reporting of the study. All collected data were securely stored on the researchers' personal computer, which is protected by a password known solely to the researcher.

Trustworthiness of the study

The trustworthiness of this study was established according to the criteria set forth by Lincoln and Guba (1985), which include credibility, confirmability, transferability, and

dependability. Credibility was achieved through triangulation, which encompassed various data inputs such as interviews, drawings, and a reflective journal. Confirmability was ensured by implementing member validation; after each interview, researchers presented a summary of the conversation for participants to verify. Transferability was warranted by providing a comprehensive description of the study, which detailed both the contexts and methods of data collection. Lastly, dependability was established through an audit trail, which was maintained to clarify the interpretations and implications related to aesthetics in nursing practice. All study documents and data analyses were preserved and shared among researchers to validate the outcomes.

RESULT

There were fifteen nurses participating in this study, of whom three were male and twelve were female. Their ages ranged from 26 to 45 years old. Eight participants graduated from a bachelor's degree in nursing, while seven possessed a master's degree. Their experience in hospital settings varied from four years to ten years. To ensure confidentiality, the participants' names were replaced with the code P (participant) and a number in the reporting of this study. The demographic characteristics of the participants are presented in Table 1.

Table 1. Demographic characteristics of the participants

Code	Gender	Age	Marital status	Level of education	Years of working experience	Ward assignment
P1	Male	29	Married	Baccalaureate	7	Intensive Care Unit
P2	Female	32	Married	Baccalaureate	5	Intensive Care Unit
P3	Male	26	Single	Master's	5	Labor & Delivery Unit
P4	Female	45	Single	Baccalaureate	4	Medical Unit
P5	Female	29	Separated	Baccalaureate	5	Medical Unit
P6	Female	29	Single	Master's	6	Surgery Unit
P7	Female	31	Married	Master's	7	Medical Unit
P8	Female	40	Married	Master's	10	Chemotherapy Unit
P9	Female	35	Married	Baccalaureate	7	Surgical Unit
P10	Female	32	Married	Master's	5	(Orthopedics)
P11	Female	40	Married	Baccalaureate	10	Emergency Room
P12	Female	35	Married	Baccalaureate	6	Obgyn Unit
P13	Female	43	Married	Master's	8	Medical Unit
P14	Male	31	Single	Master's	4	Surgical Unit
P15	Female	31	Single	Baccalaureate	5	Medical Unit

The findings of this study revealed four thematic categories: (1) honoring persons as a whole, (2) seeing things from the perspectives of others, (3) intrinsic satisfactions from aesthetic care, and (4) innovative, pleasant nursing interventions.

Thematic category 1: Honoring Persons as a Whole

Under the theme of "Honoring the Person as a Whole," participants reflected on the concept of aesthetic nursing care, which involves honoring and respecting patients while maintaining their dignity, regardless of their level of consciousness. This approach recognizes the uniqueness of each individual, treating them with dignity, and establishing genuine interest in knowing the person being cared for. Furthermore, it reflects how nurses perceive and enact holistic care. It reflects how nurses integrate beauty, compassion, and sensitivity into their practice to honor the full humanity of their patients, addressing not only their medical needs, but also their emotional and psychological well-being. Additionally, it underscores how nurses experience the aesthetic dimensions of care through empathy, respect, and an appreciation for the uniqueness of each person they care for.

"This was the highest number of defibrillations I had to do in a shift, and this was on top of all the nursing care I had to deliver to her ... I tried to keep the patient as comfortable as possible in between episodes, thinking about the privacy and dignity of what little time there was in between having to strip her chest open to resuscitate." (P1)

"A nurse should possess the ability to understand other people's feelings. It means that understanding others is more than just recognizing other people's feelings and emotions. It also means taking a sincere interest in them and their concerns." (P4)

"Being a nurse means patients in your care must be able to trust you. It means treating our patients and colleagues with respect, kindness, dignity, and compassion." (P5)

Honoring the person as a whole is depicted in a picture of a female patient with a mechanical ventilator drawn by participant 1. Participant 1 explained that the drawing was of his patient, who required defibrillation 19 times during his 8-hour shifts due to persistent ventricular tachycardia. During those critical moments, he endeavored to keep the patient as comfortable as possible, thinking about the privacy and

dignity, even in the brief intervals between having to strip her chest open for resuscitation.



