“Lost Touch” : Situating Human-Connectedness in Technology-Caring in the Health Sciences

Rudolf Cymorr Kirby P. Martinez, PhD

1College of Nursing, San Beda University, Manila, Philippines, 2Graduate School of Nursing, Arellano University, Manila, Philippines

Abstract: The dominant issue of high-tech and high-touch has popularized the supposed dichotomy between technology and caring in health care. In today’s highly technological world, the notion of the “lost touch” in human connectedness is clearly within the realm of human caring. Fostered by different technologies facilitating health care work, the process of caring in the human health experience creates unique individual identities as professional practitioners of human care. The argument is centered on technologies as essential in shaping professionalization by redefining practice boundaries and expanding societal roles and contributions. Consequently, the concept of caring is shared as the hallmark of health care professions. An assertion is made that although technology facilitates caring and competency in the human experience, the idea of human-connectedness can seem “lost” - missing in the discourse and practice within the technological world. Human-connectedness is presented as a concept, positioning its role and relevance in the continued dialogical engagement of technology and caring. A contemporary appreciation of reconciling human connectedness as integral to the process of knowing in a technological world bridging the seemingly paradoxical nature of technology and caring is proposed. J. Med. Invest. 66:12-14, February, 2019

Keywords: Caring, Human-Connectedness, Technology

INTRODUCTION

The landscape of healthcare is continually changing as technology becomes integrated within its system and processes (1). The 4th industrial revolution propels this integration so much so that the question of when will this merging affects the practice of health care professionals is shifting to the inquiry of knowing how this phenomenon will affect the identity of each health care professional. The pervasiveness of technology seems ever apparent in the contemporary times as health care institutions continually embrace the reality of the co-existence of technology and health care practice. It is an upward progression, from the upgrading of machines for diagnostic and therapeutic purposes to adapting the hospital processes to the more sophisticated technologically aided systems. As the processes and systems are adapting to technology, the practice of health care professionals is also evolving. Competencies for health care professionals seem to shift from the traditional value-based practice to a more skill oriented one. There is an apparent focus on educating professionals how to act rather than how to think based on their disciplinary orientation. The dichotomous nature of technology and caring-centered practice then is becoming more evident in the contemporary times (2).

METHODOLOGY

Using personal narrative paradigm (3, 4), this exposition paper explores the apparent contradiction of technological advancement and caring. It aims not to present a solution to the perceived gap of the seemingly contradictory nature of technology and caring but to present an alternative perspective, that of human-connectedness, that could bridge the gap between the two phenomena. Experiential stories and personal observations served as the basis for the narratives present in this exposition explicating thru the process of reflection and introspection.

DISCUSSION

Technology and professional identities

Technology and technological advancement is omnipresent, affecting the performance of duty of the health care practitioner and shaping their unique professional identity. Tools and gadgets enable the health care practitioners to implement their disciplinary obligation and accomplish their societal role. It is thru technology that ordinary people come to know about the existence of a health care discipline. The creation of the image of health care professionals among the community they served is facilitated largely by a seemingly conditioned association of the professional and the technological tools of their trade. This image formation is aided by traditional and social media and propels the association as though it is part of everyday reality (5-7). The created image then becomes deeply ingrained into the consciousness of the community members and becomes for them, the professional’s distinctive identity. It is for this reason that the progression of technology markedly affects the perceived image of health care professionals. The image of a radiation technologist associated with x-ray machines is slowly being replaced by an image of a health care practitioner besides a sophisticated MRI machines. The simple laboratory apparatuses of the medical technologist are being
substituted with high density microscopes and advance gadgets. The image of a nurse carrying a metallic flip chart is being replaced by an image of health care provider pushing around a magnanimous electronic e-chart while visiting patients in their rooms. With all these, the supposed shifting of the health care professionals' focus from the patient to the machine is becoming ostensible. This phenomenon, the perceived paradoxical nature technology and caring seems to be greatly magnified.

