

GUEST EDITORIAL

Health and Caring – from a European perspective

As a Guest Editor of *International Journal of Qualitative Studies on Health and Well-being's* special edition on health and caring, it is my pleasure to present four original papers that cover a broad range of caring science: from philosophy of care to its empirical practice. The origin of the papers is the authors' engagement in the European Academy of Caring Science (EACS).¹ EACS is a network open to all disciplines that contribute to human care services.

The health oriented work of the scholars in EACS builds on the rich European heritage of Continental Philosophy. In this way, EACS is making use of lifeworld theory and methods that allow researchers and practitioners to access the lived world of patients and professionals as well as other persons in their context. The strong foundation of philosophy facilitates the illumination of existential issues that we all share as humans and it also offers distinctive knowledge and evidence for caring.

The understanding of health is essential for the understanding of caring because the goal of caring is patients' health and the aim of caring is to support and strengthen the individuals' health processes, thereby inviting them to participate in the caring processes. However, the meaning of health is often hidden and seems enigmatic (Gadamer, 1996), and for caring science to know its goal, the phenomenon health has to be further explored and explicitly included in health sciences theory and praxis.

In a recent Swedish publication (Dahlberg & Segesten, 2010), health is essentially defined as "well-being" together with the experience of "being able to". The former meaning refers to an experience of being well and living a good life, and the latter meaning of health refers to the individual's ability to carry through one's smaller and bigger life projects. Both essential meanings of health are intertwined and valid even if illness is present, and are also compatible with a biological meaning of health.

Well-being is a well-known quality and everyone has something to say about it. However, the ambiguity of health spills over on well-being, which often is understood by a taken-for-grantedness. Therefore, we welcome the thorough excursus of

the phenomenon well-being in this special edition, *Kinds of well-being: A conceptual framework that provides direction for caring* (Galvin & Todres, 2011). The authors of this paper have previously published a theory of well-being and now they offer a new exploration of how the theory can be developed towards practice-relevant concerns.

The second paper focuses upon the educational aspects of caring science: *Intertwining caring science, caring practice and caring education from a lifeworld perspective – two contextual examples* (Hörberg, Ozolins & Ekebergh, 2011). The authors build on lifeworld theory and argue that neither caring science nor learning can be understood as separate from life and existence. Their approach to learning illuminates how the understanding of health as a foundational goal of caring can grow and become an everyday tool of caring.

Looking at the history of health care we find that in general health care has been dealing with illness, and the only way to finding health was to go to the area of public health. In the third paper, *Lifeworld-led care: Is it relevant for well-being and the fifth wave of public health action?* (Hemingway, 2011), caring science is transformed to the area of public health in a way that bridges the dualistic gap between health and illness. This approach to health offers a strong alternative to what it commonly means to promote health, but the author's way of doing this is also valid for and can inspire all health care, not only for public health.

In the fourth and last paper of this thematic cluster of articles, caring science is transformed to the area of cultural care: *Exploring the development of a cultural care framework for European caring science*, (Albarran, Rosser, Bach, Uhrenfeldt, Lundberg & Law, 2011). By drawing from the literature, which identifies a lack of evidence of an explicit relationship between caring science and cultural care, the authors present a cultural care model that resonates with the underpinning philosophical values of caring science. In this way, a framework for cultural lifeworld-led care is illuminated.

¹<http://www2.pubcare.uu.se/care/eacs/>

These papers mirror four ways of understanding, transforming and practising caring science, the first one by diving into the very heart of health as well-being, the other three by viewing caring science in different empirical contexts. Both approaches are important. In science, we must consider the essential meanings of our phenomena, but doing that we must also understand every phenomenon's particularities and contextual nuances, which contribute to a wider and deeper understanding of the phenomenon, i.e. both its essential characteristics and its variations are important. My hope is that more researchers will travel this road and little by little deepen the insights into what health means. Thereby, will caring science reach its goal of more human and health-oriented health care, even when illness is included.

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