Figure 1. Illustration by Participant 1

Moreover, honoring persons as a whole involves understanding and addressing patients' needs. Participants stated that they perceived aesthetic nursing practice as understanding what patients need, being attuned to patients' reactions, interpreting these reactions to appreciate their needs, and ultimately fulfilling them. Participants described patients' needs as encompassing physical needs (such as life-saving interventions and comfort care), psychological needs (need for companionship and keeping relationships with family and significant others), health education needs, and spiritual needs (keeping connection with a Higher Being). This theme highlights the importance of providing care that transcends merely treating physical symptoms, incorporating compassionate attention to the patient's emotional well-being, cultural background, beliefs, and personal circumstances. It also aligns with person-centered care, which seeks to honor the dignity, autonomy, and individuality of every person. This approach emphasizes recognizing and respecting individuals in their entirety, considering all aspects of their humanity—physical, emotional, mental, social, and spiritual. It reflects a holistic approach to caring for and interacting with people, ensuring that their diverse needs, values, and experiences are acknowledged and respected.

"She was an elderly patient and very helpless. She was alone in the room, and I felt that she needed company during that time because she was staring out of the window in deep thought. She looked sad, and I greeted her. When she responded to my greetings, I asked if she wanted me to read the Bible for her. She repositioned herself in bed and waited for me to open the Bible. So, I sat down on her bedside." (P4)

Thematic category 2: Seeing things from the perspectives of others

This thematic category illuminates any actions participants performed to demonstrate empathy and understand their patients. To fully comprehend the patient's experience, the participants stated that they "put themselves in the shoes of the patient and family" and were considerate of others' feelings. This underscores the importance of empathy and understanding in nursing practice.

"I have picked up the emotional cues of the patient through her facial expressions and non-verbal communication features. I realized that the patient needed help. I showed sensitivity towards her and understood her perspective that she wanted company. I

wanted her to feel like she was not alone at that moment. My feeling was empathy. She wanted understanding, so I provided it to her." (P4)

This theme is depicted by a picture showing a patient in the bed, surrounded by family members who are attentively gazing at the patient (Figure 2). The aesthetics of nursing care are embodied in the practice of empathy, which involves understanding situations from the perspectives of both nurses and the patients, as well as their families.

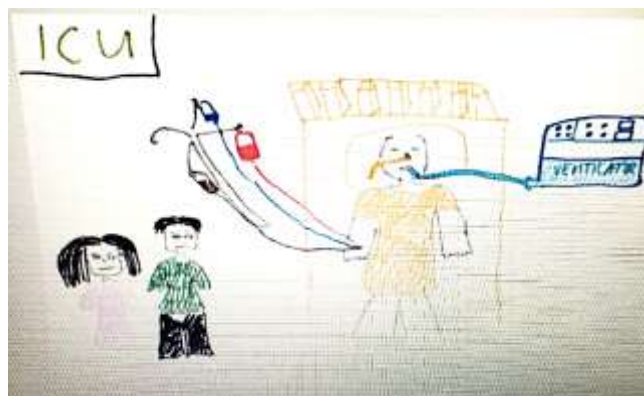


Figure 2. Illustration by participant 2

In order to be able to see things from the perspectives of patients and their families, it is essential to listen to them and practice therapeutic communication. Participants stated that the effective communication involves maintaining eye contact with patients, practicing active listening without judgment, and using reassuring and soothing methods of communication. These elements are fundamental to practicing aesthetic nursing.

"The ability to communicate effectively with patients, superiors, colleagues, and staff is essential, no matter what area or unit you work in at the hospital. Active listening involved paying close attention to what the young pregnant patient was saying, asking clarifying questions, and rephrasing what the young pregnant patient said to ensure understanding." (P3)

Thematic category 3: Intrinsic satisfactions from aesthetic care

This thematic category highlights the satisfactions that arise from implementing aesthetic nursing practices for patients, their families, and the nurses themselves. These various forms of satisfactions are experienced by patients and families after receiving aesthetic nursing care. Similarly, the theme encapsulates the fulfillment that nurses experience when they provide care that resonates on an emotional or aesthetic level. This satisfaction may also reflect the intrinsic rewards of creating a caring environment that is both healing and beautiful, nurturing both the caregiver and the patient.

