Theories and models of nursing practice

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COMPETENCIES

1. Definitions of theory, concept, model, proposition.
2. Explain the relationships of concepts and propositions to theory.
   3. Discuss the purpose of theory.
4. Explain the use of theories from other disciplines:
5. Explain the interdependent roles of nursing practice, nursing theory, and nursing research.
6. History and evolution of nursing theory.
7. Identify common concepts in nursing theories.
8. Identify the three categories relating to the scope of theories.

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Theories and models of nursing practice

**Introduction:**

Nursing theory provides a perspective from which to define the *what* of nursing, to describe the *who* of nursing (who is the client) and *when* nursing is needed, and to identify the boundaries and goals of nursing’s therapeutic activities. Theory is fundamental to effective nursing practice and research. The professionalization of nursing has been and is being brought about through the development and use of nursing theory.

The **basic elements** that structure a nursing theory are concepts and propositions. In a theory, propositions represent how concepts affect each other. A concept is the basic building block of a theory.

**Definitions**

- **A concept:** Is a vehicle of thought? According to Chinn and Kramer (1995, p. 78), the term *concept* refers to a “complex mental formulation of ...our Perceptions of the world.” A concept labels or names a phenomenon, an observable fact that can be perceived through the senses and explained. A concept assists us in formulating a mental image about an object or situation. Concepts help us to name things and occurrences in the world around us and assist us in communicating with each other about the world. Independence, self-care, and caring are just a few examples of concepts frequently encountered in health care. Theories are formulated by linking concepts together.

- **A conceptual framework or Model:** is a structure that links global concepts together and represents the unified whole of a larger reality. The specifics about phenomena within the global whole are better explained by theory.

By its nature, a concept is a socially constructed label that may represent more than a single phenomenon. For example, when you hear the word *chair*, a mental image that probably comes to mind is an item of furniture used for sitting. The word *chair* could
represent many different kinds of furniture for sitting, such as a desk chair, a high chair, or an easy chair.

It is important to remember that the same concept may be used differently in various theories. For example, one nursing theory may use the concept of environment to mean all that surrounds a human being (the external environment), whereas another theory may use this concept to mean the external environment and all the biological and psychological components of the person (the internal environment).

- **What Is a Proposition?**

  A proposition: (another structural element of a theory) is a statement that proposes a relationship between concepts. An example of a nonnursing proposition might be the statement “people seem to be happier in the springtime.” This proposition establishes a relationship between the concept of happiness and the time of the year.

  A nursing propositional statement linking the concept of helplessness and the concept of loss might be stated as “multiple and rapid losses predispose one to feelings of helplessness.” Propositional statements in a theory represent the theorist’s particular view of which concepts fit together and, in most theories, establish how concepts affect one another.

**What Is a Theory?**

A theory: is a set of concepts and propositions that provide an orderly way to view phenomena. In the scientific literature, Nursing theory is developed to describe the phenomenon (process, occurrence, or event) called nursing.

  Nursing theory differentiates nursing from other disciplines and activities that in that the purposes of describing, explaining, predicting, and controlling desired outcome of nursing care practices.

- **The purpose of a theory:** in scientific disciplines is to guide research to enhance the science by supporting existing knowledge or generating new knowledge”. A theory not only helps us to organize our thoughts and ideas, but it may also help direct us in what to do and when and how to do it.

The use of the term theory is not restricted to the scientific world, however. It is often used in daily life and conversation. For example, when telling a friend about a
mystery novel you are reading, you may have said, “I have a theory about who committed the crime.”

**USE OF theories from other disciplines:**

In addition to using theories specifically constructed to describe, explain, and predict the phenomena of concern to nursing, the nursing profession has long used theories from other disciplines.

- **A discipline** is a field of study. Theories from biological, physical, and behavioral sciences are commonly used in the practice of nursing. For example, nonnursing theories such as Maslow’s Hierarchy of Basic Human Needs, Erikson’s Theory of Human Development, and Selye’s General Adaptation Syndrome have been and continue to be useful in nursing practice. These nonnursing theories are often incorporated into nursing practice together with specific nursing theories.

