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Professional Identity Formation in Nursing: The Role of Travelbee's Human-to-Human Relationship Model

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Abstract

Professional identity, which integrates personal values, ethical principles, and professional knowledge with the core concepts of nursing, is an essential aspect of nursing education, especially during the transition to professional practice. However, this development is often hindered by challenges such as low self-confidence, emotional fatigue, and communication barriers, particularly in clinical environments. Joyce Travelbee's Human-to-Human Relationship Model offers a comprehensive framework for addressing these challenges by emphasizing the significance of empathy, meaningful communication, and interpersonal connections in nursing care. The model delineates five distinct phases of the nurse-patient relationship—orijinal encounter, emerging identities, empathy, sympathy, and rapport— that promote deeper and more meaningful interactions with patients. This holistic, patient-centered approach enables nurses to address not only the physical health of patients but also their emotional and psychosocial needs, thereby fostering the development of a strong professional identity. This review underscores Travelbee's model as a transformative framework that bridges the technical and emotional dimensions of nursing practice. By cultivating a compassionate, human-centered approach to care, the model empowers both nursing students and professionals to build a robust professional identity. Future research should focus on developing effective strategies to integrate Travelbee's model into nursing education, ensuring its full potential in supporting professional identity formation is achieved.

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1. Introduction

Professional identity in nursing is a conceptual structure that integrates the basic principles, values and understandings of the profession with the individual's personal values, attitudes and beliefs (Cowin et al., 2013; Philippa et al., 2021). Professional identity is not only limited to individual characteristics; it also includes knowledge, recognition by the community, group belonging, ethical rules and social control of professional behaviours (Fitzgerald, 2020; Willetts & Clarke, 2014). This structure is critical for nursing students to adopt their professional roles and maintain their professional attitudes throughout their professional lives (Cöplü & Kartin, 2019). However, professional identity development is a complex process and both the experiences of the individual in the education process and the difficulties encountered in the clinical environment can shape this process (Vabo et al., 2022; Yi et al., 2024).

Especially during nursing education, students' ability to develop their professional identities depends on the provision of an effective learning environment and the support of educators who guide students (Fitzgerald & Clukey, 2022; Vabo et al., 2022; Zeng et al., 2022). In this process, students form their professional ethical values (Haghighat et al., 2020), improve their communication skills with patients and the healthcare team, and gain knowledge and skills specific to their profession (Philippa et al., 2021).

However, it is known that nursing students face various difficulties in the process of professional identity development.

Inadequate knowledge, deficient practical skills and underdeveloped communication competences, especially in the clinical learning environment, are among the main factors that negatively affect this process (Jamshidi et al., 2016). It is stated that these difficulties may lead to negative consequences such as lack of self-confidence (Vabo et al., 2022), professional role stress (Sun et al., 2016) and emotional burnout (Yi et al., 2024). These challenges may negatively affect not only the performance of students in the educational process, but also their long-term professional identity development. Nurses stated that long-term care and contact with patients caused them to experience psychological and emotional stress, and they could not communicate effectively with patients due to psychological tension. Moreover, it is stated that nurses believe that empathy is not given enough importance as a care value as a result of managers' approaches that prioritise physical care, and this leads to ignoring the psychological needs of patients (Taleghani et al., 2018). This suggests that nursing students should strengthen their professional identities by internalising not only technical skills but also values such as empathy, communication and patient-centred care. In this context, educational programmes that support professional identity development can contribute to nursing students' adoption of their professional roles and overcoming the difficulties they face in this process (Maginnis, 2018; Yi et al., 2024).

At this point, Travelbee's Human-to-Human Relationship Model emerges as a significant guide in supporting professional identity development by

highlighting the importance of empathy, meaningful communication, and interpersonal interactions within the nurse-patient relationship (Travelbee, 1969). The model is noted for encouraging nursing students to establish more authentic connections with patients and their families by emphasizing empathy, compassion, and trust (de Medeiros et al., 2022; Jang & Kim, 2019). This review aims to examine the role of Travelbee's Human-to-Human Relationship Model in fostering the professional identity development of nursing students.

2. The Role of Travelbee's Human-to-Human Relationship Model in Professional Identity Development

Joyce Travelbee's human-to-human relationship model is an important theoretical framework that supports the development of professional identity in nursing and focuses on nurse-patient interactions (Shelton, 2016). This model lays the foundation for a meaningful and effective care process by highlighting the central role of interpersonal relationships in nursing practice (de Medeiros et al., 2022; Travelbee, 1969). At the heart of Travelbee's model lies the principle that the nurse should view the patient not merely as a biological entity but also as an individual with emotional, social, and spiritual needs (Parola et al., 2020; Travelbee, 1969). Such a perspective supports nurses in perceiving their profession as a life purpose, making it an integral part of their professional identity.

