

To be helpful, the caring nurse must show empathy, attempt to understand the meaning of health and illness for clients, and respond with respect and authenticity.

*The empathetic nurse* attends carefully and intensely, responds reciprocally to verbal and nonverbal messages, uses appropriate language, time responses appropriately, clarifies and confirms ideas, explores the world from the client's viewpoint, and paces verbal and nonverbal behavior to the client's abilities.

*The caring nurse* spends time with clients, identifies relationships, makes connections based on knowledge, conceptualizes trends and patterns, summarizes appropriately, explains purposes of activities, and identifies nonverbal meanings while engaging in clinical practice activities. Some nurses, especially in inpatient or residential settings, make unexpected visits to client rooms to offer professional nursing services. Caring nurses make clients feel as though they are the most important people in the world.

*The respectful nurse* verbalizes a clear commitment to understand, conveys acceptance, and clearly affirms the client's worth as a unique person while affirming the client's strengths and ability to assume self-responsibility. By offering oneself unconditionally and allowing clients when feasible (in situations in which the client is not at risk for harming self or others) to direct the nurse–client interactions, the nurse shares power with the client and enhances client self-worth and personal identity. The nurse who displays the utmost respect toward clients works actively to maintain client dignity at all times.

*The authentic nurse* consistently responds with genuine thoughts and feelings, resists all urges to playact, assumes ownership of ideas and feelings, and freely shares emotions with clients. Other expressions of authenticity include extending a hand for the client to grasp in times of loneliness or distress, being present with the client in times of need, and connecting with the client on a spiritual level. Authentic nurses do not assume the role of imposter and acknowledge their limitations.

Noncaring or nontherapeutic communication strategies typically make clients feel inferior to the nurse. At times, nurses may demonstrate noncaring behaviors, which communicate the following attitudes: “You have no value,” “I am not interested,” “I’m bored,” or “I have more important things to do than to spend time listening to you.” Other nonhelpful nurse behaviors include being judgmental (e.g., putting personal values, beliefs, or expectations above the client's), making stereotypical responses (e.g., negating the uniqueness of the client by using platitudes or clichés as responses), and changing the subject (e.g., verbally directing the interaction to a new topic of importance to the nurse or by nonverbally signaling that the topic being discussed is not important). When nurses distinguish the main differences between caring and noncaring communication strategies, they can determine how to avoid the strategies that disvalue clients (see                      ).

Failing to listen to clients is perhaps the most noncaring behavior a nurse can exhibit.

Nurses display noncaring behaviors for several reasons. In today's health care system, which values cost over care, some nurses find themselves overwhelmed by professional care tasks and have little time to spend engaging in caring interactions with clients. In addition, some nurses may enter the profession with a high need for control. This need, accompanied by increasing anxiety, sometimes leads nurses to adopt an attitude of superiority that is expressed in negative actions, such as moralizing, rejecting, or