- **Importance of nursing theories in clinical practice:**

Nursing theories provide a framework for thought in which to examine situations. As new situations are encountered, this framework provides a structure for organization, analysis, and decision making. In addition, nursing theories provide a structure for communicating with other nurses and with other members of the health care team. Nursing theories assist the discipline of nursing in clarifying beliefs, values, and goals, and they help to define the unique contribution of nursing in the care of clients. When the focus of nursing’s contribution is clear, then greater professional autonomy and, ultimately, control of certain aspects of practice are achieved. In the broadest sense, nursing theory is necessary for the continued development and evolution of the discipline of nursing. Because the world of health care changes virtually on a daily basis, nursing needs to continue to expand its knowledge base to proactively respond to changes in societal needs. Knowledge for nursing practice is developed through nursing research that, in turn, is used to either test existing theories or generate new theories.
Nursing practice, theory, and research are interdependent. Nursing theory development and nursing research activities are directed toward developing nursing practice standards.

Nurses may use a specific nursing theory to help guide their practice or may choose a more eclectic approach and adopt ideas from several theories. Both of these approaches are valid. Furthermore, nurses may find some theories more appropriate for certain situations. In that case, one theory can be used with a client in a home health care setting, whereas another theory may be more applicable to a client in an acute care environment. Regardless of the approach chosen, nurses will recognize the value and usefulness of nursing theory as a tool for effective nursing practice.

**Common concept in nursing Theories:**

Four concepts common in nursing theory that influence and determine nursing practice are:

1. The person (patient)
2. Health
3. Nursing

Each of these concepts is usually defined and described by a nursing theorist, and although these concepts are common to all nursing theories, both the definition and the relations among them may differ from one theory to another. Of the four concepts,
the most important is that of the person. The focus of nursing, regardless of definition or theory, is the person.

**Relationship of theory to nursing process:**
Professional nurses use theories from nursing and from the behavioral sciences to collect, organize, and classify patient data and to understand, analyze, and interpret patients’ health situations. Theoretical concepts and theories guide all phases of the nursing process, including planning, implementing, and evaluating nursing care, while also describing and explaining desired responses to and outcomes of care.
The major concepts of a chosen model or theory guide each of the nursing process. The concepts serve as categories to the nurse in determining what information is relevant and should be collected to make assessments and to formulate nursing diagnoses. The concepts also suggest the appropriate types of nursing interventions and patient outcomes to be included in the care plan.

**Types of theories:**

“Although theories address relatively specific and concrete phenomena, they vary in scope. Scope refers to the relative level of substantive specificity of a theory and the concreteness of its concepts and propositions”

three different categories relate to the scope of theories: grand theories, middle-range theories, and micro-range theories. This classification is applicable to both nursing and nonnursing theories.

1- **A grand theory** is composed of concepts representing global and extremely complex phenomena. It is the broadest in scope, represents the most abstract level of development, and addresses the broad phenomena of concern within the discipline. Typically, a grand theory is not intended to provide guidance for the formation of specific nursing interventions, but rather provides an overall framework for structuring broad, abstract ideas (Fawcett, 1993). An example of a grand theory is Orem’s Self-Care Deficit Theory of Nursing.

2- **Middle-Range Theory:** A theory that addresses more concrete and more narrowly defined phenomena than a grand theory is known as a middle-range theory. Descriptions, explanations, and predictions put forth in a middle-range theory are intended to answer questions about nursing phenomena, yet they do not cover the full range of phenomena of concern to the discipline. A middle-
range theory provides a perspective from which to view complex situations and a direction for interventions (Fawcett, 1993). An example of a middle-range theory is Peplau’s Theory of Interpersonal Relations.

- **A micro-range theory** is the most concrete and narrow in scope. A micro-range theory explains a specific phenomenon of concern to the discipline (Fawcett, 1993), such as the effect of social supports on grieving and would establish nursing care guidelines to address the problem.

- **History and evolution of nursing theory**

The work of early nursing theorists in the 1950s focused on the tasks of nursing practice from a somewhat mechanistic viewpoint. Because of this emphasis, much of the art of nursing—the value of caring, the relationship aspects of nursing, and the esthetics of practice—was diminished. During the decades of the 1960s, 1970s, and 1980s, many nursing theorists struggled with making nursing practice, theory, and research fit into the then prevailing view of science. Reflecting changes in global awareness of health care needs, several contemporary nursing theorists have projected a new perspective for nursing that truly unifies the notion of nursing as both an art and a science. Noted nursing theorists such as Leininger, Watson, Rogers, Parse, and Newman have been urging the discipline of nursing to embrace this new emerging view that is seen as more holistic, humanistic, client focused, and grounded in the notion of caring as the core of nursing. Since the early 1950s, many nursing theories have been systematically developed to help describe, explain, and predict the phenomena of concern to nursing. Each of these established theories provides a unique perspective and each is distinct and separate from other nursing theories in its particular view of nursing phenomena.

**REFERENCES**

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