Effective nursing care, according to this model, can only be achieved when a meaningful relationship is established between the nurse and the patient (Travelbee, 1969). This relationship is thought to strengthen nurses' professional identities by

fostering a more conscious adoption of their professional roles.

Within Travelbee's model, elements such as empathy, voluntary interaction, professional responsibility awareness, and role clarity emerge as key factors for nurses in shaping their professional identities (Travelbee, 1969). Empathy, in particular, enhances nurses' dedication to their profession and motivates them to embrace the core principles of patient-centred care (Waird, 2023). Given that a lack of empathy can adversely impact both the quality of nursing care and patient outcomes (Burkhartzmeyer et al., 2021), Travelbee's empathy-focused approach offers valuable guidance in addressing such deficiencies. As a result, nurses can move beyond a purely technical approach and cultivate a holistic care perspective that prioritises patients' emotional and psychosocial needs. The ability to connect with patients not only on a physical health level but also by forming a human bond significantly influences the growth of their professional identities (Wang et al., 2023).

Voluntary interactions enable nurses to anticipate and address patient needs more effectively, transcending a task-oriented mindset (Fernndez-Basanta et al., 2023). In this regard, it is emphasised that viewing nursing solely as a job can limit the quality of patient care (Kago et al., 2024; Travelbee, 1969).

By fostering empathy and encouraging meaningful interactions, Travelbee's model guides nurses towards developing a deeper understanding of their roles and responsibilities, ultimately strengthening their professional identity (Travelbee, 1969). Travelbee highlights the critical role of professional

responsibility awareness and professional ethics in the development of professional identity (Travelbee, 1969).

This awareness enables nurses to act without deviating from ethical principles in patient care and to perform their profession in harmony with social values (Parola et al., 2020). Travelbee's approach aims to redefine the nursing profession as a profession based on humanitarian and ethical values, away from seeing it only as a technical task area (Shelton, 2016). In this context, it can be said that the human-to-human relationship, which is one of the basic elements of the model, plays a central role in the process of strengthening the professional identities of nurses (Brewington et al., 2023). In particular, the model, which explains the development of meaningful bonds established by the nurse with the patient in phases, allows us to better understand this process. The model explains the development of human to human relationship in five basic phases. These phases are; the original encounter, emerging identities, phase of empathy, phase of sympathy and phase of rapport (Travelbee, 1969).

2.1. Phase of the Original Encounter

This phase involves the first interaction between the nurse and the patient. Both parties observe each other and form first impressions based on verbal and non-verbal cues (Neff et al., 2024).

These impressions are often influenced by stereotypes and past experiences, as neither party knows the other personally at this point (Travelbee, 1969). First impressions or 'first judgements' are critical as they form the basis for future interactions (Neff et al., 2024). This phase is of great importance

for nurses to display their professional stance and gain patient trust. These judgements may change as the relationship develops and more information is gathered.

As the initial interaction progresses, the relationship moves towards a more individualised understanding in the next phase (Travelbee, 1969).

2.2. Phase of Emerging Identities

As interactions progress, the unique identities of both the nurse and the patient gradually come into focus. This phase involves moving beyond preconceived stereotypes and recognising each other as distinct individuals (Travelbee, 1969). The emergence of identities plays a key role in helping nurses embrace their professional roles more transparently and consistently (Brewington & Godfrey, 2020). Replacing initial judgments with a deeper and more nuanced understanding, however, requires both time and continuous interaction (Travelbee, 1969).

This process is essential for breaking down preconceived notions and building a more personalised and effective caring relationship (Travelbee, 1969). As identities emerge and understanding deepens, the relationship can evolve further, supported by the development of empathy (Atta et al., 2024).

2.3. Phase of Empathy

According to Travelbee, empathy is a foundational element in the nurse-patient relationship. It entails understanding the patient's feelings and experiences from their perspective, allowing the nurse to develop a sense of emotional closeness to the patient (Atta et al., 2024). Travelbee emphasises that empathy is not

an immediate process; rather, it requires specific preconditions and a genuine willingness to deeply engage with the patient's situation (Travelbee, 1969).

The development of empathy enables nurses to adopt not only a patient-centered perspective but also emotional sensitivity and a human-centered approach as integral values of their professional identities (Müller et al., 2024). This process also helps nurses anticipate patient behaviours and tailor care to meet individual needs—an essential aspect of effective nursing practice (Mohan et al., 2025; Travelbee, 1969).

Empathy is thought to serve as a cornerstone in shaping professional identity, as it combines a sense of professional responsibility with deeply rooted human values. Building on this foundation, the relationship progresses into a phase of even deeper emotional connection: sympathy (Travelbee, 1969).

2.4. Phase of Sympathy

Sympathy represents a phase that transcends empathy by involving a shared emotional response to the patient's situation. This phase is characterised by a deeper connection, which can be achieved through deliberate cultivation and growth during the empathy phase.

