When defining authenticity, phrases such as "being actually and precisely what is claimed," "genuine," "good faith," and "sincere" are used. Nurses who are genuine display their real selves to clients and do not let themselves become distorted or different because of thoughts or emotions. They act from their hearts and do not need to rehearse or contrive actions. In previous times, nurses were expected to be neutral to attain and maintain a helping relationship (Rogers, 1951). However, neutral behavior often seems depersonalized and sends messages of ambiguity. Ambiguous messages may cause client anxiety because clients may not understand their roles or positions in a relationship.

Nurses take risks to be genuine because such behavior frequently involves expressing negative thoughts and confronting others. However, there may be even more risk when incongruence surfaces between nurse intentions and behaviors. When clients detect incongruence in the nurse–client relationship, feelings of distrust, confusion, and suspicion may arise. Clients may begin to question the credibility of the nurse and the value of the health information being shared. They may only believe the nonverbal messages sent and discount the verbal ones. Finally, therapeutic rapport erodes if clients believe that the nurse is attempting to impress them rather than connect with them (Dinc & Gastmans, 2013).

When a nurse is genuine, action occurs spontaneously. "Being real does not mean being overly familiar"; what the client wants "is an emotionally available, calm, caring proficient resource that can protect, care about, and above all, listen to him or her" (Arnold & Boggs, 1989, p. 439).