"After I gave him his medication, he laid out a small envelope and placed it on the medication tray that I carried. When I asked, 'What is this for?' 'A thank-you card for you,' he responded. Because you have cared for me for three days, and to me, it was like a lifetime of kindness. Your concern, kindness, and care have touched my life, even for a short time. And I turned my back after I acknowledged him because my tears were about to run down from my eyes." (P6)

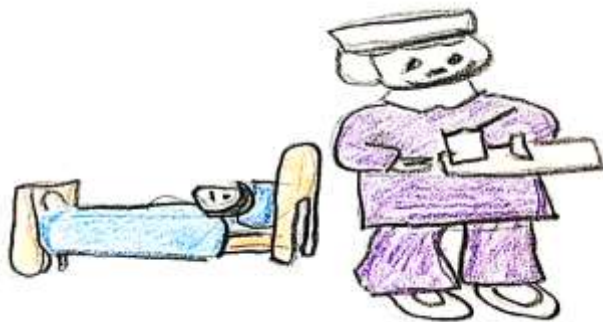


Figure 3. Illustration by Participant 6

In Figure 3, a nurse turns her back to hide her tears after receiving a "thank you card" from the patient after medicine administration.

Besides the satisfactions experienced by patients and their families, participants also noted that providing nursing care aesthetically delivers nurses satisfaction in their own work.

"The patient and her husband mentioned, 'We both appreciate you for spending time teaching my wife what she needs to know.' These are simple enough words. But it held an impactful meaning for me as the nurse assigned to a patient who was a young first-time mother ... It started me to think deeply and really process how I was significant to my patient and her husband when I only taught her wife breastfeeding skills. Maybe what I taught was worthwhile and impacted their lives in a positive way ... I felt I was not taken for granted by my patient and her husband. In fact, I feel worthy of myself." (P11)

Thematic category 4: Innovative, pleasant nursing interventions

This thematic category emphasized the characteristics of nurses who provide aesthetic nursing practice, such as pleasant behaviors and putting creativity in nursing care. Pleasant behaviors refer to aesthetic behaviors that were performed by nurses while delivering nursing care, such as smiling, greeting patients and their families, being gentle, speaking in a calm and welcoming voice, showing kindness, etc. Meanwhile, this creativity manifested in small gestures, such as finding comforting ways to communicate, or in more significant actions, like designing care routines that bring comfort and dignity for patients. This perspective emphasized that nursing is not merely a series of tasks but an art form in which imaginative solutions enhance patient satisfaction and improve patient experiences.

"I smiled and greeted my patient and her family members present in the room. I used a calm and welcoming voice." (P13)

Moreover, incorporating creativity into nursing care involves developing innovative approaches and modifying existing practices while adhering to established guidelines.

"Being creative into my own way developed and expressed myself and my ideas in new ways. I work beyond the usual, willing to do, say, or act in a way that is new, different, and/or open to criticism and suggestions. I explored ideas or used different ways to care. Like I have colorful stickers on syringes and IV trays. I have colorful name labels on IV fluids and made colorful treatment cards so they appeared attractive to my patients." (P14)

In Figure 4, a nurse carrying syringes and IV trays with colorful stickers represents creativity in nursing care.



Figure 4. Illustration by Participant 14

DISCUSSION

The findings of this study revealed four thematic categories that reflect how aesthetics in nursing is experienced by Philippine nurses in their practice: (1) honoring persons as a whole, (2) seeing things from the perspectives of others, (3) intrinsic satisfaction from aesthetic nursing care, and (4) innovative, pleasant nursing interventions.

The first thematic category, which honors persons as a whole, reflect the nature of aesthetics in nursing practice, revealing the characteristics and uniqueness of aesthetics. Honoring a person as a whole guides co-creation meaningful experiences in nursing care. For the participants in this study, aesthetics in nursing is practiced by honoring and respecting the patients as the participants in the care, not merely as objects of care. This perspective underscores the participants' commitment to safeguarding patient dignity, even during the critical time. In this regard, Locsin (2005) stressed that a necessary appreciation of a person is the view that human beings are whole or complete in the present moment. Therefore, it is crucial for nurses to be permitted to enter the world of others to fully appreciate individuals as complete beings.

Moreover, honoring the person as a whole is also intrinsically linked to person-centered care, which looks at the overall well-being of the individual and encourages their active role in their own care. Open communication and shared decision-making by patient empowerment to be active participants in nursing care may create a supportive and respectful environment. This approach improves the quality of healthcare and leads to better health outcomes and greater patient satisfaction (Roodbeen et al., 2020). Thus, the emphasis lies on the significance of the aesthetic nursing practice perspective in person-centered care, which involves co-creating meaningful experiences in nursing care. This approach focuses not only on treating the illness but also on recognizing and honoring the whole of the person who is receiving care (Ambushe et al., 2023; Kongsuwan, 2022).