The transition from empathy to sympathy not only enhances nurses' ability to form emotional connections but also ensures that the bond with the patient becomes more meaningful (Travelbee, 1969). In this context, sympathy is regarded as a powerful tool for strengthening the professional identity of nurses within the framework of the human-to-human relationship model. Developing

sympathy allows nurses to deepen their sensitivity to the individual values and needs of the patient, fostering a therapeutic relationship that positively impacts patient outcomes (Younas, 2020).

As an advanced skill, sympathy can further enrich the nurse's patient-centred care approach, making significant contributions to the development of professional identity.

Sympathy, often intertwined with empathy, plays a key role in enhancing nurses' emotional awareness and in fostering meaningful relationships with patients (Pearson, 2021). At the same time, sympathy is thought to help nurses internalise their professional values, laying a stronger foundation for their professional identity. Once sympathy is established, the relationship reaches its most mature and harmonious state: rapport (Travelbee, 1969).

2.5. Phase of Rapport

According to Travelbee (1969), the main purpose of nurse-patient interaction is to develop a harmonious and friendly relationship based on mutual understanding, respect and co-operation. This relationship requires the nurse and the patient to work in partnership for the benefit of the patient (Travelbee, 1969).

This rapport provided in the relationship enable the nurse to perform her/his profession within the framework of human values and ethical principles by removing her/his professional identity from a task-oriented understanding (Koppel et al., 2022). It can be stated that these stages contribute significantly to the construction of professional nursing identity on the axis of human values as well as forming the basis of qualified care delivery. In

addition, the development of a harmonious nurse-patient relationship can expand the scope of professional identity by encouraging nurses to evaluate their profession not only as a field based on technical knowledge, but also with humanitarian and ethical dimensions (English et al., 2022).

Travelbee's human-to-human relationship model is thought to make a unique contribution to the development of professional identity by positioning empathy as an indispensable element of the nursing profession. The model's emphasis on understanding individual differences and exploring the depths of human behaviour expands the scope of nursing education while supporting professional development (Travelbee, 1969). Continuing professional education (Yu et al., 2022) and self-awareness studies provide a deeper understanding of nurses' roles and responsibilities and strengthen human values in patient care (Travelbee, 1969; Younas et al., 2020). Empathy enables the nurse not only to understand the patient but also to redefine their own human values and roles (Travelbee, 1969). Another important aspect of the model is its emphasis on balancing individual differences and shared experiences.

This balance enables the nurse to avoid overgeneralisations in patient care and to understand the unique needs of each individual (Mohan et al., 2025). For this purpose, Travelbee recommends the use of disciplines such as literature and art in the education process (Travelbee, 1969). Because these methods provide awareness of understanding individual differences and enable nurses to centre human values and individual needs in patient care (Schwind et al., 2014).

According to Travelbee, the main problem of nursing is the loss of the emotional bond with the patient (Travelbee, 1969). Today, time and resource constraints in the healthcare system further deepen this loss, leading to a task-oriented approach instead of patient-centred care (Kwame & Petrucka, 2021; Taleghani et al., 2018). This distancing weakens the emotional bonds that nurses establish with patients, increasing the risk of providing a robotic nursing service (Travelbee, 1969). This situation negatively affects patient satisfaction and professional satisfaction of nurses and reveals the lack of approaches that encourage establishing meaningful bonds with patients in nursing education (Lu et al., 2019). In the literature, it is stated that structured education programmes to improve nursing students'interpersonal relationship and empathy skills are limited, which weakens students' perception of professional identity (Beckstrom & Farrow, 2024; Oh, 2019; Peisachovich et al., 2024; Sung & Kweon, 2022). In this context, it is predicted that Travelbee's human-to-human relationship model can provide a theoretical basis to fill this gap.

3. Conclusion

In conclusion, Travelbee's human-to-human relationship model is a powerful tool that guides nurses to develop their professional identities and provide more compassionate, effective and holistic care. This model offers a perspective that reinforces the human-centred nature of the nursing profession and has the potential to improve the quality of health care at both the individual and societal levels. To fully realize the potential of Travelbee's model, future research should explore its application in various educational and clinical settings. Investigating practical strategies to integrate this

framework into nursing curricula will not only enhance professional identity formation but also contribute to improved patient outcomes, greater job satisfaction among nurses, and the overall quality of healthcare.

By bridging the gap between technical expertise and emotional connection, Travelbee's model can play a pivotal role in shaping the future of compassionate and effective nursing care.

Ethical Statement

Ethics committee approval was deemed unnecessary for this study, given that open access sources were utilized.

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Presentation Information

The findings of this study have not been presented at any conference or journal.

Conflicts of Interest

The authors declare no conflicts of interest regarding this study. Any institution or organization providing funding for this research did not have any role in the design, data collection, analysis, interpretation, or publication to influence or distort the findings.

Author Contributions

The contributions of the authors are as follows: İnci İnceleme contributed to literature search and editing the report. Satı Demir conducted the supervision and final revision of the manuscript.

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