

A response to T. Koch, P. Jenkin & D. Kralik (2004) Chronic illness self-management: locating the 'self'. *Journal of Advanced Nursing* 48(5), 484–492.

I would like to suggest that there may be other perspectives on how the knowledge presented in this paper might assist the development of the concept of self-management. Koch *et al.* (2004) presented three models of asthma-management that were derived from conducting a qualitative study involving older people with asthma and these show how self-management can have different types of involvement. The first model described how the older people complied to medical prescription with a trustful relationship between 'patient and doctor' (Koch *et al.* 2004, p. 488). The second model described the collaboration between the older people and their healthcare providers to manage asthma within the context of their life experience. The third model – the 'self-agency model' described how the older people took ownership of asthma management over their lifetime (Koch *et al.* 2004, p. 489). This empirical study raises awareness of the 'self' in the phenomenon of 'self-management' (Koch *et al.* 2004, p. 490).

The three models of asthma management direct how the concept of self-management evolves (Rodgers 2000). When 'self' is the focus, the concept of self-management needs more clarification of what 'self' means, and how it involves the person in the process of self-management. This clarification involves an explanation of self-management through the human lifespan: for example, how 'self' plays its part in older people as distinct from children or adolescents. Older people with chronic illness attempt to maintain their 'self', while children and adolescents with chronic illness are actively engaged in developing their 'self': that is, they are searching for their identity and autonomy (Steinberg 1999). The different tasks of development are integrated with the tasks of illness-management. Developmental ability, therefore, needs to be clarified and integrated into self-management. And, because chronic illnesses vary in severity, it is challenging to answer the question of whether the severity of illness makes a difference in the application of the three different models of asthma management.

Moreover, the concept of self-management needs to be explored for its variety across cultures as all phenomena occur

in a sociocultural context. Nursing practice and research are essential for knowledge development; the phenomenon of self-management must be examined and studied in order to clarify these dimensions of the concept.

Future research is guided by these challenging questions. Self-management among children and adolescents with chronic illness needs to be explored. The course of illness and its severity may further impact on the nature of self-management. Examining self-management across cultural settings will be beneficial for determining the wider applicability of the concept (Rodgers 2000).

The perspective of 'self' in self-management provided by Koch *et al.*'s paper provides guidance for individualized nursing care. Surprisingly, most of the older people with asthma defined their self-management on the basis of the trust established with their healthcare providers (Koch *et al.* 2004). Nevertheless, that relationship should not be misinterpreted and defined as 'compliance' or 'adherence' by nurses. By focusing on the chronically ill people's experiences, the concept of 'self' provides guidelines to promote effective nursing interventions for people with chronic illness. Nurses who care for people with chronic illness must be able to view the phenomenon as a set of relationships between person, health, environment and nursing (Fawcett 1997). This perspective can enlighten understanding about people living with chronic illness who intend to manage life within their own particular context (Kralik *et al.* 2004). Nurses cannot ignore these issues of human care. They must be aware and respect people's perspectives while at the same time providing a professional service.

In conclusion, for people with chronic illness, the concept of self-management needs more clarification of what 'self' means and how it impacts on styles of self-management also taking account of the person's stage on the lifespan, the severity of their illness and their cultural context. If based on empirical research, and if the person's 'self' can be kept as the focus, nurses will be able to make the art and science of nursing explicit in the important area of care of people with chronic illness.

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