EDITORIAL

Nursing the future: Braving possibilities, challenges and dilemmas

Te mahi tapuhi mō ngā rā e tū mai nei: Te ngana ki te tauihu ki te mātai i ngā ara hōu, ahakoa ngā karawhiunga a te hau, me ngā take uaua¹

The future of nursing practice has limitless possibilities. We live in an era where everything is subject to continuous scrutiny, which constantly challenges us to think anew. The once seemingly crystallised truths of the past are now being put to the test, creating the basis for new paradigms and perspectives. In this editorial, I will take you on a journey into the future. A vision inspired by what we can only comment on today as some futuristic possibilities. However, in the next 20-30 years, nurses will perhaps look back and say, 'that's what we were talking about in the 2020s'.

Technology is undoubtedly one of the significant driving forces influencing the practice of nursing. However, technological advances in nursing are not limited to what we currently imagine. How about imagining nursing around futuristic compassionate nursing care that will be delivered effectively through technology (Archibald & Barnard, 2017). The increasing popularity of virtual clinics, and possibly eventually nurse-led virtual clinics globally (Cusack & Taylor, 2010) introduces us to the direction of assessing clients through mobile screen technology. While virtual clinics are becoming more common as part of the health care landscape, nurses have yet to be comprehensively upskilled and prepared on how to perform an accurate 'virtual assessment'. Because virtual proximity depends highly on technology, it requires nurses as well as clients to have acquired knowledge to operate and respond to this platform. The essential navigational skills towards technology may pose challenges and dilemmas for nurses to achieve a technology-driven humane and compassionate connection. Other initiatives

include bio-printed 3D tissues and organs, augmented reality, wearable monitoring devices and drones delivering vaccines to remote areas which are increasingly becoming commonplace (Balasingam, 2017; Ferguson, Davidson, Scott, Jackson, & Hickman, 2015; Murphy & Atala, 2014). Although these technologies offer possibilities for a better future, they also raise corresponding questions around the changing landscape of health care. Nurses face questions regarding roles and jobs they had and how these may change as aspects of their practice is taken over by task-efficient and cost-effective machines.

With all these technological advances forthcoming, it is critical that nurses engage with technology in ways that will facilitate better client outcomes and at the same time maintain the humanistic nurse-client connection. Currently, new technology facilitates client's experience of pain to be detected and recorded by implanted devices, which also simultaneously offer pain relief (Globaldata Healthcare, 2017). This calls for nurses to think about their changing role in knowing about client's physical and emotional experience of pain. In the future, autonomous medical robots could do individual clinical rounds and check/record vital signs. How will these technologies deal with the important aspects of such an interaction such as consent and client privacy? Another very promising innovation is the development of chatbots (interactive messaging robots that recognise and respond to human emotions), which could prompt nurses working virtually that a client in Room B is upset (Kowatsch et al., 2017). While technologies such as these promote efficiencies, these also redefine the nurse-client connection we

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¹Translation: "Nursing for the future: Standing staunch at the bowsprit to scan for new paths, facing the beatings of the weather, and difficult dilemmas."

currently know. Is technology redefining our humane connections and ethical values in nursing?

The debate on these futuristic scenarios must centre on enabling 'more humanistic' options for care while maximising the use of technology to effectively provide safe and competent nursing care. It could be argued that when post-humanistic (beyond human performance) effort is applied to nursing tasks using technology, nurses can then be released to provide more time for humanistic nursing care. If medications get automatically administered by machines, will nurses have more time to communicate and educate clients, which will help alleviate any associated anxiety? When distant, virtual or augmented reality clinics become mainstream, how will nurses need to become professionally skillful in the art of being 'virtually close' to clients in their varying stages of health-illness within a given place and time? As these anticipated changes challenge our current professional scope of practice and redefine humanistic care, nurses need to be innovative when adapting to future practices.

Inevitably, the future of nursing practice is full of both known and unknown challenges. The anticipated global shortage of nurses, the tighter health funding, social

and population trends with comorbidities, and the emergence of brand new health conditions, all constitute our future nursing agenda. A unified nursing sector effort will help prepare our future nurses. Nursing education plays an important role in embracing change that is needed to prepare our future graduate nurses to be flexible and resourceful for the ever-changing world of practice. Nursing clinicians need to apply and utilise contemporary research trends and practice changes that enable current nursing practice to maximise its potential while contributing to social utility and futuristic clinical outcomes. While some of the scenarios I have mentioned might be sitting in a very distant future, Florence Nightingale once suggested that nurses should remain open to the future and progress every day. In her words:

For us who nurse, our nursing is a thing, which, unless we are making progress every year, every month, every week, take my word for it we are going back.

(Florence Nightingale, London, May 1872 cited in Ulrich, 1992, p.12)

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