Unversality of Caring in Health Science

The concept of caring is central to the health care professionals (8, 9) and is an essential human needs (10). Although the definition of caring varies across culture and discipline, its presence in the health sciences points to the person-centered nature of the health care discipline. This is evident in the assumption that by virtue of their humanness, persons are caring and have the capacity to care (11). The very nature of health care discipline suggest that caring is an inherent human trait implicitly and explicitly inculcated into the practice of each health care discipline. Although the concept of caring is attributed by nurses to nursing, caring is not and should not be the exclusive domain of nursing. Caring is universal, a shared hallmark of all health care discipline. It is the unique expression of caring by each health care discipline makes them professionally distinct from one another. How these expressions of caring is developed and express is attributed to the environment where it is practiced, an environment that in the contemporary times is engrossed with technological advancement. The disciplinary focus of each health care profession, that which marks the boundaries of each professionals, co-evolve with this technological growth pushing the traditional roles of each health care discipline to expand and with it their expressions of caring. Although technology seem to shapes and facilitates the distinctive disciplinary expression of caring, an apparent contradiction exist between technology and caring. This paradox is attributed to the notion that the degree of technological advancement is proportional to its relative connect or disconnection to human person. One can argue that the more health care professionals become entangled with technological advancement, the more they seem to be less caring. A nurse enthralled on the processes of the electronic medical records will have less time to actively engage in the process of genuine knowing the patient. With these, it appears that while caring is humanizing, technology seems to be dehumanizing. That though caring is full of humanness, technology seems to be devoid of it.

Human-Connectedness as the Intent of Knowing

The plausible competing nature of technology and caring in the process of genuine knowing seems to be the source of their apparent contradiction. It is assumed that technology competes for time and presence of the health care professional in a finite space thus the process of genuine knowing, an essential prerogative to caring (12-14), is altered. This cement the view that technology may actually hinder, instead of facilitating, the basic human need of the patient to connect and make meaning of their situation. This is the root of the perceived “loss touch” occurring in a highly technological environment. Although contradictory, the process of knowing appears to connect and actually suggest that technology and caring exist within the same domain. It is the intent of the process of knowing in a technologically enthralled context that seems unclear. Human-connectedness, defined as the active reflective, mutual, dialogical, and experiential engagement of persons in meaning and sense making, is proposed as the intent of knowing with and thru technology. The field of communication science created the idea of human-connectedness (15-17) and although it appears to belong to the health sciences, it is still vaguely constructed in this domain (18). Human-connectedness aims to promote a sense of comfort, well-being and meaning among persons engage in the process of knowing. It appears that the aim of human-connectedness is the same goal of caring. If the intent of technological knowing is human-connectedness, caring could then be expressed.

Since human-connectedness is an adopted concept, it is imperative to redefine and re-situate it in the health science with technology as a context. Human-connectedness, as the intent of the process of knowing, is posited as a singularity. Human-connectedness emphasize that personhood is shared, that in the process of knowing, meaning and sense making evolve both for the person being cared for and the person giving the care. It follows the proposition that by virtue of person’s humanness, the giver and recipient of care is essentially a reflection of each other and is substantially one and the same (19).

Human-connectedness shifts the emphasis of the process of knowing from “what to know” to “how to know”. The continued spiralling nature of engagement inherent in human-connectedness proposes that the process of knowing is infinite with limitless possibilities. Technology, thru its gadgets and processes, facilitates the process of knowing aimed at attaining human-connectedness. The essentaility of a sense of awe and wonder in the reflective and dialogical nature of human-connectedness is maintained when technology aids us in perceiving those that are seemingly unperceivable because of our inherent human limitations. Technology when aimed at maintaining human connectedness thru the process of knowing then becomes an expression of caring.

Summary and Future Directions

Technological advancement in health care is a reality to stay, shaping the health care professional’s identities and expanding their societal role and contribution. Its perceived gap and contradictory nature with caring seem to take root on their competing focus with the process of knowing. Human-connectedness seen as the intent of knowing was proposed as an alternative view by which technology becomes a facilitator instead of a competitor in the process of knowing the person and makes possible the realization of genuine care at the end. There is a need for continued exploration into the nature and process of human-connectedness which will further close the perceived gap between technology and caring.

COMPETING INTERESTS

The author declare that he has no competing interests.

REFERENCES

1. Dombrowski U, Tobias W : Mental strain as field of action in the 4th industrial revolution. Procedia CIRP 17 : 100-105, 2014
8. Clouder L. Caring as a 'threshold concept': transforming students in higher education into health (care) professionals. Teaching in higher education 10: 505-517, 2005