The second thematic category is seeing things from the perspectives of others. This thematic category highlights the significance of empathy for patients and their families by recognizing and addressing patients' needs, as well as engaging in therapeutic communication. In aesthetic nursing practice, it is important for nurses to see things from the

perspective of both the patient and their family. This approach includes empathy to ensure the feelings are acknowledged, understood, and cared for by nursing care (Dahal & Kongsuwan, 2022). Empathy is crucial for delivering high-quality nursing care.

Similar to the findings of this study, Betriana et al. (2022) discovered that nurses in Indonesia implemented aesthetics into nursing care through practicing effective communication with patients and their families. Understanding the needs of the patient's family also plays an essential role in the patient's healing process. Involving the family in care can cultivate a supportive environment for the patient; therefore, nurses must ensure that their communication with the patient's family is both meaningful and empathetic, allowing them to understand different perspectives.

The American Nurses Association (2023) emphasized the importance of a strong nurse-patient relationship and recommended that this relationship be nurtured through practicing active listening and treating patients with dignity. Therapeutic communication presents an empathetic interaction between nurses and patients, illustrating how nurses' express empathy in their nursing practice by listening, supporting, and building relationships and how doing so contributes the enhancement of nursing communication skills (Lotfi et al., 2019). Consequently, this second theme highlights the importance of empathy towards patients and their families in nursing practice. By understanding the needs of patients and families and implementing effective therapeutic communication, nurses can provide better care and create strong relationships with patients. This, in turn, positively influences impact on the patient's healing process and the overall quality of healthcare.

The third theme is the satisfaction from aesthetics in nursing care. Practicing aesthetic nursing care not only brings satisfaction to patients and their families but also to nurses regarding their own work. Patients' satisfaction with their care can foster loyalty and trust (Liu et al., 2021), thereby enhancing their cooperation to participate in their care and improving their overall well-being. Patient satisfaction serves as a crucial important indicator in the quality assessment of healthcare services, including aesthetic nursing care (Tobias et al., 2020). Ferreira et al. (2023) defined patient satisfaction as the degree of congruence between patient expectations and the services received within the health care context. Patient satisfaction with nursing care reflects the fulfillment of patients' needs and expectations, ultimately leading to improved health outcomes. In the realm of aesthetic nursing, patient satisfaction is multifaceted, encompassing visible outcome achieved through the integration of aesthetic knowing and aesthetic actions in nursing practice. Dahal and Kongsuwan (2022) found that patient satisfaction is influenced by both expectations and experiences of aesthetic knowing in the care process. The concept of aesthetic nursing practice extends beyond physical aspects; it also encompasses the emotional and psychological well-being of the patient. By implementing aesthetic nursing care, nurses can enhance patients' self-confidence and self-esteem, which can have positively affect their overall well-being and satisfaction (Kongsuwan, 2022).

Aesthetic nursing practices significantly influence family satisfaction. When the families are satisfied with the care provided to the patient, it fosters a more supportive environment for the patient's recovery. Emotional and physical support from the family members can be a determining factor in the patient's recovery. Therefore, family

satisfaction with aesthetic nursing practices must be prioritized to enhance the overall quality of nursing care. Nurses can create a healing environment that meets families' expectations for aesthetics in nursing care.

Moreover, the satisfaction of the nurses practicing aesthetic nursing also constitutes a significant finding in this study, as evidenced by participants' narratives of meaningful patient interactions and successful care outcomes. This aligns with a study by Stavropoulou et al. (2022), which found that nurse satisfaction fosters a more positive and collaborative work environment, which will ultimately impact to better quality of care provided to patients. Nurses' satisfaction in delivering nursing care can be manifested through recognition and appreciation from patients and families, as well as the ability to provide personalized care (Perry et al., 2018). A study by Wei et al. (2023) described nurses' satisfaction as a positive feedback loop, where satisfied nurses provide more consistent and high-quality care, resulting in better patient outcomes and increased professional satisfaction. In the context of aesthetics in nursing practice, demonstrating an understanding of patient's cultural backgrounds, values, and preferences can help create a meaningful and satisfying care experience for the nurses (Dahal & Kongsuwan, 2022).

The final thematic category, the pleasant creativity of nursing care, reflects the attributes of nurses who deliver aesthetic nursing. These attributes include positive behaviors and the incorporation of creativity into nursing practices. Brown (2024) argued that aesthetics and creativity are interconnected. In this study, participants stated that putting creativity into nursing care—such as providing colorful stickers on syringes and IV trays—reflects the characteristics of nurses who engage in aesthetic nursing. This finding aligns with a study by Betriana et al. (2022), which revealed that nurses in Indonesia practiced aesthetics in their practice by implementing innovative approaches to alleviate discomfort during care. In this study, nurses were interviewed about their experiences with aesthetic practices in nursing care, focusing on their understanding of what aesthetic nursing. The study conducted by Shahmohammadi et al. (2024) showed that aesthetic education can improve the nurses' ability to provide holistic care that addressed not only pays attention to the physical but also the psychological and social aspects of the patient care. Therefore, it is recommended to integrate aesthetic education into the formal education curriculum for prospective nurses and to provide organize advanced training for practicing nurses.

The application of aesthetics in nursing practice demonstrates a profound understanding of the importance of cultivating a pleasant environment for patients. Aesthetics in nursing practice encompasses aspects that go beyond the physical needs of the patient; it involves innovation and creativity to enhance the overall atmosphere, thereby improving the quality of care provided (Betriana et al., 2022). The pleasant creativity in nursing practice is also evident in nurses' ability to adapt and personalize care according to individual patient needs and circumstances (Ma et al., 2018). Similarly, Cheraghi et al. (2021) argued that creativity in nursing practice involves a dynamic flow of thought and the generation new ideas for patient care, employing a new method that is simple, practical, effective, cost-effective, and safe. Additionally, a study by Jarelnape et al. (2023) found that pleasant creative nursing interventions can significantly improve patient outcomes and satisfaction. This study reveals that nurses' creative approaches are not merely decorative additions but fundamental components of therapeutic relationships.

Strengths and Limitations of the Study

Exploring how nurses experience aesthetic nursing in their practice might be quite challenging, as this unique experience could be inherent in their daily routines without nurses consciously reflecting on what aesthetic nursing entails. Consequently, drawing was employed as a method for data collection, enabling participants to articulate their experiences. Therefore, utilizing drawing as a data collection technique is a significant strength of this study.

The study demonstrates several notable strengths in its methodological approach and execution. The use of a phenomenological design effectively captures the lived experiences of nurses practicing aesthetic nursing care, providing rich and detailed insights into this phenomenon. Additionally, the incorporation of drawings as a data collection tool, alongside in-depth interviews, represents an innovative methodological approach that enhances data richness and allows participants to express their experiences through multiple modalities.

Nevertheless, qualitative studies are not intended for generalization, the findings of this research may not align with or be applicable to the experiences of nurses from different settings and backgrounds. In addition, since the study focused specifically on Filipino nurses in two specific healthcare settings, the transferability of its findings to different cultural contexts or healthcare systems may be limited.

CONCLUSION AND RECOMMENDATION

This study aims to describe the meanings of aesthetics in nursing practice as experienced by nurses in the Philippines. The findings reveal four thematic categories: honoring persons as a whole, seeing things from the perspectives of others, intrinsic satisfaction from aesthetic nursing care, and innovative, pleasant creativity of nursing interventions. The results reflect that nurses in the Philippines perceive aesthetic nursing as honoring the persons being cared for as whole, thereby allowing nurses to co-create meaningful experiences with patients in their care. To practice aesthetics into their care, nurses applied therapeutic communication with patients and families, recognized patients' needs and how to address them, and saw things from patients' and families' perspectives. Additionally, the findings suggest that practicing aesthetics in nursing fosters collaboration in care, enhances cooperation in care that improves patients' well-being, increases satisfaction among patients and families regarding nursing care, and increases nurses' satisfaction with their own work. Moreover, participants also emphasized that aesthetic nursing care is characterized by pleasant demeanor and creativity in nursing practice.

Themes revealed in this study supported the idea of Carper (1978), which emphasized that empathy as the mode of the aesthetic pattern of knowing in nursing. Empathy refers to the situation where nurses' ability to understand the experiences of others (Carper, 1978). In this study, nurses demonstrated their understanding of patients by considering the perspectives of both patients and their families, delivering creative care, and honoring patients as a whole individual. This approach eventually contributes to the satisfaction of the nurses as well.

The implications of this study extend beyond theoretical understanding to practical applications in nursing education, practice, and healthcare policy. Healthcare organizations should consider implementing policies and practices that support and encourage aesthetic nursing care. Future

research directions could explore the long-term impact of aesthetic nursing practice on patient outcomes, investigate the relationship between aesthetic nursing and nurse retention, and examine how aesthetic nursing practices might be adapted for different healthcare settings and cultural contexts. This study demonstrates that aesthetic nursing practice is not merely an ideal but a practical and essential component of nursing care that requires ongoing investigation, support, and development.

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